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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ 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

A	For th	e 201	3 calenda	ar year, or ta	ax year begi	nning Apı	cil 1	, 2013	, and en	ding	March 31		20 14		
			C Name of	organization	., .,						D Employer ide	ntification n	umber		
) B	Check if ap	plicable	P.E.O	. Sister	hood OK	State Ch	apter								
$^{3}\Gamma$	Addre		Doing Bu	ısıness As					-		73-6	097282			
	~1 -	change	Number	and street (or f	O box if mail is	not delivered to	street addres	ss)	Room/sur	te	E Telephone ni	ımber			
3 1	Instial	return	3700 0	Grand Ave	.						515 255 3153				
: F	Termi	ınated			ovince, country,	and ZIP or fore:	gn postal cod	e							
10 AV	Amen	ded	Des M	oines. T	A 50312	-2899					G Gross receipt	s \$	498,891		
[*] -	Applic	cation		nd address of pr							H(a) Is this a grou	p return for	Yes x No		
≥∟	pendi	ing		•	lverson	- game a	s C abo	We			subordinates H(b) Are all subord		Yes No		
5—	Tayay	empt sta		501(c)(3)	x 501(c) (. 1 1	527	-	halist (see in:			
ⅎ⊹					ational.		ert no)	4947(a)(1)	or	521	┥ `	•			
<u>رزير</u>							011		1. 7.	4 4	H(c) Group exemp	•			
>-		of organ		Corporation	Trust X	Association	Other	-	L Ye	ar of forma	ation 1909 M	State of lega	I domicile 1A		
ناق	art l		nmary												
	1												supporting		
ce											ip, grant,	loan	and award		
E L					en's col										
Governance	2				-		•	-			% of its net assets	S			
Ğ	3	Numb	er of votin	g members of	the governing	body (Part V	I, line 1a)					3	5		
Activities &	4	Numb	er of indep	pendent voting	members of	the governing	body (Part	VI, line 1b).				4	5		
Itie	5	Total r	number of	ındıvıduals er	nployed in cal	endar year 20	13 (Part V, I	ine 2a)				5	1		
<u> </u>	6	Total r	number of	volunteers (es	stimate if neces	ssary)						6	190		
ĕ	7a	Total (unrelated l	business rever	nue from Part \	/III, column (C), line 12					7a			
	1										, . <u></u>	7b			
											Prior Year	C	Current Year		
	8	Contri	butions ar	nd grants (Part	VIII, line 1h)						484,6	40	490,122		
ž	9				VIII, line 2g)										
Revenue	10	Invest	ment inco	me (Part VIII.	column (A), lır	es 3. 4. and 7	d)				7,0	01	4,099		
ř	44	045	/	Dest VIII selv	(A) lines E	G 4 9 5 10 5 4	A		- 11			.71	3,490		
	12	Total	revenue -	add lines 8 th	mn (A), lines o rough 11 (mus	t equal Rart V	III. column	A)=line 121	77		491,8	312	497,711		
_									.0		250,6		254,841		
	14	Renef	ite naid to	or for membe	aid (Part IX, co rs (Part IX, coli	ımn (A) vi	, AUG 1	% ZU14 ·	ICO II	· ·	· ·				
	4-	Saları	es other	compensation	, employee ber	efite (Patt IX	'' Στιμποί 7Δ\	lines 5-10)	<u></u> 0 .	• •	16,8	382	16,878		
Expenses	162	Drofor	es, other t	draising fees	Part IX, colum	n (Δ) line 11s	" OCD	EN, UT	.	• •		-			
l ed	IOA	Total	SSIUIIAI IUI	a company lees (art IX, column	(D) line 25	7 927	- hoder havespeed	Sales of the Paris, of the Par	· · ├──		<u> </u>			
Ä	4.7									-	197,	24	206,461		
					mn (A), lines 1						464,6		478,180		
					17 (must equa			25)		· ·	27,1		19,531		
	19	Rever	iue less ex	xpenses Subt	ract line 18 fro	m line 12	<u></u>	<u></u>	••••	Pari					
Assets or	١										inning of Current		End of Year		
886	20									· ·	430,0	פסי	449,600		
. = 1	=) <i>.</i>						420				
Z	<u> </u>				Subtract line 2	1 from line 20	<u></u>	<u></u>		<u> </u>	430,0	169	449,600		
	art II		gnature E												
Ui	nder pe	nalties o	of perjury, i complete (declare that I had beclaration of or	iave examined t eparer (other tha	his return, incli an officer) is bas	iding accomp sed on all info	canying sched rmation of wh	ules and st	tatements, er has anv	and to the best of knowledge	my knowle	dge and belief, it is		
<u> </u>	,	1	A X. T	- C - A	oparo (omor mo	, , , , , , , , , , , , , , , , , , , ,					91	110			
6:			1/11	ry a. 1)	roppe						ر ۵	1114			
	gn		Signature of	of officer		•					Date				
1	ere		Kathy		e, Direc	tor of I	inance,	/Treasu	rer						
<u> </u>				nt name and title)										
, ,		Print	Type prepa	rer's name		Preparer's si	gnature		Date		Check	If PTIN			
, Pa											self-employ	ed	·		
4	eparer e Only	Firm's	s name								Firm's EIN				
/) US	e only		address >	>							Phone no				
Ma	v the I				preparer show	vn above? (se	e instruction	is)					Yes No		

For Paperwork Reduction Act Notice, see the separate instructions.

Page 2
ment of women; p of Cottey
he Yes 🗴 No
am Yes 🕱 No
vices, as measured by diallocations to others,
ions to various no specific
)
)

Forn	1 990 (2013) Page 2
Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
	P.E.O. is a philanthropic organization where women celebrate the advancement of women;
	educate women through scholarships, grants, awards, loans and stewardship of Cottey
	College; and motivate each other to achieve their highest aspirations.
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No If "Yes," describe these new services on Schedule O
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ 424,843 including grants of \$ 254,841) (Revenue \$)
	Program services are accomplished by collecting and forwarding contributions to various
	P.E.O. projects and scholarships on both the state and national levels; no specific
	statistics are available.
4h	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	, (2.45.mos v, (2.45.mos v
_	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4C	(Code) (Expenses \$) (Nevenue \$)
4d	Other program services (Describe in Schedule O)
45	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 424,843
JSA	

Part	V 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		×
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		ж
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-		<u></u>
3		3		×
4	candidates for public office? If "Yes," complete Schedule C, Part I			-
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	×	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	_		
	"Yes," complete Schedule D, Part I	6	ļ	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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8_		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		×
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			
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		x
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
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		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		×
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	х	
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		×
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
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			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		×
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		ж
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		x
20 a		20a		x
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part I	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	
	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
		22	×	
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		x
h	· · · · · · · · · · · · · · · · · · ·	24b		
	bid the organization involved by proceeds of tax exempt being beyond a temperary period exception.			
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		×
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?			
		25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any			
26				
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II.	26		×
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)			
•	-	28a		x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	204		
	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)			
	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		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			İ
52	complete Schedule N, Part II	32		×
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
33		,,		
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	-	×
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34_	×	ļ
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		x
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			
00	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
2-	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	100		
37		1		
	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	[
	197 Note. All Form 990 filers are required to complete Schedule O	38	x	
			000	100431

Form	990 (2013)			Page
Par	Statements Regarding Other IRS Filings and Tax Compliance			_
	· Check if Schedule O contains a response or note to any line in this Part V			_ـــــــــــــــــــــــــــــــــــــ
		· · · · · ·	Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
þ	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	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 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
	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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		×
b	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		x
	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		
oa	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	×	
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa	•	
U	gifts were not tax deductible?	6b	x	
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
	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		ļ
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			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	[Ì
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	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			
	organization, have excess business holdings at any time during the year?	8	ļ	
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	l		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		ŀ	}
	against amounts due or received from them)	40.		1
	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	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-	-	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	\vdash	-
4	Note. See the instructions for additional information the organization must report on Schedule O		<u> </u>	
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_		{		
	Enter the amount of reserves on hand	14a		×
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	 -	 ^
	186, 186 K med a form 120 to report these payments in 196, provide an explanation in concedit O			

Form 9	990 (2013)		1	Page 6
Part	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			
_	Check if Schedule O contains a response or note to any line in this Part VI			х
Sect	tion A. Governing Body and Management			
	•		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5			
	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 1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	_	x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		х
6	Did the organization have members or stockholders?	6	x	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	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	ж	
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	ж	
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			
Socti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	9 Code	2.1	x
3600	ion b. Folicies (This Section b requests information about policies not required by the internal Nevenue	Cour	Yes	No
40-	Did the assessment to be selected about an increase of the selected of	10a	×	
10a	Did the organization have local chapters, branches, or affiliates?	IUa	-	-
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b	x	
112	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.	11a	x	
11a 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	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	x	
c	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	×	
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		x
b	Other officers or key employees of the organization	15b		x
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	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			
0	organization's exempt status with respect to such arrangements?	16b		
Sect	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ Oklahoma		-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection, Indicate how you made these available. Check all that apply	501(c)(3)s	only)

	·		
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 the		•

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 19 financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization ▶ Kathy A. Soppe, 3700 Grand Ave, Des Moines, IA 50312 (515)255-3153

arm	997	(201	31
OHIL	990	1201	3)

Page **7**

Form 990 (201.	·)										Page I
Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Contractors										
	Check if Sched	ule '	O contains	a response	or note to	any li	ne in this Part	VII			

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

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

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

Check this box if neither the organization nor	any related	lorga	nıza	tior	COL	npen	sate	ed any current office	er, director, or trus	stee
				((C)					
(A)	(B)			Pos	sition			(D)	(E)	(F)
Name and Title	Average	(do i	not ch	heck	more	than c	ne	Reportable	Reportable	Estimated
	hours per					is both		compensation	compensation from	amount of
	Week (list any hours for	<u> </u>				or/trust	<u> </u>	from the	related organizations	other compensation
	related	Individual trustee or director	Institutional trustee	Officer	Key employee	Hıgt emp	Former	organization	(W-2/1099-MISC)	from the
	organizations	rec	tute	cer	e m	nest iloye	Пer	(W-2/1099-MISC)	,	organization
	below dotted	ᅙᆿ	na) oğ	con e				and related organizations
	line)	ıste	trus		8	pen				garria and in
			tee			Highest compensated employee				
		-	-	-		ď				
(1) Margaret L. Alverson	20									
President		x		×				0	0	0
(2) De Ann Bohl	20	ŀ								
Vice President		×		x				0	0	0
(3) Pam Guffey	20									
Organizer		x		x			ļ	0	0	0
(4) Patricia Bitsko	20									
Treasurer		_x	Ш	x			_	15,600	0	0
(5) Susan Pratt	20							_	_	
Secretary		x	\sqcup	×				0	0	0
_(6)	- -									
_(7)										
(0)					_					
(8)								1		
(9)										
(10)										
(11)				-					-	
(12)										
(13)										
(14)				_				<i>"</i>		

Part VII Section A. Officers, Directors, T		y Em	plo			and F	lig	hest Compensat	ed Employ	ees (c	ontinue	d)	
(A) Name and title	Average hours per week (list any hours for	rage Position (do not check more than box, unless person is bott officer and a director/trus						(D) Reportable compensation	(E) Reportable compensation from		Est am	(F) timated ount of other	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizat (W-2/1099-	ions	comp fro orga and	pensation om the inization related nizations	
15)													
16)													
17)													_
18)													
9)													_
20)		-											_
21)													_
22)													_
23)													
24)					-						·····		
25)	- -												
Sub-total C Total from continuation sheets to Part VII, d Total (add lines 1b and 1c) Total number of individuals (including but n reportable compensation from the organizar	Section A ot limited to		list	· ·	 	 	▶ ▶ №	eceived more than	\$100,000	of			
3 Did the organization list any former of	fficer, direct	or, o	r tr	ust	ee,	key	em	ployee, or highe	st compens	sated		Yes I	N
employee on line 1a? If "Yes," complete Schi 4 For any individual listed on line 1a, is the											3		2
organization and related organizations	greater tha	n \$1	50,	000	?	f "Ye	es, "	complete Sched	ule J for	such	4		3
5 Did any person listed on line 1a receive for services rendered to the organization? If	or accrue c	ompe	nsat	tion	fro	m an	y u	nrelated organizat	ion or indiv	ridual	5		>
ection B. Independent Contractors									-				
1 Complete this table for your five highest compensation from the organization Report year	ompensated t compensa	indep tion fo	end or th	lent e c	co. aler	ntract idar y	ors ear	that received more ending with or wi	e than \$10 thin the org	0,000 d anizatio	of on's tax		
(A) Name and business a	ddress							(B) Description of se	ervices	С	(C) ompens	ation	
lone							+						_
					-		+			-			_
2 Total number of independent contractor	ors (include	na h	ıt ı	not	lin	nited	to	those listed ah	ove) who				_
received more than \$100,000 of compensa								0	2.0,0				

Part VIII	Statement of Revenue

		Check if Schedule O contains a respon	nse or note to ar	ny line in this Part V	Ш		
	•			(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	ь	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above	240,640				
	h	Total. Add lines 1a-1f		490,122			
ž			Business Code				
Program Service Revenue	2a b c d						
ogr	f	All other program service revenue					
4	g 3	Total Add lines 2a-2f	est, and	4,099	4,099		
	,	other similar amounts)		2,033	1,033		
	5	Income from investment of tax-exempt bond p Royalties					-
	3	(i) Real	(II) Personal			•	
	6a	Gross rents	, ,				
	ь	Less rental expenses					
	c	Rental income or (loss)		j			
	d	Net rental income or (loss)		j	1		1
	7 a	(i) Securities	(II) Other				
	/ a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis		1			
		and sales expenses					
	С	Gain or (loss)					
	d	Net gain or (loss)	<u> ▶</u>				
ne	8a	Gross income from fundraising					
Other Revenue		events (not including \$					
Ş	1	of contributions reported on line 1c)		1			
jr F		See Part IV, line 18 a		1			
ţ	b	Less direct expenses b					1
0	9a	Net income or (loss) from fundraising events. Gross income from gaming activities See Part IV, line 19 a					}
	Ь	Less direct expenses b	l l		ļ		1
		Net income or (loss) from gaming activities			ļ		1
	10a						
	-	returns and allowances a	⁻ 4,670				
	ь	Less cost of goods sold b	·1,180		ļ		
	С	Net income or (loss) from sales of inventory		3,490	3,490		
		Miscellaneous Revenue	Business Code				
	11a						<u> </u>
	ь						
	C					. .	
	d	All other revenue					
	e	Total. Add lines 11a-11d		407 711	2 500		-
	12	Total revenue. See instructions	<u></u>	497,711	7,589		

Part IX Statement of Functional Expenses

Section 501(c)(3) and	d 501(c)(4) c	organizations	must complete all columns	All other organizations must of	complete column (A)

	. Check if Schedule O contains a resp	onse or note to any lin	e in this Part IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21.	246,303	246,303		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	8,538	8,538		
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				
	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)	15 600	5 000	7.0.400	
7	Other salaries and wages	15,600	5,200	10,400	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
	Other employee benefits		100	0.50	
	Payroll taxes	1,278	426	852	
	Fees for services (non-employees)				
	Management				
	Legal	3,875		3,875	
	Accounting	3,013		3,073	
	Lobbying				
	Professional fundraising services See Part IV, line 17. Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
	Office expenses				
	Information technology	1,630			1,630
	Royalties				
	Occupancy				
	Travel	39,330	13,110	26,220	
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	8,541	2,748	5,496	297
20	Interest				
21	•	146,705	146,705		
22	Depreciation, depletion, and amortization	941		941	
23	Insurance	341		941	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column		1		
	(A) amount, list line 24e expenses on Schedule O)				
	Operating Expense	5,439	1,813	3,626	
h	·			5,020	
d	·				
e	All other expenses				
	Total functional expenses. Add lines 1 through 24e	478,180	424,843	51,410	1,927
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ if following SOP 98-2 (ASC 958-720)				
ISA	Tollowing GOT 50-2 (MGC 530-720) , , , , , , ,				5 000 (2042)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Par	t X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	103,670	1	97,884
	2	Savings and temporary cash investments	326,399	2	351,716
	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			
				5	
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section			
Assets		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	
SSI	8	Inventories for sale or use		8	
٩	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or			
		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 IV, line 11		12	
	13	Investments - program-related See Part IV, 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)	430,069	16	449,600
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors,			
abi		trustees, key employees, highest compensated employees, and			
=		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			
	İ	of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
S		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.		;	
ĕ	27	Unrestricted net assets		27	
ala	28	Temporarily restricted net assets		28	
В Ш	29	Permanently restricted net assets		29	
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here			
9		complete lines 30 through 34.			
Assets	30	Capital stock or trust principal, or current funds		30	
155	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net /	32	Retained earnings, endowment, accumulated income, or other funds	430,069		449,600
Ž	33	Total net assets or fund balances	430,069		449,600
	34	Total liabilities and net assets/fund balances	430,069	34	449,600

	(2010)		1 41	<u> </u>
Part	XI Reconciliation of Net Assets		-	
	Check if Schedule O contains a response or note to any line in this Part XI	· · · ·		ᆜ
1	Total revenue (must equal Part VIII, column (A), line 12)		497,	
2	Total expenses (must equal Part IX, column (A), line 25)		478,	
3	Revenue less expenses Subtract line 2 from line 1			531
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		430,	069
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		449,	600
art	The state of the s			
	Check if Schedule O contains a response or note to any line in this Part XII			×
			Yes	No
1	Accounting method used to prepare the Form 990 🗴 Cash 📗 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		×
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			i
	reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	x	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		_×
	If the organization changed either its oversight process or selection process during the tax year, explain 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			
	the Single Audit Act and OMB Circular A-133?	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	3b		
		Form	990	(2013)

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

section 501(c) and section 527
Attach to Form 990 or Form 990-EZ.

2013
Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service 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

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

Inspection

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	of organization			Employer identi	fication number
	E.O. Sisterhood OK			73-60972	
Par	t I-A Complete if the o	organization is exempt under	section 501(c) or i	s a section 527 orgai	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				
		· · · · · · · · · · · · · · · · · · ·			
Par		organization is exempt under s			
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 t I-C Complete if the o	organization is exempt under	section 501(c) ex	cent section 501/c\/3	1
					<u> </u>
1		expended by the filing organization			
2		ng organization's funds contributed			
2		es			
3		enditures Add lines 1 and 2 En			•
•					
4		e Form 1120-POL for this year?			
5	Enter the names, addresses	and employer identification numb	er (EIN) of all section	on 527 political organiza	ations to which the filing
		s For each organization listed, en			
		tributions received that were prom nd or a political action committee (I			
					(e) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate
					political organization If none, enter -0-
					Hone, enter -o-
(1)					
			· · · · · · · · · · · · · · · · · · ·		
(2)					
<u></u>					
(3)					
(4)		<u>-</u>			
(*)					
(5)					
15/					
(6)				***	-
,					

Sched	ule C (Form 990 or 990-EZ) 2013					Page
	t II-A Complete if the organization 501(h)).	inization is exe	empt under sectio	n 501(c)(3) and	filed Form 5768 (ele	
A C			to an affiliated ground share of excess		art IV each affiliated g litures)	roup member's
B C	theck ▶ If the filing organ	ization checked	I box A and "Imited	l control" provisi	ons apply	`
		n Lobbying Expe			(a) Filing	(b) Affiliated
	(The term "expenditu	res" means amo	unts paid or incurred	l.)	organization's totals	group totals
1 a	Total lobbying expenditures to					
b	Total lobbying expenditures to					
C	Total lobbying expenditures (ac					
d	Other exempt purpose expende	tures				
е	Total exempt purpose expendit					
f	Lobbying nontaxable amount	Enter the amou	nt from the followin	g table in both		
_	columns	· · · · · · · · · · · · · · · · · · ·				
<u> 1</u>	f the amount on line 1e, column (a)	or (b) is: The lobby	ing nontaxable amount	t is:		
1	Not over \$500,000		e amount on line 1e			
<u> </u>	Over \$500,000 but not over \$1,000,0	\$100,000	plus 15% of the excess	s over \$500,000		
	Over \$1,000,000 but not over \$1,500	,000 \$175,000	plus 10% of the excess	s over \$1,000,000		
<u>[</u>	Over \$1,500,000 but not over \$17,00	00,000 \$225,000	plus 5% of the excess	over \$1,500,000		
	Over \$17,000,000	\$1,000,00		1		
g	Grassroots nontaxable amount					·
h	Subtract line 1g from line 1a If	zero or less, ente	r-0			
i	Subtract line 1f from line 1c If					
j 	If there is an amount other the reporting section 4911 tax for the reporting section 4			-		Yes N
						·
	(Some organization		eraging Period Unde		o complete all of the fiv	70
	_		ne instructions for li			· C
		Lobbying Exp	enditures During 4-1	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))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
е	Grassroots ceiling amount (150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2013

f Grassroots lobbying expenditures

. (election under section 501(h)).	1 (a)		(b)		
or each "Yes," response to lines 1a through 11 below, provide in Part IV a detaile escription of the lobbying activity	Yes	No		Amo	unt	
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	1					
a Volunteers?						
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i	ر. ا					
Media advertisements?						
d Mailings to members, legislators, or the public?						
Publications, or published or broadcast statements?	.					
f Grants to other organizations for lobbying purposes?	•					_
Direct contact with legislators, their staffs, government officials, or a legislative body?						—
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?						—
Total Add lines 1c through 1i	•					
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						
If "Yes," enter the amount of any tax incurred by organization managers under section 4912	1		·			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		1				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).), or s	ectio	n		
301(0)(0).					Yes	
Were substantially all (90% or more) dues received nondeductible by members?				1	ж	Ī
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		None		2	×	Γ
Did the organization agree to carry over lobbying and political expenditures from the prior year	ri			3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N					3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." Dues, assessments and similar amounts from members	o," OR (b) Pa			3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes."	o," OR (b) Pa	rt III-/		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include as political expenses for which the section 527(f) tax was paid). a Current year	O," OR (b) Pa	1 2a		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include as political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	O," OR (b) Pa	1 2a 2b		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include as political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total	o," OR (b) Pa	1 2a 2b 2c		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include ai political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e)	o," OR (b) Pa	1 2a 2b		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include ai political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) If notices were sent and the amount on line 2c exceeds the amount on line 3, what por	nounts	b) Pa	1 2a 2b 2c		3, is	
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501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include air political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) If notices were sent and the amount on line 2c exceeds the amount on line 3, what por excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	nounts dues tion of t	b) Pa	1 2a 2b 2c 3		3, is	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include an political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) If notices were sent and the amount on line 2c exceeds the amount on line 3, what por excess does the organization agree to carryover to the reasonable estimate of nondeductible and political expenditure next year?	dues ton of t	b) Pa	1 2a 2b 2c 3 4 5	A, line		
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501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "N answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include as political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) If notices were sent and the amount on line 2c exceeds the amount on line 3, what por excess does the organization agree to carryover to the reasonable estimate of nondeductib and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information rovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affilial)	dues ton of t	b) Pa	1 2a 2b 2c 3 4 5	A, line		

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

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

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

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

► Attach to Form 990.

Name of the organization

OMB No 1545-0047

Open to Public Inspection

Employer identification number

73-6097282 P.E.O. Sisterhood OK 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 1 2 Aggregate contributions to (during year) 3 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 land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure 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 b Number of conservation easements on a certified historic structure included in (a) 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 6 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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

Par	Organizations Maintaining Co	llections of	Art, Hist	orical T	reasu	res,	or Oth	ner Similar	Asse	ts (conti	nue	<u>d)</u>
3	. Using the organization's acquisition, acc collection items (check all that apply)	ession, and o	other record	ds, check	c any c	of the	follow	ing that are	a sigr	nificant us	se of	fits
а	Public exhibition		d 🗆	Loan	or exch	ange	program	ns				
b	Scholarly research		e	⊣ i		_	-					
С	Preservation for future generations		<u></u>									
4	Provide a description of the organization	n's collections	and expla	in how t	hev fu	rther	the or	anization's	exemp	t purpose	ın l	Part
	XIII				,			,				
5	During the year, did the organization solic	at or receive o	donations o	fart histi	orical ti	easu	res or	other similar				
	assets to be sold to raise funds rather than								_	Yes		No
Par	IV Escrow and Custodial Arrange										/ lin	
	or reported an amount on Form											
1a	Is the organization an agent, trustee, custo								_			1
	included on Form 990, Part X?	· · · · · · ·							L	Yes		No
b	If "Yes," explain the arrangement in Part X	(ill and compl	ete the folk	owing tab	ole							
	_							Am	ount			
С	Beginning balance					-						
	Additions during the year					-						
е	Distributions during the year					-						
f	Ending balance								-		1 1	
2a	Did the organization include an amount o	n Form 990,	Part X, line	217					٠. لـ	Yes		No
	If "Yes," explain the arrangement in Part X											
Par	V Endowment Funds. Complete				,							
4.		Current year	(b) Prio	r year	(C) Tv	vo year	s back	(d) Three year	rs back	(e) Four y	ears b	ack
1a	Beginning of year balance		 		 							
	Contributions											
С	Net investment earnings, gains,											
a	and losses											
	Grants or scholarships		<u> </u>	···								
е	Other expenditures for facilities											
	and programs											
	Administrative expenses				ļ							
g	End of year balance	.	L		<u> </u>							
2	Provide the estimated percentage of the observation Board designated or quasi-endowment			(line 1g,	columi	1 (a))	neid as					
a	_	~	_%									
b	Temporarily restricted endowment	% %										
·	The percentages in lines 2a, 2b, and 2c si		00%									
32	Are there endowment funds not in the po	•		tion that	are he	ld and	d admir	ustered for th	_			
Ja	organization by	330331011 01 11	ne organiza	tion that	arc nc	ia and	2 0011111	iistered for th		V	es	No
	(i) unrelated organizations									3a(i)	63	140
	(ii) related organizations									3a(ii)	-+	
h	If "Yes" to 3a(ii), are the related organizati									3b	-	
4	Describe in Part XIII the intended uses of		-						• • •	30		
Par				**************************************	100							
Fai	Complete if the organization a	nswered "Ye	es" to Form	990, P	art IV,	line 1	l1a Se	ee Form 99	0, Par	t X, line 1	10	
	Description of property		other basis	(b) Cost	or other b	asıs		cumulated eciation	(0	d) Book value	е	
1a	Land		stment)	, ,		-	dehi					
b	Buildings											
c	Leasehold improvements					$\neg \uparrow$						
d	Equipment					$\neg \dagger$		-	_			
e	Other											
	. Add lines 1a through 1e (Column (d) mi		n 990, Part	X, columi	1 (B), lii	10 10	(c))	▶				

Schedule D (Form 990) 2013

JSA 3E1270 1 000

Part VII	Investments - Other Securities.	"Ves" to Form 990	, Part IV, line 11b See Form 990, Part X, line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)	(b) Book value	Cost or end-of-year market value
	al derivatives		
	r-held equity interests		
(3) Other_			
(A)			
(B)			
(C)			
(D)			
15/			
(G)			
(U)			
- ` ´ ´ 	nn (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII			1
T GIT VIII		"Yes" to Form 990	Part IV, line 11c See Form 990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation
/1\			Cost or end-of-year market value
(1)			
(3)			
(4)			
(5)			
(6)			
(7)	77.44 (201		
(8)			
(9)			
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 13)		
Part IX	Other Assets.		<u> </u>
	Complete if the organization answered	"Yes" to Form 990), Part IV, line 11d See Form 990, Part X, line 15
	(a)	Description	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	lump (h) must equal Form 000, Bart V, col (B) li	no 15 \	
Part X	lumn (b) must equal Form 990, Part X, col (B) In Other Liabilities.	ne 15)	· · · · · · · · · · · · · · · · · · ·
PailA		l "Yes" to Form 990), Part IV, line 11e or 11f See Form 990, Part X,
	line 25	1 100 101 0111 000	, ratery, and rid or riv occioning ood, ratery,
1.	(a) Description of liability	(b) Book valu	Je
	eral income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colui	mn (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.

	. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
2	Total revenue, gains, and other support per audited financial statements	1	497,711
	Amounts included on line 1 but not on Form 990, Part VIII, line 12	-	20,,,11
a b	Net unrealized gains on investments Donated services and use of facilities 2a 2b	1	
C	Recoveries of prior year grants 2c	1	
ď	Other (Describe in Part XIII)	†	
e	Addition 0 through 01	2e	
3	Subtract line 2e from line 1	3	497,711
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII) 4b	1	
_	Add Inco 4e and 4h	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		497,711
Part			
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements	1	478,180
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	1	
d	Other (Describe in Part XIII)	1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	478,180
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII)	1	
С	Add lines 4e and 4h	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18).	5	478,180
Part	XIII Supplemental Information.		
		mation	4, Part X, line
			4, Fall X, line
			4, Fall X, line
			4, Part X, line
			4, Fall X, line

Schedule D (F	Form 990) 2013	Page 5
Part XIII	Supplemental Information (continued)	
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		.

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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.

<u>8</u>
Form
\$
tach
► Att

2013

OMB No 1545-0047

Open to Public

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

Name of the organization	Employer identification number	
P.E.O. Sisterhood OK State Chapter	73-6097282	
Part I General Information on Grants and Assistance		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	assistance, and	[
the selection criteria used to award the grants or assistance?	x Yes	° Z

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

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(a) Description of	(h) Purpose of grant
or government		ıf applicable	grant	cash assistance	(book, r.mv, appraisal, other)	non-cash assistance	or assistance
College, 1000 W Austin							
Nevada, MO 64772	440545271	501(c)(3)	67,975	0			GenSupp/Schol
(2) P.E.O. Educational Loan Fund							
loines, IA 50312	426078059	501(c)(3)	17,025	0			Educ. Loans
(3) P.E.O. Int'l Peace Scholarshp							
oines, IA 50312	426078058	501(c)(3)	17,090	0			Scholarships
(4) P.E.O. Program for Contin Ed							
Moines, IA 50312	237405311	501(c)(3)	17,837	0			Educ. Grants
Moines, IA 50312	421379026	501(c)(3)	17,362	0			Educ. Awards
(6) P.E.O. STAR Scholarship							
[A 50312	300583651	501(c)(3)	15,934	0			Scholarships
(7) P.E.O. Foundation							
Moines, IA 50312	426094564	501(c)(3)	4,425	0			Schol/Grants
(8) Oklahoma P.E.O. Projects Fd.							
153, Leonard, OK 74043-0153	736107830	501 (c (3)	88,655	0			Schol/Grants
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government org	overnment or		anizations listed in the line 1 table			▲ :: :: :: ::	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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

Schedule I (Form 990) (2013)

Schedule I (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
1 Scho	1 Scholarships to Cottey College	4	8,538	0	0 N/A	N/A
2						
_ 						
4						
ۍ ا						
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 information	on reguired in Pa	art I, line 2, Part I	ll, column (b), and any c	other 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 and Oklahoma P.E.O. Projects Fund, all other organizations

share a mailing address of 3700 Grand Ave, Des Moines, IA 50312.

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 Name of the organization

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

OMB No 1545-0047 **Open to Public** Inspection

Employer identification number P.E.O. Sisterhood OK State Chapter 73-6097282

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 Oklahoma 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.

Schedule O (Pulm 990 of 990-EZ) (2013)		Page Z
Name of the organization	Employer identification number	
P.E.O. Sisterhood OK State Chapter	73-6097282	
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	- -	
		- -
		
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SCHEDULE R (Form 990)

Name of the organization Department of the Treasury Internal Revenue Service

P.E.O. Sisterhood OK State Chapter

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

See separate instructions.

2013	Open to Public

OMB No 1545-0047

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

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33

Employer identification number

Inspection

73-6097282

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2013 (f) Direct controlling ŝ × entity? Yes Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year (f) Direct controlling (e) End-of-year assets entity N/A (if section 501(c)(3)) Public chanty status (d) Total income -(c) Legal domicile (state or foreign country) Exempt Code section 501(c)(3) Legal domicile (state or foreign country) Oklahoma (b)
Primary activity POB 153, Leonard, OK 74043 EIN 73-61076830 Grants/Schol Primary activity (a) Name, address, and EIN (if applicable) of disregarded entity For Paperwork Reduction Act Notice, see the Instructions for Form 990. Name, address, and EIN of related organization (1) Oklahoma P.E.O. Projects Fund Part I Part II <u>(</u>6) (2) <u>ල</u> 4 (5) (2) **€** 5 £)__ (5) (e) ව

JSA 3E1307 1 000

(i) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2013 Yes No (k) Percentage ownership ownership (h) Percen-tage (J) General or managing partner? Yes No Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year (g) Share of end-of-year assets amount in box 20 of Schedule K-1 (Form 1065) (i) Code V-UBI (f) Share of total (h) Disproportonate allocators? Ŷ income Yes (g) Share of end-of-year assets (e)
Type of entity
(C corp. S corp. or trust) (f) Share of total income (d)
Direct controlling
entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (c) Legal domicile (state or foreign country) (b) Primary activity (d)
Direct controlling
entity (c)
Legal
domicile
(state or
foreign (a)Name, address, and EIN of related organization (b) Primary activity (a)
Name, address, and EIN of related organization JSA 3E1308 1 000 (1) N/A (1) N/A Part IV Part III <u>[</u>2] <u>[3</u> ଅ **(**2) 3 4 €, <u>(S</u> 9 <u>©</u> \mathbb{S} 9

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36	on Form 990, Parl	IV, line 34, 35b, or 36	Ì			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	2
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ated organizations liste	ed in Parts II-IV?	1.	-	+	,
				4-	- -	۱,
b Girt, grant, or capital contribution to related organization(s)			•	2 4	×	,
				ָב קיי	+	ډ پ
 a Loans or loan guarantees to or for related organization(s) b Loans or loan guarantees by related organization(s) 			•	2 4	+	۰ ×
			•	-		
f Dividends from related organization(s).	•		•	11		×
g Sale of assets to related organization(s)				19		×
Purchase of assets from related organization(s)				1h	<u> </u>	×
				Ę	-	×
				į.	H	×
						;
K Lease of facilities, equipment, of otner assets from related organization(s)			:	¥	+	ĸ
I Performance of services or membership or fundraising solicitations for related organization(s)				=		×
m Performance of services or membership or fundraising solicitations by related organization(s)			:	ا	-	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	×	
				10	×	
p Reimbursement paid to related organization(s) for expenses			•	1p	_	×
q Reimbursement paid by related organization(s) for expenses			:	5	+	×
			•	=	1	×
s Other transfer of cash or property from related organization(s)	complete this line and and and and	covered relationships and transaction thresholds	ction thresh	18 P	\exists	x
If the distret to diff of the above is less, see the list decides for information on who must						l
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	(d) f detern t involvi	ouuu eq	
(1) Oklahoma P.E.O. Projects Fund	p	88,655	Cash-FMV	2		
(2)						1
(6)						
(4)						
(5)		:				
(9)						
13A 0.00			Schedule R (Form 990) 2013	Form 9	90) 2	013

JSA 3£1309 1 000

Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37 Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b) (c) (d) (e) (f) (f) Single of the predominant of entity (state or foreign income (related Solutio(3)) (e) (f) Single of the entity (state or foreign income (related Solutio(3)) (f) (f) Single or foreign income (related Solutio(3)) (f) Single or foreign income	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related unrelated, excluded	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	,	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?		(k) Percentage ownership
				Yes No			Yes	No.	Ì	Yes	o Z	
(1)												
(2)												
(3)												
(4)												
(5)												
(9)												
<u>(7)</u>												
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