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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

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.

Open to Public Inspection

	or th	e 2014 calendar year, or tax year b	eginning April 1	<u>, 20</u> 14	, and endin	g Ma			, 20 15		
		C Name of organization					D Employer identi	fication r	number		
B c	heck (fap	P.E.O. Sisterhood OF	State Chapter]				
	Addres						31-61	81539)		
	Name	change Number and street (or P.O. box if ma	il is not delivered to street add	dress)	Room/suite		E Telephone number				
	Instial	eturn 3700 Grand Ave					515 2	55 31	L53		
	Final r termin		try, and ZIP or foreign postal o	code				•			
	Ameno		2-2899				G Gross receipts	\$	489,2		
	Applic		,				H(a) Is this a group subordinates?	return for	Yes x		
_	pcu.	Linda C. Hall - same	as C above				H(b) Are all subordina	tes included?	Yes		
ī	Tax-exe) (4) ◄ (insert no)	4947(a)(1)	or 52	7	If "No," attach	alıst (see	instructions)		
		e. www.peointernational		1 7,2			H(c) Group exemption	n number	▶ 1072		
			X Association Other	•	L Year o	f forma	ation 1927 M St				
_	irt l	Summary							<u> </u>		
		Briefly describe the organization's mission	on or most significant active	nties Women	's membe	rsh	ip organiza	tion	support:		
a		six philanthropic projec									
Š		programs and a women's c					TE!_21551_				
Governance											
Š		Check this box If the organization					1	.			
		Number of voting members of the govern						3			
ctivities &		Number of independent voting members						1			
ıţį.		Total number of individuals employed in					⊢	5			
cţi		Total number of volunteers (estimate if ne					· · · · · · · ⊢	3			
ď	7a	Total unrelated business revenue from Pa	irt VIII, column (C), line 12	! .				а			
	b	Net unrelated business taxable income fr	om Form 990-T, line 34 .	<u></u>		<u></u>					
							Prior Year		Current Year		
a)	8	Contributions and grants (Part VIII, line 1)	1)				487,48	12	489,0		
Revenue		Program service revenue (Part VIII, line 2g									
eve	40	Investment income (Part VIII, column (A)	lines 3 4 and 7d)			-	21	.3			
œ	11	Other revenue (Part VIII, column (A), line	s 5 6d 8c 9c 10c and 1		EINED.		4,36	1	- 2		
	12	Total revenue - add lines 8 through 11 (r	nust equal Part VIII. colum	· · · · · · · · · · · · · · · · · · ·		၂ပ္တ	492,05		488,8		
	13	Grants and similar amounts paid (Part IX,	column (A) lines 1-3)			118	277,95	_	277,8		
	14	Benefits paid to or for members (Part IX,	column (A), line 4)	al : AUG: 1	. ·1· 2015·	3					
		Salaries, other compensation, employee					2,46	2	6,6		
penses								"-			
en		Professional fundraising fees (Part IX, col		OGD.			1				
Εxτ		Total fundraising expenses (Part IX, colur					002.00		227 /		
		Other expenses (Part IX, column (A), line					223,09		237,7		
		Total expenses Add lines 13-17 (must e					503,51		522,2		
	19	Revenue less expenses Subtract line 18	from line 12			ļ	-11,45	_	-33,4		
s or						Begi	inning of Current Ye		End of Year		
set alar	20	Total assets (Part X, line 16)					245,05	8	211,6		
d B	21	Total liabilities (Part X, line 26)									
Net Assets or Fund Balances		Net assets or fund balances. Subtract lin					245,05	8	211,6		
Pa	rt II	Signature Block									
		alties of perjury, I declare that I have examine						ny knowl	edge and belief		
true	, corre	ct, and complete Declaration of preparer (other	than officer) is based on all ii	nformation of wh	ich preparer ha	as any	knowledge				
		Mathy a. Soppe	-				8/4	- (15			
Sig	n	Signature of officer	· · · · · · · · · · · · · · · · · · ·				Date				
Hei	re	Kathy A. Soppe, Dire	ctor of Finance	/Treasur	er						
		Type or print name and title		,					-		
		Print/Type preparer's name	Preparer's signature		Date		1 1	PTIN			
							Check :	'			
Paid	l		i				sen-employed	'			
Paid Pre	l oarer						- 				
Pre		Firm's name					Firm's EIN				
Pre _l Use	oarer Only	Firm's name Firm's address RS discuss this return with the preparer s					Phone no				

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2014)

JSA 4E1020 1 000

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		×
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	1		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	·	5	ж	
_	Part III	3		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8_		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		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		×
4.4	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1,1,		C
11			i syt	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	VII, VIII, IX, or X as applicable	546		'
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		×
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			i
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
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		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
120		12a	x	
	complete Schedule D, Parts XI and XII	120		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	426		
4.5	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		-	x
	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		x
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		x
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?	<u> </u>	t	† <u> </u>
. 3		19		×
20-	If "Yes," complete Schedule G, Part III	20a	 	×
		$\overline{}$		_
D	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	L	

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			ĺ
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	<u> </u>
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	1		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
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		<u> </u>
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		x
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		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		×
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,"			
	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
	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,			
	or IV, and Part V, line 1	34		×
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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	L	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	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			
	and that is treated as a partnership for federal income tax purposes? If "Yes, " complete Schedule R,		[
	Part VI	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
		Form	990	(2014)

Part V	_ , , , , , , , , , , , , , , , , , , ,			
	Check if Schedule O contains a response or note to any line in this Part V	· · · ·	Yes	No
12 F	nter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	3.77	1.77	
	nter the number of Forms W-2G included in line 1a Enter -0- if not applicable		,	
	id the organization comply with backup withholding rules for reportable payments to vendors and		,	
	eportable gaming (gambling) winnings to prize winners?	1c	×	
	nter the number of employees reported on Form W-3. Transmittal of Wage and Tax I		1803 m	
	tatements, filed for the calendar year ending with or within the year covered by this return . 2a 1			14
	at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	لافتها در المعد
	ote. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		ign viva	<u></u> *:
	id the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Water Towns	×
	"Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	t any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	ver, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	count)?	4a		×
	"Yes," enter the name of the foreign country			
	ee instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	BAR) I as the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5ã	-	x
	id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×
	"Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		 -
	oes the organization have annual gross receipts that are normally greater than \$100,000, and did the	"		-
	rganization solicit any contributions that were not tax deductible as charitable contributions?	6a	×	
	"Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		
		6b	×	
	ifts were not tax deductible?	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	rganizations that may receive deductible contributions under section 170(c).	,	*	
	id the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		ĺ
	nd services provided to the payor?	7b		
	"Yes," did the organization notify the donor of the value of the goods or services provided?	7.0		-
	id the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		
	equired to file Form 8282?	1		
		- 7е		İ
	id the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	<u> </u>	-
	id the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
•	the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>9</u>	<u> </u>	-
	the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? ponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
		8	٠. ٠	
	ponsoring organization have excess business holdings at any time during the year?		-	
	ponsoring organizations maintaining donor advised funds.	9a		
	the sponsoring organization make any taxable distributions under section 4966?	9b		
	nd the sponsoring organization make a distribution to a donor, donor advisor, or related person?	70	, 1,	
	ection 501(c)(7) organizations. Enter Introduction fees and capital contributions included on Part VIII. line 12	1		
		عدد قر قورت	344 · ·	
	, , , , , , , , , , , , , , , , , , , ,	- 1.5	~, ¹	1
	ection 501(c)(12) organizations. Enter	19.75	1.0	٠ ،
	ross income from members or shareholders	117	¥	100
	ross income from other sources (Do not net amounts due or paid to other sources	100	(\$\).	
	gainst amounts due or received from them)	40-		1
	ection 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		-
	"Yes," enter the amount of tax-exempt interest received or accrued during the year	-		1
	ection 501(c)(29) qualified nonprofit health insurance issuers.	<u></u>		ļ <u>.</u>
	the organization licensed to issue qualified health plans in more than one state?	13a	 -	
	ote. See the instructions for additional information the organization must report on Schedule O.		的數	(31,7
	nter the amount of reserves the organization is required to maintain by the states in which		م المراجعة المراجعة	7.
	ne organization is licensed to issue qualified health plans		是四年	2
	nter the amount of reserves on hand	71 6.7	Eggs A.C.	, 4e
	did the organization receive any payments for indoor tanning services during the tax year?	14a		×
	"Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	L	<u> </u>
JSA 40 1 000		Form	990	(201

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	See in	struc	"No" tions
Sect	ion A. Governing Body and Management			
<u> </u>	ion A. Governing Body and management		Yes	No
	Enter the number of voting members of the governing body at the end of the tax year		_	
1a	Effect the flumber of voting members of the governing body at the end of the tax year	1 1		
	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	1 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	_		
	any other officer, director, trustee, or key employee?	2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х
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	×	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
' a	one or more members of the governing body?	7a	×	
D	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7b	x	
	stockholders, or persons other than the governing body?	7.0		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1
	the year by the following			
а	The governing body?	8a	×	ļ
b	Each committee with authority to act on behalf of the governing body?	8b	×	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e)_	,
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	×	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	1	ĺ	
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	×	ļ
44-		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	12a	×	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	-	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	×	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			}
	describe in Schedule O how this was done	12c	×	ļ
13	Did the organization have a written whistleblower policy?	13	ļ <u>.</u>	×
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?		1	
_	The organization's CEO, Executive Director, or top management official	15a		×
a		15b	1	ж
b	Other officers or key employees of the organization	1.00	1	† <u> </u>
	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	40-		-
	with a taxable entity during the year?	16a	 	×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		1	1
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		1	
	organization's exempt status with respect to such arrangements?	16b	l	
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501(c)(3)	s only
. •	available for public inspection. Indicate how you made these available. Check all that apply	,	,	,
	Own website Another's website X Upon request Other (explain in Schedule O)			
40	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest	polic	v and
19		.01031	POIN	, and
	financial statements available to the public during the tax year	do Þ		
20	State the name, address, and telephone number of the person who possesses the organization's books and recor Kathy A. Soppe, 3700 Grand Ave, Des Moines, IA 50312 (515)255-33	us ► L53		

Part VII	Compensation of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Contr	actors								
	Check if Schedule	O contains	a response	e or note to	any li	ne in this Part	VII	<u> </u>	<u> </u>	

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	orgai	nıza	tion	cor	npens	sate	d any current offic	er, director, or trus	tee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	High empl		(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations				
(1) Linda C. Hall President	40	×		×				0	o	0
(2) Jan K. Knuckey	40									
Vice President		×		×				0	0	0
(3) Lyn R. Wilhoite	35									
Organizer	35	×	-	x				0	0	0
(4) Linda Coulles	35							0	0	o
Treasurer (5) Kylie Smith	30	×		x			-		ļ ·	
Cogratary		×		x			1	0	0	o
		-		-						
_(7)										
	ļ	-								
(10)									-	
(11)		_								
(12)					_					
(13)	ļ	<u> </u>								
(14)	 	-								

(A) Name and title	(B) Average hours per week (list any hours for related	Position (do not check more than or box, unless person is both officer and a director/truste or director director director) Officer and a director/truste or director directo					an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	on from	(F) Estimated amount of other compensation from the	Ī
	organizations below dotted line)	Individual trustee or director	Institutional trustee	if.	Key employee	Highest compensated employee	91	(W-2/1099-MISC)	·		organizatio and related organization	d
15)												
16)												
17)				,								
18)		<u> </u>			-							
19)			-									
20)					-							
21)									-			
22)												
23)	ļ											
24)		<u> </u>	_					,				
25)												
1b Sub-total	Section A .						> > >					
2 Total number of individuals (including but no reportable compensation from the organization)		o thos	se li	sted 0	at —	ove)	who	received more th	nan \$100,0	00 of		, ·
3 Did the organization list any former officemployee on line 1a? If "Yes," complete Scheoo	icer, direc	tor, c uch in	or ti divid	rust dua	ee, /	key	em	ployee, or highe	st compen	sated	Yes	No x
4 For any individual listed on line 1a, is the organization and related organizations g individual	reater tha	n \$1	50,	000	?	If "Ye	es, "	complete Sched	lule J for	such	4	3
5 Did any person listed on line 1a receive o for services rendered to the organization? If "	r accrue c	ompe	nsa	tion	fro	m an	y u	nrelated organiza	tion or indiv	/idual	5	3
Section B. Independent Contractors												
1 Complete this table for your five highest cor compensation from the organization Report year												
(A) Name and business add	dress							(B) Description of s	ervices	C	(C) Compensation	
lone												
	-											
Total number of independent contractor received more than \$100,000 of compensat		ng bi	ut r	not	lım	uted	to	those listed ab	ove) who	3 4 7	Property .	

Par	Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII										
1		· ·	(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 206, Fundraising events 1c Related organizations 1d Government grants (contributions). 1e	423								
Contribut and Othe	t g h	All other contributions, gifts, grants, and similar amounts not included above . 1f 282, Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	_								
Program Service Revenue	2a b c d e f	All other program service revenue	code _								
ā	3 4 5	Investment income (including dividends, intere and other similar amounts)	st, 20	20							
	6a b c	Gross rents	_								
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses									
Other Revenue	c d 8a	Gain or (loss)									
Other	9a	Net income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19	. •			-					
	c 10a	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowancesa	135								
	b c	Net income or (loss) from sales of inventory. Miscellaneous Revenue Business		-271							
	11a b c	All other revenue									
	e 12	Total Add lines 11a-11d		-251							

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all colu	mns All other organizations must complete column (A)
--------------------------------	--	--

	Check if Schedule O contains a respo	nse or note to any line	In this Part IX	 	<u> </u>
	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 domestic organizations				
	and domestic governments See Part IV, line 21	276,685	276,685		
2	Grants and other assistance to domestic individuals See Part IV, line 22	1,166	1,166		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals 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	6,047	2,016	4,031	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	623	208	415	
11					
	Management				
	Legal	4,000		4,000	
	Accounting				WF1 - C V T TI
	Lobbying				
	Professional fundraising services See Part IV, line 17. Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column				
2	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology	500			500
15	Royalties				
16	Occupancy				
17	Travel	71,735	23,912	47,823	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	25,023	8,013	16,027	983
20		110 705	110 505		
21	•	112,725	112,725		
22		1,335		1,335	
23		1,333		1,333	
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)				
a	Operating Expense	22,446	7,482	14,964	
t	·				
•					
c					
	All other expenses	E22 285	432 202	00 505	1 402
	Total functional expenses Add lines 1 through 24e Joint costs. Complete this line only if the	522,285	432,207	88,595	1,483
20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)				
ICA.			<u>.</u>		

Page 11 Form 990 (2014) **Balance Sheet** Part X (A) End of year Beginning of year 136,669 Cash - non-interest-bearing 120,736 1 74,939 Savings and temporary cash investments........ 124,322 2 2 Pledges and grants receivable, net 3 3 4 4 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 Inventories for sale or use 8 9 10a Land, buildings, and equipment cost or 10a other basis Complete Part VI of Schedule D 10c Investments - publicly traded securities 11 11 12 12 Investments - other securities See Part IV, line 11 Investments - program-related See Part IV, line 11 13 13 14 14 15 15 245,058 16 211,608 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 18 18 19 19 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 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties..... 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 26 Total liabilities. Add lines 17 through 25........ 26 Organizations that follow SFAS 117 (ASC 958), check here Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 Fund 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here

Form 990 (2014)

211,608

211,608

211,608

30

31

32

245,058

245,058 33

245,058 34

ö

Assets

Net/

30

31

32

33

34

complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

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

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

Form **990** (2014)

x

3a

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

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its 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

	•	that have filed Form 5766 (election u	, , , ,	· ·						
		that have NOT filed Form 5768 (elect								
Гах)	(see separate instructions), then		Tax) (see separate i	nstructions) or Form 990-E	Z, Part V, line 35c (Proxy					
	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III								
	e of organization			, ,	ntification number					
P.	E.O. Sisterhood OH			31-61815						
Par	rt I-A Complete if the o	rganization is exempt under	section 501(c) or	is a section 527 organ	nization.					
1		organization's direct and indirect								
2	Political expenditures			▶ \$						
3										
Par	t I-B Complete if the c	rganization is exempt under	section 501(c)(3).							
1	Enter the amount of any exc	ise tax incurred by the organization	on under section 495	55 ▶ \$						
2	Enter the amount of any exc	ise tax incurred by organization n	nanagers under sect	ion 4955 ▶ \$						
3	•	a section 4955 tax, did it file Form								
4a	Was a correction made?				Yes No					
	If "Yes," describe in Part IV									
Par	t I-C Complete if the c	rganization is exempt under	section 501(c), e	xcept section 501(c)(3).					
1		xpended by the filing organization								
	activities			▶\$						
2	Enter the amount of the filir	ng organization's funds contribute	d to other organizat	ions for section						
		es								
3		enditures Add lines 1 and 2 E								
	line 17b									
4	Did the filing organization file	e Form 1120-POL for this year?	<u></u>	<u></u> <u>.</u>	. Yes No					
5	Enter the names, addresses	and employer identification num	ber (EIN) of all secti	on 527 political organiza	ations to which the filing					
		s For each organization listed, e ributions received that were prof								
		nd or a political action committee								
		· · · · · · · · · · · · · · · · · · ·	(c) EIN	(d) Amount paid from	(e) Amount of political					
	(a) Name	(b) Address	(C) EIN	filing organization's	contributions received and					
				funds If none, enter -0-	promptly and directly					
					delivered to a separate					
					political organization If					
					none, enter -0-					
1)			_}							
2)			_							
3)			_							
4)			_							
			ļ							
5)			_							
				-						
6)			4							
			1							

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

Schedule C (Form 990 or 990-EZ) 2014

Sch	edule C (Form 990 or 990-EZ) 2014					Page 2		
	art II-A Complete if the organize section 501(h)).					ction under		
A	Check ▶ if the filing organizat name, address, EIN, e	xpenses, and	share of excess	lobbying expend	ditures).	roup member's		
В	Check ▶ If the filing organizat	on checked	box A and "limited	control" provisi	ons apply.			
	Limits on Lo (The term "expenditures"	bbying Expen means amou		.)	(a) Filing organization's totals	(b) Affiliated group totals		
1a	Total lobbying expenditures to influer	ce public opin	ion (grass roots lob	bying),,,,,				
b	Total lobbying expenditures to influer	ce a legislativ	e body (direct lobby	ring) [
c	Total lobbying expenditures (add line	s 1a and 1b) .		[
	Other exempt purpose expenditures			•				
	Total exempt purpose expenditures (
	Lobbying nontaxable amount Enter			T T				
	columns		_					
	If the amount on line 1e, column (a) or (b	is: The lobbyin	ng nontaxable amount	is:				
	Not over \$500,000		amount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 p	lus 15% of the excess	over \$500,000				
	Over \$1,000,000 but not over \$1,500,000		lus 10% of the excess	<u> </u>				
	Over \$1,500,000 but not over \$17,000,00		lus 5% of the excess	over \$1,500,000				
	Over \$17,000,000	\$1,000,000						
-	Grassroots nontaxable amount (ente	25% of line 1f)					
_	Subtract line 1g from line 1a If zero							
	<u> </u>		ss, enter -0-					
i	If there is an amount other than ze				tion file Form 4720			
	reporting section 4911 tax for this ye	_			<u> </u>	Yes No		
			raging Period Unde					
	(Some organizations that mad	e a section 50	01(h) election do ne	ot have to comp	ete all of the five colur	nns below.		
	S	ee the separa	te instructions for	lines 2a through	2f.)			
	L	obbying Expe	nditures During 4-1	ear Averaging Pe	eriod	T		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total		
2a	Lobbying nontaxable amount		_ ,					
t	Lobbying ceiling amount (150% of line 2a, column (e))							
_	: Total lobbying expenditures							
	Grassroots nontaxable amount							
	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures							

Pai	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	For	m 576	3		
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	,	
	· · · · · · · · · · · · · · · · · · ·	Yes	No		Amoi	ınt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local						
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of		.				
а	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		_				
b							
C	Media advertisements?						
d	Mailings to members, legislators, or the public?						
e	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
9	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
į :	Other activities?						
j 2a	Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	If "Yes," enter the amount of any tax incurred under section 4912						
c	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?						
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	or s	ection	1		
	501(c)(6).	-,(-,	,				
						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	None		2	ж	1
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				3		ж
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members		о) Ра 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, iine	3, IS	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou		of				
	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
C	TotalAggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	s.		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion	of th	ne	1 1			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	ppair	ng				
_	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)			4			
5				5			
	t IV Supplemental Information	1		N D-4			
	ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated te instructions), and Part II-B, line 1. Also, complete this part for any additional information.	gro	up iisi	ı), Pait	II- / A, II	iles	i and
2 (5)	e instructions), and Part II-B, line 1. Also, complete this part for any additional information						
							

Schedule C (F	Form 990 or 990-EZ) 2014	Page 4
Part IV	Supplemental Information (continued)	
		· · · · · · · · · · · · · · · · · · ·
	<u> </u>	
•		
		<u> </u>
		
		·
		

SCHEDULE D (Form 990)

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.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service
Name of the organization

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

Inspection

	o d' la la la company		21 6101530
	O. Sisterhood OH State Chapter Organizations Maintaining Donor Adv	icad Funda or Other Similar Funda or	31-6181539
Par			Accounts.
	Complete if the organization answered		(h) Funda and other populate
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor		
	funds are the organization's property, subject to th		
6	Did the organization inform all grantees, donors,		
	only for charitable purposes and not for the bene	fit of the donor or donor advisor, or for a	
	conferring impermissible private benefit?		Yes No
Pai	t II Conservation Easements.		
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the	e organization (check all that apply)	
	Preservation of land for public use (e.g., red	· -	of a historically important land area
	Protection of natural habitat	Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization h	eld a qualified conservation contribution in	
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement	s	2b
С	Number of conservation easements on a certified	historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, tra	nsferred, released, extinguished, or termin	ated by the organization during the
	tax year ▶		
4	Number of states where property subject to conse	ervation easement is located >	
5	Does the organization have a written policy re-	egarding the periodic monitoring, inspec	tion, handling of
	violations, and enforcement of the conservation ea		
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation eas	ements during the year
	>		
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easemer	nts during the year
	▶ \$		
8	Does each conservation easement reported on lir	ne 2(d) above satisfy the requirements of se	ction 170(h)(4)(B)(ı)
9	In Part XIII, describe how the organization reports		
	balance sheet, and include, if applicable, the text		al statements that describes the
	organization's accounting for conservation easem		0' ''
Pa	t III Organizations Maintaining Collection		r Similar Assets.
	Complete if the organization answered		
1a	If the organization elected, as permitted under S works of art, historical treasures, or other simi public service, provide, in Part XIII, the text of the	FAS 116 (ASC 958), not to report in its i	revenue statement and balance sheet
	public service, provide, in Part XIII, the text of the	footnote to its financial statements that des	cribes these items
b	If the organization elected, as permitted under	SFAS 116 (ASC 958), to report in its re	evenue statement and balance sheet
	works of art, historical treasures, or other simi	lar assets held for public exhibition, edu-	cation, or research in furtherance of
	public service, provide the following amounts rela		
	(i) Revenue included in Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a		
	following amounts required to be reported under		
а	Revenue included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X	<u></u>	<u></u>

Par	Organizations Maintaining Coll	ections of Art, H	Storical I	reasur	es, c	or Otti	ei Siiiliai As	sets (COII	inue	<u>u)</u>
3	Using the organization's acquisition, acce	ssion and other rec	ords check	anv o	f the	follow	ing that are a s	significant i	ise of	f its
Ū	collection items (check all that apply)	oolon, and other rec	0,00,	, .			.,,,g,			
а	Public exhibition	a [Loan c	r excha	anae	progran	ns			
. p	Scholarly research	e			_					
c	Preservation for future generations	- L				-		-		
4	Provide a description of the organization's	s collections and ex	olain how t	hev fur	ther	the ord	anization's exe	mpt purpos	e in F	Part
•	XIII			,			,			
5	During the year, did the organization solicit	or receive donations	of art histo	orical tr	easur	es. or o	other similar			
•	assets to be sold to raise funds rather than							Yes		No
Par	IV Escrow and Custodial Arrangem								V. lin	e 9.
	or reported an amount on Form							,	•	,
		· · · · · · · · · · · · · · · · · · ·	. ,							
1a	Is the organization an agent, trustee, custo	dian or other interm	ediary for c	ontribu'	tions	or othei	assets not			
	included on Form 990, Part X?							. Yes		No
b	If "Yes," explain the arrangement in Part X									·
	· · · · · ·						Amour	nt		
С	Beginning balance				1c					
d	Additions during the year									
е	Distributions during the year									
f	Ending balance				1f					
2a	Did the organization include an amount on				or cus	stodial	account liability?	Yes		No
b	If "Yes," explain the arrangement in Part X	III Check here if the	explanation	has be	en pr	ovided	n Part XIII			
Par										
			rior year			s back	(d) Three years ba		years b	ack
1 a	Beginning of year balance									
b	Contributions									
	Net investment earnings, gains,									
	and losses		ļ							
d	Grants or scholarships		• ,				·			
	Other expenditures for facilities				·					
	and programs									
f	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the cu	rrent year end balar	ice (line 1g,	columr	ı (a))	held as				
а	Board designated or quasi-endowment	%						•		
b	Permanent endowment ▶ %									
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c sh	ould equal 100%								
3a	Are there endowment funds not in the pos-	session of the organ	zation that	are hel	d and	d admir	istered for the			
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations									
b	If "Yes" to 3a(II), are the related organization									
4	Describe in Part XIII the intended uses of t	he organization's en	dowment fui	nds					•	
Par	Land, Buildings, and Equipment Complete if the organization and	nworod "Voo" to Ed	rm 000 P	ort IV	lina 1	110 80	ac Form 990 I	Part Y line	10	
	Description of property	(a) Cost or other basis					umulated	(d) Book va		
		(investment)		ther)			eciation	,		
	Land				_					
b	Buildings				-					
C	Leasehold improvements									
d	Equipment									
<u>e</u>	Other									
Tota	. Add lines 1a through 1e (Column (d) mus	st equal Form 990, Pa	art X, colum <u>ı</u>	n (B), Iır	ne 10((c))	▶			

Schedule D (Form 990) 2014

JSA 4E1270 1 000

Part VII	Investments - Other Securities. Complete if the organization answere	ed "Yes" to Form 990.	Part IV. line 11b. See Form 990,	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year mark	tion:
1) Einancis	al derivatives		-	
	held equity interests		-	
				
(A)				
- <u>` - '</u> (B)				
(C)				
(D)				
(E)				
(F)	·			
_(G)				
(H)				
	n (b) must equal Form 990, Part X, col. (B) line 12)			
art VIII	Investments - Program Related.		5 · 10 · 11 · 0 · 5 · 000	D 1 V 1 40
	Complete if the organization answere			
	(a) Description of investment	(b) Book value	(c) Method of valua Cost or end-of-year mar	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 13)		<u> </u>	<u>. </u>
Part IX	Other Assets. Complete if the organization answere	nd "Ves" to Form 990	Part IV line 11d See Form 990	Part Y line 15
			, Fait IV, line 11d. See Form 390	(b) Book value
(4)	(a) L	escription		(b) Book value
(1)	<u> </u>			
(2)				
(4)		<u></u>		
(5)	·			
(6)			****	
(7)				
(8)				
(9)				
	umn (b) must equal Form 990, Part X, col (B)) line 15)		
Part X	Other Liabilities.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Complete if the organization answere line 25	ed "Yes" to Form 990	, Part IV, line 11e or 11f See For	m 990, Part X,
	(a) Description of liability	(b) Book valu	ue	
	ral income taxes	(2) 2001113		
(2)			· ·	
(3)				
(4)				
(5)			-	
· - /	*			
(6)				
(6)				
(6) (7)				
(6) (7) (8)			-	
(6) (7) (8) (9)	nn (b) must equal Form 990, Part X, col (B) line 25	(1)		

Part	Reconciliation of Revenue per Audited Financial Statements with Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	n.	
1	Total revenue, gains, and other support per audited financial statements	1	488,835
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities 2b	1	
c	Recoveries of prior year grants 2c	1	
d	Other (Describe in Part XIII)	1	
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	488,835
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)	1 1	
	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		488,835
Part			
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	522,285
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) Add Inco 30 through 3d		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	522,285
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)	_	
C	Add lines 4- and 45	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	522,285
2, Part	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, F XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional infor	mation	·
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Schedule D (Form 990) 2014	Page 5
Part XIII Supplemental Information (continued)	
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	·····

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

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2014

Open to Public

Employer identification number

31-6181539

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od OH State Chapter	formation on Grants and Assistance
O. Sisterhoc	General In
P.E.(Part I

ŝ x Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States the selection criteria used to award the grants or assistance?.......

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Cottey College, 1000 W Austin							
Nevada, MO 64772	440545271	501(c)(3)	66,833	0			GenSupp/Schol
(2) P.E.O. Educational Loan Fund							
3 Moines, IA 50312	426078059	501(c)(3)	26,464	0			Educ Loans
(3) P.E.O. Int'l Peace Scholarshp							
3 Moines, IA 50312	426078058	501(c) (3	26,372	0			Scholarships
(4) P.E.O. Program for Contin Ed							<u>i</u>
Des Moines, IA 50312	237405311	501(c) (3	40,546	0	i	ļ	Educ Grants
(5) P.E.O. Scholar Awards							
Des Moines, IA 50312	421379026	501(c) (3	27,607	0			Educ Awards
(6) P.E.O. STAR Scholarship							
Moines, IA 50312	300583651	501(c) (3	29,576	0			Scholarships
(7) P.E.O. Foundation							
Moines, IA 50312	426094564	501(c) (3	59,287	0			Schol/Grants
(8)		ı					
(6)							
(10)							-
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	government	t organizations l	isted in the line 1 ta	ible		•	7
3 Enter total number of other organizations listed in the line	sted in the lin	ne 1 table				•	0

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

Schedule I (Form 990) (2014)

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Schedule I (Form 990) (2014)	Part III Grants Part III c	(a) Type	-	2	, n	4	5
14)	Part III Grants and Other Assistance to Domestic Individuals. 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					
	ion answered "Yes" to Fo	(e) Method of valuation (book, FMV, appraisal, other)					
	n 990, Part IV, line 22	(f) Description of non-cash assistance					
g,							

9

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

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

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

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

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

3700 Grand Ave, Des Moines, IA 50312.

SCHEDULE 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

2014

Open to Public Inspection

P.E.O. Sisterhood OH State Chapter

Employer identification number

P.E.O. Sisterhood OH State Chapter	31-6181539
Part VI, Lines 6-7b: The organization's members consist of the act	cive, 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 p	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	pers are asked to
review the return and respond with any questions, though no formal	l review process is
currently in place.	<u> </u>
Part VI, Line 12c: Conflict of Interest policies and signature page	ges are distributed each
year to all exectuive board members and to any committee members l	having influence over
financial transactions. Signature pages are collected by the state	te president and
monitored for completion. Any conflicts of interest that arise a	re to be reported
immediately to the affected committee/board, and the remaining men	mbers vote on the
appropriate action.	
Part VI, Line 19: Governing documents, conflicts of interest police	cy and financial
statements are available to members upon request. These items are	e not made available
to the general public.	
Part XII, Line 2b: The organization's financial statements were a	udited by an independent
accountant on a cash basis.	

Schedule O	(Form 990 or 990-EZ) (2014)	, ag	
	organization	Employer identification number	
P.E.O.	Sisterhood OH State Chapter	31-6181539	
 			
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