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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)

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Ā	F	or the	2014	calendar	year, or t	ax year be	ginning A	pril	, 2014	, and end	ing Ma:	rch 31	•	, 20 15	,
_				C Name of or	ganization							D Employer ide	ntification	number	
ㅂ	Ch	eck if appli	cable	P.E.O.	Sister	hood VA	State Ch	apter							
		Address change	Ì	Doing busin	ess as			•		-		54-6	072508	3	
Ì		Name ch	ange	Number an	d street (or l	O box if mail	is not delivered t	to street ad	dress)	Room/suite		E Telephone nu	mber		
j		Initial re	turn	3700 Gr	and Ave	•						515	255 31	153	
- 1		Final ret terminat								-					
l		Amende										G Gross receip	ots \$	27	79,520
Ì		Applicati	on	F Name and	address of p	nncipal officer		-				H(a) is this a gro		Yes	s x N
		j pending	ļ	Priscil	lla G.	Koellind	g - same	as C	above			subordinates H(b) Are all subore		Yes	-
ī		ax-exen	not sta		501(c)(3)	x 501(c)		sert no)	4947(a)(1)	or 5	27	If "No," atta	ch a list (see	instructions)	, 🗀
j						ational	` ` ` ` `	,				H(c) Group exem	ption number	▶ 107	12
K		orm of			Corporation	Trust X	1	Othe	r Þ	L Year	of format	ion 1949 M			
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	3								V, line 2a)				6		75
POSTMARK DATE	3					stimate if nec									
3	`								2				7a		
	\dashv	DN	iet ur	related busi	ness taxab	le income troi	m Form 990-1	, line 34	· · · · · · · ·	• • • • •		Prior Year	7b	Current	Vaar
` 3	.	•											700		
g	8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d). RECEIVED										$\vdash \vdash \vdash$	274,	/ 0 0		9,395
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				•			5, 6d, 8c, 9c,		1	1. 1. 501	5 HS		623		
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						•	olumn (A), line		سنسنناها	مسبسبسبس. ا ده	1.1	170,	214		66,783
		14 B	Benefi	ts paid to or	for membe	rs (Part IX, co	olumn (A), line	4)	(A), lines 6-10)	シピル・シ					
	è	15 S	Saları	s, other cor	npensation	, employee be	enefits (Part IX	, column	(A), lines,5-40)	1.0	•				
	xpenses					((7)	/			•				
(T)	꿃			_			n (D), line 25)				-				
2015							11a-11d, 11f-2				•	103,			00,134
				•			ual Part IX, coli				.	273,			6,917
774 	<u> </u>	19 F	Reven	ue less expe	enses Sub	ract line 18 fr	om line 12	<u></u>		<u></u>	· _ ·		795		L2,603
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	25					Subtract line	21 from line 2	<u>0</u>	 			208,	233	22	20,836
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Form 990 (2014)

For Paperwork Reduction Act Notice, see the separate instructions.

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 w	omen;
	educate women through scholarships, grants, awards, loans and stewardship of Cott	еу
	College; and motivate each other to achieve their highest aspirations.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
-	prior Form 990 or 990-EZ?	x No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	× No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as mean expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ 240,858 including grants of \$ 166,783) (Revenue \$)
	Program services are accomplished by collecting and forwarding contributions to v	
	P.E.O. projects and scholarships on both the state and national levels; no specif	ic
	statistics are available.	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)	_)
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$	_)
		
44	Other program services (Describe in Schedule O)	
→u	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ 240,858	

Part	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			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		×
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	ж	
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		×
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		ж
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	1		
	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		ж
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		ж
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
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		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a	ж	
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		x
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
þ	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		ж
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		ж
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		ж
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		х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		ж
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	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			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22	x	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	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			-
	through 24d and complete Schedule K If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	
	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		×
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?			1
	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		×
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		×
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
	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		×
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,			l
•	Part I	31		×
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		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	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		1
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		l
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	۲Ť		
	19? Note. All Form 990 filers are required to complete Schedule O	38	×	1
			990	10011

Par				
	Check if Schedule O contains a response or note to any line in this Part V			
	·	- ;	Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	- å,	7,1	*16
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		- 1	
С	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 0			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
	If "Yes," has it filed a Form 990-T for this year? If "No" 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	42		×
	account)?	4a	-	<u> </u>
D	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
5 0	(FBAR) 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		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			l
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	×	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b	×	
7				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		_	
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f		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. Did a donor advised fund maintained by the		- ~	i
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	9a	-	
	Did the sponsoring organization make any taxable distributions under section 4966?	9b		-
10 `	Section 501(c)(7) organizations. Enter	35	-	ļ
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	, , .		
	against amounts due or received from them)	<i>#</i> ,	٠,,	
12a	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand		<u> </u>	<u> </u>
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
L.	TIT "YOU " DOUBT THOSE OF FORM 7.70 TO CORDET TROOD ROYMONTO? IT "NO " REQUIRE OR AVAIONATION IN SOMEOUILA ()	. 7 A P		r .

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Si				$\overline{}$		
	Check if Schedule O contains a response or note to any line in this Part VI	• • • • • •		• •	×		
Sect	ion 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	5	ŀ				
	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		I				
b	Enter the number of voting members included in line 1a, above, who are independent	5			1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation	ship 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 per		3		x		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.		4		×		
5	Did the organization become aware during the year of a significant diversion of the organization's asset		5		ж		
6	6 Did the organization have members or stockholders?						
7a	Did the organization have members, stockholders, or other persons who had the power to elect of		ŀ				
	one or more members of the governing body?		7a	x			
b	Are any governance decisions of the organization reserved to (or subject to approval by)		Ì				
	stockholders, or persons other than the governing body?		7b	x			
8	Did the organization contemporaneously document the meetings held or written actions undertak						
	the year by the following						
а	The governing body?		8a	×			
b	Each committee with authority to act on behalf of the governing body?		8b	x			
9							
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		ж		
Secti	on B. Policies (This Section B requests information about policies not required by the Interna	l Revenue	Code	;)			
				Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?		10a	x			
	If "Yes," did the organization have written policies and procedures governing the activities of such	1					
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?						
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 of						
	rise to conflicts?	- 1	12b	x			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy	If "Yes"					
•	describe in Schedule O how this was done	· I	12c	x			
13	Did the organization have a written whistleblower policy?		13		ж		
14	Did the organization have a written document retention and destruction policy?)	14	x			
15	Did the process for determining compensation of the following persons include a review and approximately activities activities and approximately activities activities and approximately activities activities activities and approximately activities activities activities and activities and activities activitie						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and						
а	The organization's CEO, Executive Director, or top management official		15a		ж		
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 arr	angement	-				
	with a taxable entity during the year?	·	16a		ж		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the control of the						
~	participation in joint venture arrangements under applicable federal tax law, and take steps to safe						
	organization's exempt status with respect to such arrangements?		16b				
Sect	ion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶ None						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990)-T (Section	501(:)(3)s	onlv)		
	available for public inspection. Indicate how you made these available. Check all that apply	,	, -	, <i>, -</i>	, ,		
	Own website Another's website Don request Other (explain in Schedul	e O)					
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict of inte	erest i	oolicy	, and		
	financial statements available to the public during the tax year			,	,		
20	State the name, address, and telephone number of the person who possesses the organization's books	and records	s ▶				
	Vether 3 Commo 2700 Count 3000 Dog Maire - 73 50210 /515	1 OFF 211					

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No"

Form	990	(2014)	

Form 990 (201	4)						
Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Emplo
	Indonondont C		ooto				

vees. Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII..............

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

- 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 organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do r box, office or direct	not c unle	Pos heck ss pe	C) sition more erson direct	than cost that the thick the thick the thick the thick the thick the thick the th	one an tee)	(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) Priscilla G. Koelling	40									
President	ļ	×	<u> </u>	x	<u> </u>		<u> </u>	0	0	0
(2) Sue Brilliant	40									
Vice President	35	x	ļ	×			├	0	0	0
(3) Beverly C. Prewitt Organizer	33	×		x				0	o	0
(4) Sherry Arendt	40	<u> </u>		Ĥ			\vdash			<u>_</u>
Treasurer	- 	x		x				0	o	o
(5) Rhesa G. Janice	30									
Secretary	t	×		x				0	o	0
_(9)										
(10)										
(11)										
(12)						,				
(13)										
(14)										

JSA 4E1050 1 000

(A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than box, unless person is bott officer and a director/trus				is both or/trust	an :ee)	(D) Reportable compensation from	(E) Reportable compensation fro related	m -	(F) Estimate amount other	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	c) c	ompensa from th organizati and relati organizati	e tion ted
(15)												
(16)												
(17)												
(18)										-		
(19)												
(20)												
(21)												
(22)		-		_								
23)			H									
(24)												
(25)	-											
]										
c Total from continuation sheets to Part VII d Total (add lines 1b and 1c)	, Section A											
Total number of individuals (including but reportable compensation from the organization)	not limited to		se lis				who	received more th	nan \$100,000 (of		
3 Did the organization list any former of	fficer, direc	tor, c	r tr	uste	ee,	key	em	ployee, or highe	st compensate	ed	1	
employee on line 1a? If "Yes," complete Sch 4 For any individual listed on line 1a, is th										- 1	+	×
organization and related organizations individual	greater tha	n \$1	50,0	000	?	f "Ye	es, "	complete Sched	ule J for suc	h _		×
5 Did any person listed on line 1a receive for services rendered to the organization? It	or accrue c	ompe	nsat	ion	fro	m an	y ui	nrelated organizat	ion or individua	al		x
Section B. Independent Contractors												
1 Complete this table for your five highest of compensation from the organization Report year											ax	
(A) Name and business a	address							(B) Description of se	ervices	(Compe	C) ensatior	1
None							F					
							#					
O Tatal number of independent activities	oro (implication		.+ -	O+	li	ıtod	<u> </u>	those listed sta	was who			
2 Total number of independent contract received more than \$100,000 of compens							ιο	those listed abo	ve) wno	->	 m 99(

Par	t VIII	Statement of Revenue Check if Schedule O contains a response or note to an	v line in this Part V	7 111	•	
1		Check is Schedule O Contains a response of note to an	(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				
Contribution of the control of the c	f g	All other contributions, gifts, grants, and similar amounts not included above . 1f 169,915 Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f	279,395			
Program Service Revenue	2a b c d					
Pro	g g	All other program service revenue		····		
	3 4 5	Investment income (including dividends, interest, and other similar amounts)	125	125		
	6a b c d	Gross rents				
	b c d	Less cost or other basis and sales expenses Gain or (loss)			-	
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18				
öt	C	Net income or (loss) from fundraising events			-	
•		Gross income from gaming activities See Part IV, line 19			:	
	b	Less direct expenses				
	10a		· · · · · · · · · · · · · · · · · · ·			
	b c	Less cost of goods sold				
	11a b c	Miscellaneous Revenue Business Code All other revenue	-			
	е	Total. Add lines 11a-11d	270 500	125		

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line 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 domestic organizations and domestic governments. See Part IV, line 21	140,283	140,283		
2	Grants and other assistance to domestic individuals See Part IV, line 22	26,500	26,500		
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages				
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
10 11	Other employee benefits				
b c	Legal	2,525		2,525	
f	Professional fundraising services See Part IV, line 17. Investment management fees				
12 13	(A) amount, list line 11g expenses on Schedule O), Advertising and promotion				
14 15 16	Information technology	315			315
17		28,184	9,395	18,789	
19 20	Conferences, conventions, and meetings	2,090	533	1,065	492
21 22 23	Depreciation, depletion, and amortization	62,920	62,920	420	
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 b c	Operating Expense	3,680	1,227	2,453	
25	All other expenses Total functional expenses. Add lines 1 through 24e	266,917	240,858	25,252	807
	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)				
JSA					F 000 (0044)

Page **11** Form 990 (2014) Part X Balance Sheet

		Check if Schedule O contains a response of note to any line in this Pa	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	7,464		7,715
	2	Savings and temporary cash investments	200,769	2	213,121
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
İ		trustees, key employees, and highest compensated employees			
		Complete Part II of Schedule L		5	
	6	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	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 10a			
l	b	Less accumulated depreciation		10c	
		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	
İ	14	Intangible assets	1	14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	208,233	16	220,836
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
- 1	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,			
ap		trustees, key employees, highest compensated employees, and			
7		disqualified persons Complete Part II of Schedule L		22	
1	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
ļ	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	
\perp	26	Total liabilities. Add lines 1/ through 25		26	
ses		Organizations that follow SFAS 117 (ASC 958), check here ► and complete lines 27 through 29, and lines 33 and 34.			
<u> </u>	27	Unrestricted net assets		27	
8	28	Temporarily restricted net assets		28	
립	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here 💌 🕱 and complete lines 30 through 34.			
<u>ا چ</u>	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
-	32	Retained earnings, endowment, accumulated income, or other funds	208,233		220,836
a l	33	Total net assets or fund balances	208,233	33	220,836
	34	Total liabilities and net assets/fund balances	208,233		220,836

If the organization changed either its oversight process or selection process during the tax year, explain in

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

3b

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► Complete if the organization is described below. ▶ 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

- 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.

Tax)	(see separate instructions), ther		Tax) (see separate i	nstructions) or Form 990-E	EZ, Part V, line 35c (Proxy
	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III		Frankria ida	ntification number
	e of organization	at the above		' •	
	E.O. Sisterhood VA		tion F04/s) sr	54-60725	
		organization is exempt under			iization.
1		organization's direct and indirect p			
2					
3	volunteer nours				
Pai		organization is exempt under			
1	Enter the amount of any exc	cise tax incurred by the organization	n under section 495	55 ▶ \$	
2		cise tax incurred by organization m			
3	_	a section 4955 tax, did it file Form	· · · · · · · · · · · · · · · · · · ·		
					Yes No
	If "Yes," describe in Part IV				
Pa		organization is exempt under		<u> </u>)
1		xpended by the filing organization			
_					
2	527 exempt function activiti	ng organization's funds contributed es		▶\$	
3	line 17b	enditures Add lines 1 and 2. En		> \$	
5	Enter the names, addresses organization made payment the amount of political confidence.	e Form 1120-POL for this year? and employer identification numbers. For each organization listed, entributions received that were promoted or a political action committee (er (EIN) of all section ter the amount paraphity and directly de-	on 527 political organiza d from the filing organiz elivered to a separate po	ations to which the filing ation's funds. Also enter ditical organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)				,	
(2)					
(3)					
(4)			-		
(5)					
(6)					

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

Schedule C (Form 990 or 990-EZ) 2014

001	leddic O (1 offii 330 of 350-EZ) 2014					
P	art II-A Complete if the organization section 501(h)).	n is exen	npt under section	n 501(c)(3) and	filed Form 5768 (ele	ction under
A	Check ▶ if the filing organization name, address, EIN, expe					roup member's
В	Check ▶ if the filing organization	checked b	oox A and "limited	control" provisi	ons apply.	
	Limits on Lobby	ing Expend	litures		(a) Filing	(b) Affiliated
	(The term "expenditures" me	ans amour	its paid or incurred.)	organization's totals	group totals
18	a Total lobbying expenditures to influence	public opini	on (grass roots lobb	oying)		
	b Total lobbying expenditures to influence					
	c Total lobbying expenditures (add lines 1					
•	d Other exempt purpose expenditures			[
	e Total exempt purpose expenditures (add					
	f Lobbying nontaxable amount Enter the columns					
	If the amount on line 1e, column (a) or (b) is:	The Johnvin	a nontavable amount	ie.		
	Not over \$500,000		amount on line 1e	.5.		
			us 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			
	Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000		us 5% of the excess of			
	Over \$1,500,000 but not over \$17,000,000	\$1,000,000 pi	us 0 /0 of the excess t	7461 \$1,500,000		
_	g Grassroots nontaxable amount (enter 25		· · · · · · · · · · · · · · · · · · ·			
	h Subtract line 1g from line 1a If zero or le			To the second se		
· :	Subtract line 1f from line 1c If zero or le					· ·
, i	i If there is an amount other than zero				tion file Form 4720	
,	reporting section 4911 tax for this year?					Yes No
_	4	-Year Aver	aging Period Unde	r Section 501(h)		, , , , , , , , , , , , , , , , , , , ,
	(Some organizations that made a					nns below.
			te instructions for l			
_	Lobb	ying Exper	nditures During 4-Y	ear Averaging Pe	riod	1
	Calendar year (or fiscal year (a)	2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2	a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column (e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

Pai	t II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d For	m 576	8		
For	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(;	1)		(b)	
	each Yes, response to lines to through it below, provide in Part IV a detailed cription of the lobbying activity	Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of						
a b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c d	Media advertisements? Mailings to members, legislators, or the public?			-			
e f	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?						
g h i	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 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 If "Yes," enter the amount of any tax incurred by organization managers under section 4912		:				
Pa	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? **III-A** Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ection	1		
1	Mars substantially all (00% or mars) dues reserved pendeductible by members?				1	Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?	1	None		2	x	×
1 2	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 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts)			rt III-A	, line	3, is 	
а	political expenses for which the section 527(f) tax was paid). Current year			2a			
b c	Carryover from last year Total			2b 2c			
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due of notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible leads to the reasonable estimate of nondeductible estimates the reasonable estimates the reaso	es of th	 ne	3			
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)			4 5	·		
Prov	Supplemental Information Inde the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A (affiliate see instructions), and Part II-B, line 1. Also, complete this part for any additional information.	d gro	up list	i), Part	II-A, II	nes 1	and
							

Schedule C ((Form 990 or 990-EZ) 2014	Page 4
Part IV	(Form 990 or 990-EZ) 2014 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,

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

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

OMB No 1545-0047

Open to Public Inspection Employer identification number

P.E	O. Sisterhood VA State Chapter	54-6072508
Par	Organizations Maintaining Donor Advised Funds or Other Similar Funds or	r Accounts.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
	Aggregate value of contributions to (during year)	
	Aggregate value of grants from (during year)	
	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held	ın donor advised
	funds are the organization's property, subject to the organization's exclusive legal control? .	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant f	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for a	any other purpose
	conferring impermissible private benefit?	Yes No
Pa	Conservation Easements.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
		of a historically important land area
		of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	Held at the End of the Tax Year
	easement on the last day of the tax year	I All the control of the control
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	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	2d
•	historic structure listed in the National Register	
3		nated by the organization during the
4	tax year ▶ Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspec	
3	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easily	
•	▶	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easeme	ents during the year
	▶ \$	•
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue an	nd expense statement, and
	balance sheet, and include, if applicable, the text of the footnote to the organization's finance	cial statements that describes the
	organization's accounting for conservation easements	
Pa	Organizations Maintaining Collections of Art, Historical Treasures, or Other	er Similar Assets.
-	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its works of art, historical treasures, or other similar assets held for public exhibition, edipublic service, provide, in Part XIII, the text of the footnote to its financial statements that de	revenue statement and balance sheet ucation, or research in furtherance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that de	scribes these items
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its	
	works of art, historical treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of
	public service, provide the following amounts relating to these items: (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 art, historical treasures, or other similar	
2	following amounts required to be reported under SFAS 116 (ASC 958) relating to these item Revenue included in Form 990, Part VIII, line 1	
a b	Assets included in Form 990, Part X	
		· · · · · · · · · · · · · · · · · · ·

Part	Organizations Maintaining Colle	ections of Art, Histo	orical Treasures	s, or Other Simil	ASSELS (COII	unueu)
	Using the organization's acquisition, acces	ssion, and other record	ls, check any of t	the following that a	ire a significant ι	ise of its
	collection items (check all that apply)		1			
а	Public exhibition	d	Loan or exchang	-		
þ	Scholarly research	e	Other			
C	Preservation for future generations					
4	Provide a description of the organization's	collections and expla	in how they furth	er the organization'	s exempt purpos	e in Part
	XIII					
	During the year, did the organization solicit					
	assets to be sold to raise funds rather than t					
Part	IV Escrow and Custodial Arrangem	ents. Complete if th	e organization ai	nswered "Yes" to F	⁻ orm 990, Part l	V, line 9,
	or reported an amount on Form 9	990, Part X, line 21.				
	Is the organization an agent, trustee, custo					
	included on Form 990, Part X?				Yes	No
b	If "Yes," explain the arrangement in Part XI	III and complete the foll	owing table [.]			
				Α	mount	
С	Beginning balance		1	С		
	Additions during the year				•	
	Distributions during the year					
	Ending balance			f		
	Did the organization include an amount on			custodial account lia	ability? Yes	No
	If "Yes," explain the arrangement in Part XI				·	
Par						
		urrent year (b) Prior		rears back (d) Three		years back
1a	Beginning of year balance					
	Contributions	-				
	Net investment earnings, gains,					
	and losses	•				
d	Grants or scholarships					
	Other expenditures for facilities					
•	and programs					
f	Administrative expenses		-			
	End of year balance		-			
	Provide the estimated percentage of the cu	rrent vear end halance	(line 1g. column (a	a)) held as		
	Board designated or quasi-endowment	%	(2// 11010 00		
	Permanent endowment > %					
	Temporarily restricted endowment	%				
•	The percentages in lines 2a, 2b, and 2c sh					
32	Are there endowment funds not in the poss		tion that are held :	and administered for	the	
vu	organization by	5000,011 01 till 01 gaill2a	tion that are note		_	Yes No
	(i) unrelated organizations					130 1.10
	(ii) related organizations					
h	If "Yes" to 3a(II), are the related organization	one lieted as required on	Schedule R2			
4	Describe in Part XIII the intended uses of t					
	Land, Buildings, and Equipment.		WITCH TUNGS		· · · · · · · · · · · · · · · · · · ·	
Fai	Complete if the organization ans	swered "Yes" to Form	990, Part IV, lin	e 11a. See Form		
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	s (c) Accumulated depreciation	(d) Book va	lue
1a	Land		(Other)	depreciation		
b	Buildings			 		
c	Leasehold improvements					
d	Equipment				 	_
e	—				-	
	Other I. Add lines 1a through 1e (Column (d) mus		X column (R) line	10(c))		
TOTA	i. Add illes Ta thiough Te (Column (d) mus	st oquari onin 990, r'art.	A, Solution (B), inte	10(0) /	<u> </u>	

Schedule D (Form 990) 2014

JSA 4E1270 1 000

Part VII	Investments - Other Securities.			5 114 11 40
	Complete if the organization answered	l "Yes" to Form 990		
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	
(1) Financia	al derivatives			.
(2) Closely-	-held equity interests			
(3) Other				
	 -			
(<u>B)</u>				
<u>(C)</u>				
(D)				
<u>(E)</u>				
(F)				**
(G)				
(H)	n (b) must equal Form 990, Part X, col (B) line 12) ▶			
Part VIII		<u> </u>	<u> </u>	
Fait VIII	Complete if the organization answered	d "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 valua Cost or end-of-year mark	tion
(1)			· · · · · · · · · · · · · · · · · · ·	
(1)				
(3)				
(4)				
(5)				
(6)		-		
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets.			
	Complete if the organization answered	d "Yes" to Form 990	, Part IV, line 11d See Form 990,	Part X, line 15
····	(a) De	escription		(b) Book value
(1)				
(2)				
_(3)				
_(4)				
(5)				
(6)		 		
(7)				
(8)				
(9)	umn (b) must equal Form 990, Part X, col (B)	lino 15)		
Part X	Other Liabilities. Complete if the organization answered line 25			m 990, Part X,
1	(a) Description of liability	(b) Book valu	је	
	ral income taxes	(-,		
(2)		<u> </u>		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col (B) line 25	>		
	for uncertain tax positions. In Part XIII, provide the			
organization	s liability for uncertain tax positions under FIN 48	(ASC 740) Check here	of the text of the footnote has been pro	vided in Part XIII

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		
		1	279,520
1	Total revenue, gains, and other support per audited financial statements	-	279,520
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	-	
b		-	
C	Recoveries of prior year grants	-	
d	· · · · · · · · · · · · · · · · · · ·	ا ۵۰ ا	
e	Add lines 2a through 2d Subtract line 2e from line 1	2e 3	279,520
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1	-	213,320
4	Investment expenses not included on Form 990, Part VIII, line 7b		
a	· · · · · · · · · · · · · · · · · · ·	-	
b	Add have do and do	4c	
С 5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	-	279,520
Part			275,520
rant	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	uiii.	
1	Total expenses and losses per audited financial statements	1	266,917
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	1	
С	Other losses 2c	1	
d	Other (Describe in Part XIII)	1	
e	'Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	266,917
3			
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 Investment expenses not included on Form 990. Part VIII, line 7b		
4 a	Investment expenses not included on Form 990, Part VIII, line 7b		
4 a b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) 4b	4c	
4 a b c	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) Add lines 4a and 4b	4c 5	266,917
4 a b c 5	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18). XIII Supplemental Information.	5	266, 917
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5 art V, line	
4 a b c 5 Part	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII) Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18). XIII Supplemental Information. It the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part III, lines 1b and 2b,	5 art V, line	
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Part XIII	Supplemental Information (continued)	
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SCHEDULEI (Form 990)

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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Open to Public

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

Employer identification number 54-6072508

	Assistance	44 -4-4-4-4
Chapter	ants and	. d
A State	tion on Gr	
Sisterhood VA State Chapter	General Information on Grants and Assistance	and the standard of the standa
P.E.O. Sie	Part I Gen	

Department of the Treasury Internal Revenue Service Name of the organization

- Ŷ 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

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	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Cottey College, 1000 W Austin							
Nevada, MO 64772	440545271	501(c)(3)	35,483	0			GenSupp/Schol
(2) P.E.O. Educational Loan Fund							
Des Moines, IA 50312	426078059	501(c)(3)	14,814	0			Educ Loans
(3) P.E.O. Int'l Peace Scholarshp	-						
Des Moines, IA 50312	426078058	501(c)(3	16,538	0			Scholarships
(4) P.E.O. Program for Contin Ed							
Des Moines, IA 50312	237405311	501(c) (3	26,687	0			Educ Grants
(5) P.E.O. Scholar Awards							
Des Moines, IA 50312	421379026	501(c)(3	18,622	0			Educ Awards
(6) P.E.O. STAR Scholarship					!		
Des Moines, IA 50312	300583651	501(c) (3	18,334	0			Scholarships
(7) P.E.O. Foundation	,						
Des Moines, IA 50312	426094564	501(c) (3	9,805	0			Schol/Grants
(8)							
(9)							
(10)							
(11)							
(12)							
	d governmen	t organizations	ganizations listed in the line 1 table	able		•	7
3 Enter total number of other organizations listed in the line	sted in the lir	ne 1 table				A	0
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ons for Form 9	.06				Sch	Schedule I (Form 990) (2014)

4E128B 1 000

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 Part III

	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	riviv, applaisar, ourer)	
1 Educ	1 Educ Scholrships to Individuals 16	16	26,500	0	0 N/A	N/A
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er:						
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Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	the informati	on required in Pa	art I, line 2, Part I	ll, column (b), and any c	ther additional information

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

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

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

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

3700 Grand Ave, Des Moines, IA 50312.

SCHEDULE 0 (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.

OMB No 1545-0047

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.

Open to Public Inspection Employer identification number

P.E.O. Sisterhood VA State Chapter	54-6072508
Part VI, Lines 6-7b: The organization's members consist of the act	ive, 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	resent. 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 e	ach member of the
executive board of Virginia State Chapter prior to filing. Board	members are asked to
review the return and respond with any questions, though no formal	review process is
currently in place.	
Part VI, Line 12c: Conflict of Interest policies and signature pag	es are distributed each
year to all exectuive board members and to any committee members h	aving influence over
financial transactions. Signature pages are collected by the stat	e president and
monitored for completion. Any conflicts of interest that arise ar	e to be reported
immediately to the affected committee/board, and the remaining mem	bers vote on the
appropriate action.	
Part VI, Line 19: Governing documents, conflicts of interest polic	y 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 au	dited by an independent
accountant on a cash basis.	

Schedule O	(Form 990 or 990-E2	Z) (2014	4)			Page 2
Name of the	organization		,		Employer Identification number	
	Sisterhood	AV F	State	Chapter	54-6072508	
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