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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)

Open to Public

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.

Inspection

A. F	or the	2015 calendar year, or tax year begi	nning April 1 , 2019	5, and ending	March 31	, 20 16			
	heck if applic	C Name of organization			D Employer identification	on number			
<del>9</del> °	heck if applic	P.E.O. Sisterhood OH	State Chapter						
7	Address change	Doing business as			31-61815	31-6181539			
	Name chi	ange Number and street (or P O box if mail is	not delivered to street address)	Room/suite	E Telephone number				
-	Initial reti	um 3700 Grand Ave			515 255	3153			
5	Final retu		and ZIP or foreign postal code	·					
,	Amended		-2899		G Gross receipts \$	507,015			
· 🔭	Application				H(a) Is this a group return t	<del></del>			
	pending	Jan K Knuckey - same	as C above		subordinates?  H(b) Are all subordinates include				
_	Tax-exem		4 ) <b>(</b> (insert no ) 4947(a)(1)	or 527	If "No," attach a list (s				
<u></u>	Website:		<del></del>	0. 02.	H(c) Group exemption num	•			
			Association Other	I Veer of forms	tion 1927 M State of				
_	art I	Summary	Association Other	L Teal Of Ionila	IIIOI 1727 W State of	regal dofficie 171			
	_		Warner	1	·				
-		riefly describe the organization's mission o							
Governance	·	upporting six philanthrop							
rna	٠.	oan and award programs ar				<u>n.</u>			
ove		heck this box $ ightharpoonup$ if the organization d	•		1 1	_			
Ğ		umber of voting members of the governing				5			
<u>ات ع</u>		umber of independent voting members of t				5			
	<b>5</b> To	otal number of individuals employed in cale	endar year 2015 (Part V, line 2a) 🚬			1			
ن / 1016 مردنانزنانه ه		otal number of volunteers (estimate if neces				100			
,' A	<b>7a</b> To	otal unrelated business revenue from Part V	آاا, column (C), line 12						
	b N	et unrelated business taxable income from	Form 990-T, line 34	· · · · · · · · · · · · · · · · · · ·					
AUF			RECEIVED		Prior Year	Current Year			
•	8 C	ontributions and grants (Part VIII, line 1h) 🕳	BECEIVE 181	<u></u>	489,086	501,002			
Revenue	<b>9</b> Pr	rogram service revenue (Part VIII, line 2g) 🕽		<b>\</b> <u> </u>					
ا في ا	10 In	rogram service revenue (Part VIII, line 2g) , vestment income (Part VIII, column (A), line ther revenue (Part VIII, column (A), lines 5,	s.3 4, and 7d), 0.9. 2010 \@	:∖ ∟	20	112			
2 12	11 0	ther revenue (Part VIII, column (A), lines 5,	60, 9c, 10c, and 11e)	. <b>.)</b> L	<u>-2</u> 71	3,643			
Revenue		otal revenue - add lines 8 through 11 (must		للبسم	488,835	504,757			
رد	<b>13</b> G	rants and similar amounts paid (Part IX, coli	ump (A), lines 4-3)		277,851	312,477			
		enefits paid to or for members (Part IX, colu							
s		alaries, other compensation, employee ben			6,670	6,753			
Expenses		rofessional fundraising fees (Part IX, column		· · · · · · · <del></del>					
ē		otal fundraising expenses (Part IX, column (	D) 1 05) 5 100E						
ũ		ther expenses (Part IX, column (A), lines 11			237,764	172,718			
		otal expenses Add lines 13-17 (must equal			522,285	491,948			
	,	evenue less expenses Subtract line 18 from			-33,450	12,809			
- S	13 - 1	evenue less expenses Subtract line ro froi	11 11111 12	Begi	nning of Current Year	End of Year			
anc	<b>20</b> To	etal appote (Part V. lung 16)		· —	211,608	224,417			
\ss Bala	20 T	otal assets (Part X, line 16)			211,000	223,417			
Net Assets or Fund Balances	21 To	otal liabilities (Part X, line 26)			211 600	224 417			
Z	22 N	et assets or fund balances Subtract line 21	i from line 20,		211,608	224,417			
	rt II	Signature Block ties of perjury, I declare that I have examined the		fulse and statements	and to the best of my know	and balas as a			
true	e, correct,	and complete. Declaration of preparer (other than	n officer) is based on all information of wh	nch preparer has any k	nowledge	owiedge and belief, it is			
		grating a. Sman			8/3/11				
Sig	n l	Supplying of officer			Date				
He		Signature of officer			Date				
	`	Kathy A. Soppe, Direct	or of Finance	<del>-</del>	· · · · · · · · · · · · · · · · · · ·				
		Type or print name and title	I December 200	Det-		N			
Paic		Print/Type preparer's name	Preparer's signature	Date	Check if PTI	IN			
	parer –				self-employed	<del></del> -			
		Firm's name			Firm's EIN	·			
		rirm's address 🕨			Phone no	<del>, , , , , , , , , , , , , , , , , , , </del>			
May	the IRS	discuss this return with the preparer show	n above? (see instructions)	<u> </u>	<u> </u>	Yes No			
Eas	Danani	ork Poduction Act Notice, see the senara	to instructions			Form 990 (2015)			

4	Describe the organization's program service accomplishments for each of its three largest program services, as measing expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	ured by others.
	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.	otners,
4a	(Code )(Expenses \$ 444,811 including grants of \$ 312,477)(Revenue \$ )  Program services are accomplished by collecting and forwarding contributions to various P.E.O. projects and scholarships on both the state and national levels; respectively.	10
	specific statistics are available.	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
4c	(Code) (Expenses \$including grants of \$) (Revenue \$)	
		<del></del>
4d	Other program services (Describe in Schedule O )	
	(Expenses \$ including grants of \$ ) (Revenue \$ )	<u>-</u>
JSA	Total program service expenses ► 444,811  Form 99	0 (2015

Form 9	90 (2015)		F	age 3
Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			l
	complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			1
	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			1
	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,			ł
	Part III	5	х	1
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			1
	"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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		х
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			ĺ
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	*	2	
• •	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,"	, no, and product of the	,sagement to	44545
•	complete Schedule D, Part VI	11a		х
h	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
А	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		×
۰		11e		х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	111		
•		11f		x
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<del></del>		
	Schedule D, Parts XI and XII	12a	х	l
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
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		1	
_	fundraising, business, investment, and program service activities outside the United States, or aggregate			1
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	1	х
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			
.0	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	<del></del> -	<u> </u>	<u></u> -
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>		
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	×
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		<del> </del>	<u> </u>
	If "Yes," complete Schedule G, Part III	19		×
			<del></del>	

Part	Checklist of Required Schedules (continued)		Vac	No
••	Dut the appropriate and appropriate front to the first transfer of	20a	Yes	No X
20a	bid the digamentation operate one of their needs are the property of the prope	20a		
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	х	
••	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	4!	^	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		v
•	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	- 22		х
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	23		v
••	employees? If "Yes," complete Schedule J	23		x
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	245		.,
	through 24d and complete Schedule K If "No," go to line 25a	24a	-	Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
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?			
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		Х
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?	0.54		
	If "Yes," complete Schedule L, Part I	25b		х
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		Х
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		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
C	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$			х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		х
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		_ <u>x</u> _
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		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	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		х
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	х	L
		Form	990	(2015)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	;	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	*	,	E.,
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			·
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	. 1 .az.	اعداف	
	reportable gaming (gambling) winnings to prize winners?	1c	х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	, " "	3.	, T. (.
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_ X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
	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		ł	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		<u> </u>
b	If "Yes," enter the name of the foreign country ▶	- 1		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	7 Y	-	
_	(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 5c		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	36		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a	х	
	organization solicit any contributions that were not tax deductible as charitable contributions?	- 04		_
D	gifts were not tax deductible?	6b	х	
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			۱ ـــــــ ٠
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	_	-	بالأثيا
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	30		-
10	Section 501(c)(7) organizations. Enter		٠.,	î L
	initiation lees and capital contributions included on Fart VIII, line 12		cs .	,
D 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	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 )			
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		٠.	
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	14a		х
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		
D	ii res, has it lied a rothi rzo to report these payments in mo, provide an explanation in schedule O			

Part VI

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O			
	Check if Schedule O contains a response or note to any line in this Part VI			х
Sect	ion A. Governing Body and Management			
			Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year			- 1
ıa	Effect the humber of voting members of the governing body at the end of the tax year	١		- "
	If there are material differences in voting rights among members of the governing body, or if the governing	1	, j-1	, .
_	body delegated broad authority to an executive committee or similar committee, explain in Schedule O  Forter the number of voting members included in line 1a, above, who are independent	ا د بيد	4	1 多图
b	Enter the humber of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		X
_	any other officer, director, trustee, or key employee?			<del></del>
3	Did the organization delegate control over management duties customarily performed by or under the direct	3		x
_	supervision of officers, directors, or trustees, or key employees to a management company or other person?	4		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		<u> </u>
6	Did the organization have members or stockholders?	-	_х_	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	70	v	
	one or more members of the governing body?	7a_	_x_	<del> </del>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7.	.,	
	stockholders, or persons other than the governing body?	7b	×	<del></del> i
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			4
а	The governing body?	8a	×	
b	Each committee with authority to act on behalf of the governing body?	8b	х	<u> </u>
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		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	?.) Yes	No
		40-		110
10a	Did the organization have local chapters, branches, or affiliates?	10a	×	<del> </del>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	406		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	_ <u>x</u> _	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u>x</u>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			ال ا
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	40.		
	rise to conflicts?	12b	x	<del></del>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	×	
13	Did the organization have a written whistleblower policy?	13		<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	x	<del>                                     </del>
15	Did the process for determining compensation of the following persons include a review and approval by		17	1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			لننتا
а	The organization's CEO, Executive Director, or top management official	15a		×
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)	١.,		از ا
16a				그
	with a taxable entity during the year?	16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		-	لنظ
04	organization's exempt status with respect to such arrangements?	16b		L
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None  Section 6404 requires an experimentary to make its Forms 1033 (or 1034 if employable), 900, and 900 T (Section	E04/	N/21/-	لانامم
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply  Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	, 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 record Kathy A. Soppe, 3700 Grand Avenue, Des Moines, IA 50312 (515)255-3153	s <b>▶</b>		

Form 990 (201:	5) ໍ										Page 7
Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Co	ontr	actors								
	Check if Sched	ule (	O contains	a response	or note to	any li	ne in this Part	VII		<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

X 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)	Former Highest employe Key emp Officer Institutio		(D) Reportable compensation from the organization (W-2/1099-MISC)  (E) Reportable compensation related organization (W-2/1099-MISC)		(F) Estimated amount of other compensation from the organization and related organizations				
(1) Jan K Knuckey President	40	x		x				0	0	0
(2) Lyn R Wilhoite	35	^_		^				<u> </u>		0
Vice President		х		х				0	0	0
(3) Linda Coulles	35									
Organizer		х		х				0	0	0
(4) Kylie Elizabeth Smith	35									
Treasurer		х		х				0	0	0
_(5) Martha Billing	30							_		_
Secretary		х		х				0	0	0
_ (6)										
(10)										· · · · · · · · · · · · · · · · · · ·
(11)										
(12)										<del></del>
(13)	ļ				İ					
(14)										

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Form 990 (2015)									<del></del>		Page 8
Part VII Section A. Officers,	Directors, Trustees, Key	y Em	plo		es, a C)	and H	ligh	nest Compensate	ed Employe	es (con	tinued)
(A) Name and title	(B) Average hours per week (list any	box,	Position do not check more than pox, unless person is bot fficer and a director/tru				an tee)	compensation	(E)  Reportable compensation from	n from	(F) Estimated amount of 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)	organizatio (W-2/1099-M	ons	compensation from the organization and related organizations
(15)											
(16)											· · · · · · · · · · · · · · · · · · ·
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)					ļ						
(24)											
(25)											
1b Sub-total							<b>&gt; &gt;</b>				
2 Total number of individuals ( reportable compensation from	including but not limited to		se li				who	received more th	an \$100,00	0 of	
3 Did the organization list a employee on line 1a? If "Yes,"	any former officer, direct	or, c	or ti	rust dual	ee,	key	em	nployee, or highe	st compens	ated	Yes No
<ul> <li>4 For any individual listed on organization and related of individual</li> <li>5 Did any person listed on lin</li> </ul>	organizations greater than  de 1a receive or accrue co	n \$1  ompe	50,0	000  tıon	? /  fro	<i>f "Y∈</i>  m an	es,"  y u	complete Sched inrelated organizat	ule J for s  ion or indivi	such  dual	4 ×
for services rendered to the of Section B. Independent Contractor		ete S	cnec	auie	JIC	or suc	n pe	erson		• •	5   X
Complete this table for your compensation from the organ year	five highest compensated										
Name	(A) e and business address							(B) Description of se	ervices	Co	(C) mpensation
None							1				
							$\perp$				
							+				
2 Total number of independence received more than \$100,00	fent contractors (including of compensation from the	ig bu	ut r	ot atioi	tım n ▶	ıted	to	those listed abo	ove) who		
JSA											Form <b>990</b> (2015

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Giffs, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns		,		
Sont	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f	501,002		<u> </u>	
Program Service Revenue	2a b c d				-	
Prog	f g	All other program service revenue				
-	3 4 5	Investment income (including dividends, interest, and other similar amounts)	112	112		
	6a b c d	Gross rents				
	b c d	assets other than inventory  Less: cost or other basis and sales expenses  Gain or (loss)			- -	
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18				
ŏ	С	Less: direct expenses				
	b	See Part IV, line 19				
	10a	Gross sales of inventory, less returns and allowances				
		Less cost of goods sold	3,643	3,643		
	11a b					
	c d	All other revenue				
	12	Total Add lines 11a-11d	504,757	3,755		

# Part IX Statement of Functional Expenses

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

Do not include amounts reported on lines 6b, 7b, 8b, 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	311,457	311,457		
2 Grants and other assistance to domestic				
individuals See Part IV, line 22	1,020	1,020		· · · · · · · · · · · · · · · · · · ·
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	6,120	2,040	4,080	
8 Pension plan accruals and contributions (include				
section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	633	211	422	
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal				
c Accounting	4,125		4,125	
d Lobbying				
e Professional fundraising services See Part IV, line 17.				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
<b>13</b> Office expenses				
14 Information technology	500			500
<b>15</b> Royalties				
16 Occupancy				
17 Travel	23,087	7,696	15,391	
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	23,673	7,696	15,392	585
20 Interest				
21 Payments to affiliates	111,796	111,796		
22 Depreciation, depletion, and amortization				
23 Insurance	851		851	<del></del>
24 Other expenses Itemize expenses not covered				
above (List miscellaneous expenses in line 24e If		ł		
line 24e amount exceeds 10% of line 25, column				
(A) amount, list line 24e expenses on Schedule O)				
a Operating Expense	8,686	2,895	5,791	···
b				· · · ·
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	491,948	444,811	46,052	1,085
26 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				
following SOP 98-2 (ASC 958-720)				F 000 (0045)

**Balance Sheet** Part X End of year Beginning of year 149,366 136,669 1 Cash - non-interest-bearing 74,939 2 75,051 Savings and temporary cash investments........ 2 3 Pledges and grants receivable, net .......... 3 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L. 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 6 organizations (see instructions) Complete Part II of Schedule L 7 8 9 10 a Land, buildings, and equipment cost or 10a other basis Complete Part VI of Schedule D b Less accumulated depreciation. . . . . . . . . | 10b 10c Investments - publicly traded securities .......... 11 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 ......... 13 14 14 15 15 211,608 16 224,417 16 17 17 18 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities ............. 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and 22 23 Secured mortgages and notes payable to unrelated third parties . . . . . . 23 Unsecured notes and loans payable to unrelated third parties..... 24 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X 25 Total liabilities. Add lines 17 through 25........ 26 26 Organizations that follow SFAS 117 (ASC 958), check here **Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 📗 🗓 and 5 complete lines 30 through 34. Capital stock or trust principal, or current funds Assets 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 211,608 224,417 Retained earnings, endowment, accumulated income, or other funds 32 32 224,417 211,608 33 33 224,417 Total liabilities and net assets/fund balances......... 211,608 34 34

Page **12** 

Ulill 9 a	10 (2015)			90
Pa <u>rt</u>				
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)		<u>504,</u>	
2	Total expenses (must equal Part IX, column (A), line 25)		491,	
3	Revenue less expenses Subtract line 2 from line 1		12,	809
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4		211,	608
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))		224,	417
⊃art	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII	<u>.</u>		x
_			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	] '		İ
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		х
	If the organization changed either its oversight process or selection process during the tax year, explain in	1 '		
	Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		x
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		<u> </u>
		Form	990	(2015)

#### **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

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," on 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," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

	(see separate instructions), then									
	Section 501(c)(4), (5), or (6) organization	anizations Complete Part III		Employer ide	ntification number					
	•	Chaha Chamban		31-61815						
	E.O. Sisterhood OH	rganization is exempt under	section 501(c) or							
1										
-										
J	Volunteer nours									
Par	t I-B Complete if the o	rganization is exempt under	section 501(c)(3).							
1		ise tax incurred by the organization		5 ▶ \$						
2	and the second s									
3		a section 4955 tax, did it file Form								
4a	Was a correction made?			· · · · · · · · · · · · · · · · · · ·	Yes No					
b	If "Yes," describe in Part IV									
Par	t I-C Complete if the o	organization is exempt under	section 501(c), ex	ccept section 501(c)(3	)					
1		xpended by the filing organization								
2		ng organization's funds contribute		ons for section						
	527 exempt function activities									
3		enditures Add lines 1 and 2 E								
4	Did the filing organization file	e Form 1120-POL for this year? . and employer identification num	bor (EIN) of all coots	n 527 political organiza	Yes No					
5	enter the names, addresses	s For each organization listed, e	nter the amount nam	on 527 political organiza	ations to writer the filling					
	the amount of political cont	ributions received that were proj	mptly and directly de	livered to a separate po	litical organization, such					
	as a separate segregated fur	nd or a political action committee	(PAC) If additional sp	pace is needed, provide i	nformation in Part IV					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political					
	. ,			filing organization's	contributions received and					
				funds If none, enter -0-	promptly and directly delivered to a separate					
					political organization If					
				1	none, enter -0-					
(1)	<u>-</u>									
( - ,										
(2)										
•										
(3)										
(4)										
(5)										
(6)			4							
				•						

Sct	nedule C (Form 990 or 990-EZ) 2015					Page 2			
Р	art II-A Complete if the organiza section 501(h)).								
A	Check ▶ If the filing organization name, address, EIN, ex	on belongs to penses, and	o an affiliated grou d share of excess l	p (and list in Pa obbying expend	ort IV each affiliated g litures)	roup member's			
В	Check ▶ if the filing organization	on checked	box A and "limited	control" provision	ons apply.				
	Limits on Lo (The term "expenditures"			)	(a) Filing organization's totals	(b) Affiliated group totals			
1:	a Total lobbying expenditures to influence	e public opin	ion (grass roots lobl	oying)					
1	b Total lobbying expenditures to influence	e a legislativ	e body (dırect lobbyi	ing) L					
	c Total lobbying expenditures (add lines	1a and 1b) .							
(	d Other exempt purpose expenditures.								
	e Total exempt purpose expenditures (a	dd lines 1c ar	nd 1d)	[					
1	f Lobbying nontaxable amount Enter	the amount t	from the following	table in both					
	columns								
	If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:								
	Not over \$500,000	20% of the							
	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	\$175,000 p	lus 10% of the excess	over \$1,000,000					
	Over \$1,500,000 but not over \$17,000,00	0 \$225,000 p	lus 5% of the excess of	over \$1,500,000					
	Over \$17,000,000	\$1,000,000							
	g Grassroots nontaxable amount (enter	25% of line 1f	)						
	h Subtract line 1g from line 1a If zero o	r less, enter -0	)						
	i Subtract line 1f from line 1c. If zero or								
	If there is an amount other than ze	o on either	line 1h or line 1i, o	did the organiza	tion file Form 4720				
	reporting section 4911 tax for this year	r>	<u> </u>	<u> </u>	<u> </u>	Yes No			
			raging Period Unde						
	(Some organizations that made	e a section 50	01(h) election do no	t have to compl	ete all of the five colun	nns below.			
	Se	e the separa	te instructions for	lines 2a through	2f.)				
_	Lo	bbying Expe	nditures During 4-Y	ear Averaging Pe	riod				
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
2	a Lobbying nontaxable amount								
	b Lobbying ceiling amount								

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount _(150% of line 2d, column (e))	-				
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2015

desc	(election under section 501(h)).	(a	)	(b)			
	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity	Yes	No	-	Amo	unt	
	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of						•
а	Volunteers?						
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
C	Media advertisements?			<del>-</del>			
d	Mailings to members, legislators, or the public?						
e	Publications, or published or broadcast statements?						
	Grants to other organizations for lobbying purposes?  Direct contact with legislators, their staffs, government officials, or a legislative body?						
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
	Other activities?  Total Add lines 1c through 1i	-+					
ı 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ŀ				
	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	- 1	ł				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	ŀ	Ì				
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	:)(5).	or s	ectio	n		
	501(c)(6).	-/(-//	-		-		
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1	х	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	ione	• • •	• • •	2	х	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	*0416			3		х
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."  Dues, assessments and similar amounts from members			1_	., 11116		
	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).  Current year			2a			
	Current year  Carryover from last year		• •	2b			
c	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	 }	• • •	3			
	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion		e .				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lob						
	and political expenditure next year?	-	·	4			
	Taxable amount of lobbying and political expenditures (see instructions)		::	5			
	IV Supplemental Information						_
5							and
5 Pari		grou	p list	), Part	II-A, lı	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, lı	nes 1	
5 Pari		grou	p list	), Part	II-A, lı	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, lı	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, lı	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, lı	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, lı	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, lı	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, lı	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, II	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, II	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, II	nes 1	
5 Pari	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, lı	nes	

	C (Form 990	or 990-EZ) 2015	<u> </u>						 		_ Page 4
Part IV	Supr	lemental l	nformation	(continu	ed)			<del></del> :	 		
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#### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

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

Name of the organization

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number P.E.O. Sisterhood OH State Chapter 31-6181539 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . . . . . . 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) . . 3 4 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year 2a 2b b Number of conservation easements on a certified historic structure included in (a) . . . . . 2c C Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items 1a If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

b

Par										
3	Using the organization's acquisitio	n, accession, a	and other recor	ds, checl	k any o	of the f	follow	ng that are a si	gnificant us	e of its
	collection items (check all that apply	y)		_						
а	Public exhibition		d	Loan	or excha	ange pi	rogram	ıs		
b	Scholarly research		е	Other						
C	Preservation for future gener									
4	Provide a description of the organ	ization's collec	ctions and expla	ain how t	they fur	rther th	ne org	anization's exem	pt purpose	ın Part
	XIII									
5	During the year, did the organizatio									
	assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No									
	Part IV Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1a	Is the organization an agent, truste-	e, custodian o	r other intermed	lary for c	ontribut	tions or	r other	assets not		
	included on Form 990, Part X?								Yes	No No
b	If "Yes," explain the arrangement in	Part XIII and	complete the fo	lowing tab	ole			· · · · · ·		
								Amount		
C	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
	Did the organization include an ame								Yes	No No
b_	If "Yes," explain the arrangement in	Part XIII Che	ck here if the e	xplanation	has be	en prov	vided o	n Part XIII		<u> </u>
Par										
	Complete if the organizati	on answered	"Yes" on Forn	n 990, Pa						
		(a) Current yea	ar (b) Prid	r year	(c) Tw	o years l	back	(d) Three years back	(e) Four ye	ears back
1a	Beginning of year balance				<u> </u>					
b	Contributions								4	
С	Net investment earnings, gains,									
	and losses								<u> </u>	
d	Grants or scholarships				ļ					
е	Other expenditures for facilities						ŀ			
	and programs							·-		
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage	of the current y	year end balanc	e (line 1g,	column	n (a)) he	eld as			
а	Board designated or quasi-endowm	ent ▶	%							
þ	Permanent endowment ▶	%								
С	Temporarily restricted endowment		_ %							
	The percentages on lines 2a, 2b, a									
3 a	Are there endowment funds not in t	the possessior	n of the organiza	ation that	are hel	d and a	admını	stered for the	V	es No
	organization by-		-					-		es No
	(i) unrelated organizations									
	(ii) related organizations									<del></del>
b	If "Yes" on line 3a(ii), are the relate	_	-			۲۶			3b	
4	Describe in Part XIII the intended u		anization's endo	wment fui	nds			-		
Par	t VI Land, Buildings, and Equi Complete if the organization	pment. tion answered	d "Yes" on For	m 990. F	Part IV.	line 1	1a. Se	ee Form 990. P	art X. line	10
	Description of property		Cost or other basis	(b) Cost	or other ba		(c) Acci	umulated	(d) Book value	
_			(investment)	(0	other)	$-\!\!\!\!+$	depre	ciation		
1a	Land					-	-			
b	Buildings			-				<del></del> +		
C	Leasehold improvements			ļ		-+			•••	
d	Equipment					-+				<del></del> -
e	Other	(-1)	15	V	- (D) 1	10.10	<del></del>		<del></del>	
Tota	I. Add lines 1a through 1e (Column	(d) must equa	i rom 990, Part	x, colum	n (B), III	10 TUC	<i>)</i>	<u> ▶</u>		

Schedule D (Form 990) 2016

JSA 5E 1270 1 000

Part VII	Investments - Other Securities. Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11b. See Form 990, Pa	rt X, line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market va	lue
(1) Financia	al derivatives			
	held equity interests			
/A\				
(B)				
	·			
(D)				
(E)				
(F)				
(G)				
<u>(H)</u>				
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
<del></del>	Complete if the organization answered	"Yes" on Form 990	· · · · · · · · · · · · · · · · · · ·	rt X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation  Cost or end-of-year market va	duo
			Cost of end-of-year market va	
_(1)				
_(2)				
		·-		
(5)		<del></del>		
(6)				
(7)				
(8)	· · · · · · · · · · · · · · · · · · ·	-		<del></del>
(9)	n (b) must equal Form 990, Part X, col (B) line 13)			<del> </del>
Part IX	Other Assets.	<u> </u>	<u></u>	
Parlix	Complete if the organization answered	L"Yes" on Form 990	) Part IV. line 11d See Form 990. Pa	rt X. line 15.
		scription	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) Book value
(1)	(3, 3 3			<u> </u>
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				,
(8)				
(9)				
Total. (Colu	umn (b) must equal Form 990, Part X, col (B)	ine 15), , , , , , , , ,	<u>, , , , , , , , , , , , , , , , , , , </u>	
Part X	Other Liabilities.			
	Complete if the organization answered line 25.	I "Yes" on Form 990	), Part IV, line 11e or 11f. See Form 9	90, Part X,
1.	(a) Description of liability	(b) Book valu	ue	
(1) Feder	ral income taxes			
(2)				
(3)				
(4)				
(5)				
(6)		-		
(7)				
(8)				
(9)			· ·	
	nn (b) must equal Form 990, Part X, col (B) line 25)			
2. Liability for	or uncertain tax positions. In Part XIII, provide the	text of the footnote to	the organization's financial statements that re	eports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part 2	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	504,757
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		· · ·
	Net unrealized gains (losses) on investments		
_	Donated services and use of facilities		
b	Donated Services and use of facilities	1	
_	Recoveries of prior year grants	1	
ď	Other (Describe in Part XIII )	2e	
_	Add lines 2a through 2d	3	504,757
3	Subtract line 2e from line 1	<del>" </del>	3017737
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.		
	Investment expenses not included on Form 990, Part VIII, line 7b	1	
	Other (Describe in Part All)	4.	
_	Add lines 4a and 4b	4c	504,757
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	1	304,737
Part	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	<del> </del>	
1	Total expenses and losses per audited financial statements	1  -	491,948
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	]	
а	Donated services and use of facilities		
b	Prior year adjustments		
¢	Other losses		
d	Other (Describe in Part XIII )	1 1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	491,948
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 4a		
	Other (Describe in Part XIII )		
	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	491,948
Part 2	XIII Supplemental Information.		
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, Part III, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional inform.	mation	
		<del></del>	<u></u>
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Schedule I	D (Forr	n 990) 2015	j .										Page <b>5</b>
Part X		Supplei	nental Ir	formati	on (contin	nued)							
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SCHEDULE (Form 990)

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

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

► Attach to Form 990.

2015	Open to Public	Inspection

31-6181539

OMB No 1545-0047

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

	Employer identification number
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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? . . . . . . . . . Part I

General Information on Grants and Assistance

P.E.O. Sisterhood OH State Chapter

Department of the Treasury Internal Revenue Service Name of the organization Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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)	64,913	0			GenSupp/Schol
(2) P.E.O. Educational Loan Fund							
Des Moines, la 50312	426078059	501(c)(3)	28,508	0			Educ Loans
(3) P.E.O. Int'l Peace Scholarship							
Des Moines, la 50312	426078058	501(c)(3)	35,549	0			Scholarships
(4) P.E.O. Program for Contin Educ	jc 1						
Des Moines, la 50312	237405311	501(c)(3)	41,528	0			Educ Grants
(5) P.E.O. Scholar Awards							
Des Moines, Ia 50312	421379026	501(c)(3)	31,385	0			Educ Awards
(6) P.E.O. STAR Scholarship							
Des Moines, Ia 50312	300583651	501(c)(3)	37,868	0			Scholarships
(7) P.E.O. Foundation							
Des Moines, Ia 50312	426094564	501(c)(3)	71,706	0			Schol/Grants
(8)							
(6)							
(10)					•		
	1						
(11)	-						
	-						
(12)							

Enter total number of other organizations listed in the line 1 table.

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

Schedule I (Form 990) (2015)

JSA 5E1288 1 000

Schedule I (F	Schedule I (Form 990) (2015)					Pag	Page 2
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	mestic Individ	lividuals. Completa needed.	e if the organizati	on answered "Yes" on F	orm 990, Part IV, line 22.	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	
-							
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7							
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the informati	on required in F	art I, line 2, Part	II, column (b), and any o	other additional information.	

Sisterhood and to P.E.O. Foundation in Des Moines, IA to be used to further the educational mission of the Part I, Line 2--Contributions were forwarded to philanthropies of the International Chapter of the P.E.O. 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)

Department of the Treasury Internal Revenue Service

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

Name of the organization

OMB No 1545-0047 Open to Public Inspection

Employer identification number

P.E.O. Sisterhood OH State Chapter	31-6181539	
Part VI, Lines 6-7b: The organization's members consist of the	active, dues-paying	
members of P.E.O. chapters within the state. Delegates from each chapter attend		
annual state conventions where new officers are elected by the voting members present.		
In addition, certain proposed amendments to the bylaws are pro	esented and voted upon.	
Part VI, Line 11b: Copies of the final Form 990 were provided	to each member of the	
executive board of Ohio State Chapter prior to filing. Board	members are asked to	
review the return and respond with any questions, though no for	rmal review process is	
currently in place.		
Part VI, Line 12c: Conflict of Interest policies and signature	pages are distributed	
each year to all executive board members and to any committee r	members having influence	
over financial transactions. Signature pages are collected by	the state president and	
monitored for completion. Any conflicts of interest that arise	e are to be reported	
immediately to the affected committee/board, and the remaining	members vote on the	
appropriate action.		
Part VI, Line 19: Governing documents, conflicts of interest po	olicy 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	e audited by an	
independent accountant on a cash basis.	·	