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Return of Organization Exempt From Income Tax

	-
Open	to Public
Ins	pection

Form	990 nent of the Treasus Revenue Service	Return of Organization E	-			OMB No 1545-0047
Departm	nent of the Treasu	Do not enter social security number		•	•	Open to Public
Internal	r the 2016	Information about Form 990 and its slendar year, or tax year beginning July 1	instructions is at www. , 2016, and er		June 30	Inspection . 20 17
<u> </u>		ame of organization	, 2010, and er	iunig	D Employer identificati	
B Chec	ck if applicable	E.O. International Peace Scholars	hin		' '	
		oing business as	mip .		42-60780	158
		umber and street (or P O box if mail is not delivered to street address	ss) Room/su	ıte	E Telephone number	
	Initial return 3	00 Grand Ave			515 255-	3153
	Final return/ terminated	ity or town, state or province, country, and ZIP or foreign postal cod	e			
	return	es Moines, IA 50312			G Gross receipts \$	3,524,83
	Application F pending	ame and address of principal officer			H(a) Is this a group return subordinates?	for Yes X
	K	thy Soppe, same as above			H(b) Are all subordinates inclu	ded? Yes
l Ta	x-exempt status	X 501(c)(3) 501(c) () ◀ (Insert no)	4947(a)(1) or	527	If "No," attach a list (see instructions)
J W	ebsite: 🕨 W	w.peointernational.org			H(c) Group exemption nun	
	orm of organizat		L Ye	ear of forma	tion 1949 M State of	legal domicile IA
Par						
		cribe the organization's mission or most significant activitie	·			· · · · · · · · · · · · · · · · · · ·
a L		students, with citizenship in a co				ates and
Governance	-	, to pursue graduate study in the				
o ve	2 Check th		ns or disposed of more	e than 25%	1 1	
o.t						
		independent voting members of the governing body (Part				
<u>'</u>		ber of individuals employed in calendar year 2016 (Part V, I			1 _ 1	
ct						
1		lated business revenue from Part VIII, column (C), line 12				
\rightarrow	b Net unre	ted business taxable income from Form 990-T, line 34	 		Prior Year	Current Year
	• • • • •					
e n		ons and grants (Part VIII, line 1h)			1,923,925	1,744,89
Revenue		ervice revenue (Part VIII, line 2g)		1	239,421	269,11
		t income (Part VIII, column (A), lines 3, 4, and .Zd). inue (Part VIII, column (A), lines 5, 6 LES (AC, No Early) 11e	, _	• •	239,421	209,11
		nue - add lines 8 through 11 (must equal Part VIII, columni		• •	2,163,346	2,014,01
				• • •	1,462,350	1,589,00
	4 Benefits	d similar amounts paid (Part X, column (A), lines 1-3)	SO-0	• •	1,102,330	1,303,00
_ l_	5 Salaries	other compensation, employee benefits (Part-IX, column-(A),	Maes 5-10)	• •	53,470	54,11
Expenses	6a Professio	al fundraising fees (Part IX column A Part It) UT	iii,(CS O 10)	• •	33,170	34,11
per.		raising expenses (Part IX, column (D), line 25) > 3638	⋰			
۵ ₁		enses (Part IX, column (A), lines 11a-11d, 11f-24e)	 		37,400	41,62
		nses Add lines 13-17 (must equal Part IX, column (A), line			1,553,220	1,684,73
		ess expenses Subtract line 18 from line 12			610,126	329,27
è s					nning of Current Year	End of Year
S and 2	O Total ass	s (Part X, line 16)			7,089,978	7,419,20
Net Assets or Fund Balances		ities (Part X, line 26)			97	4
호텔 2		or fund balances Subtract line 21 from line 20			7,089,881	7,419,15
Part		ure Block				, ,
Under	penalties of p	jury, I declare that I have examined this return, including accompose Declaration of preparer (other than officer) is based on all info	eanying schedules and s	tatements, er has any k	and to the best of my kn	owledge and belief,
۵.		Tather A. Soppe			11/10/1-	7
Sign Here	. '	ature of officer	' m		Date	
	<u>K</u>	thy A. Soppe, Director of Finance/ or print name and title	rreasurer			
	Print/Typ	preparer's name Preparer's signature	Date		Check If PT	IN
Paid					self-employed	
Prepai	Eirm'e na	e >			Fırm's EIN ▶	
Use O	Firm's ad				Phone no	
May th		this return with the preparer shown above? (see instruction	s)			Yes
		uetien Act Notice coethe congrete instructions		<u> </u>		50m 990 (20

P	art III 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:	
	To provide scholarships for qualified women students, with citizenship in a coun	<u>try</u>
	other than the United States and Canada, to pursue graduate study in the United	
	States and Canada.	
2	Did the organization undertake any significant program services during the year which were not listed on the	_
	prior Form 990 or 990-EZ?	× No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	_
		X 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	sured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	others,
	the total expenses, and revenue, if any, for each program service reported	
4a	(Code.) (Expenses \$ 1,639,793 including grants of \$ 1,589,000) (Revenue \$	<u> </u>
	175 scholarships were awarded during the year, totaling \$1,589,000.	,
	The maximum scholarship is \$10,000.	
	The maximum sentialiship is vioyout.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
_		
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
		_
74	Other program services (Describe in Schedule O)	
→u		
4-		
JSA	Total program service expenses ▶ 1,639,793	00
6E1	020 1 000 Farm 9 5	90 (2016)

Page 2

Form 990 (2016)

Par	IV. Checklist of Required Schedules		V 1	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	. 1		
_	complete Schedule A	-1-	X	
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		х
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	}	Х
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,		- 1	
	Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>		
•	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		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			
	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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1 2		
	VII, VIII, IX, or X as applicable.	استعم	-4	
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 109 If "Yes,"			٠,,
	complete Schedule D, Part VI	11a		<u>x</u>
D	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more	11b	Х	
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	110		
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
Ч	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		х
e	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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b	Х	
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		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		.,	}
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	4.5		v
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	х	
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	}	x
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	}	х
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	<u> </u>	Х
		_	000	

Part	Checklist of Required Schedules (continued)		Yes	No.
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
zva b	The time organization operate one of more neophanization. If you, complete company is the first of the company	20b		 -
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		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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			
	employees? If "Yes," complete Schedule J	23	}	Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
244	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	- 1-		
·	to defease any tax-exempt bonds?	24c		ı
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
2.Ja	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?			
	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			l
	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)			1
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
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	_	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		•	
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		<u> </u>
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,	١.		
	or IV, and Part V, line 1	34	X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	├	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		├ ─
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	X_	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		1	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	├	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		40040
		Fom	ココサリ	(2016

Par	 ,			
	Check if Schedule O contains a response or note to any line in this Part V			لملك
_			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1		
	Enter the number of Forms W-29 included in line 1a. Enter -0- if flot applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	10	Х	
2-	reportable gaming (gambling) winnings to prize winners?	1c		
Za	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			
h	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		F
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to θ -file (see instructions)			
3 a	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		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	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			
	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۱ . ا		
	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		
L	and services provided to the payor?	7b		 ^
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70	ļ	\vdash
C	required to file Form 8282?	7c		X
Ь	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		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Ī
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			-
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	
	Section 501(c)(7) organizations. Enter	ĺ		
a	Initiation fees and capital contributions included on Part VIII, line 12	ĺ		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from members or shareholders	1	ļ	
b	against amounts due or received from them)			1
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		İ	
	Section 501(c)(29) qualified nonprofit health insurance issuers.	L		L
	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	1		
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	1		
	Enter the amount of reserves on hand	<u> </u>	<u> </u>	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
h	If "Vas " has it filed a Form 720 to report those payments? If "No " provide an explanation in Schedule O	114h	1	1

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule			
	Check if Schedule O contains a response or note to any line in this Part VI	• • • •	• • •	X
Sect	ion A. Governing Body and Management		r	
	1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year <u>1a</u>	<u>_3 </u>		
	If there are material differences in voting rights among members of the governing body, or if the governing		l	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent <u>1b</u>	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship wit			
	any other officer, director, trustee, or key employee?		<u> </u>	<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?			<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		 	X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		├—	X
6	Did the organization have members or stockholders?	6		<u>X</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		.,	
	one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) member		l .	
	stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	9		
	the year by the following:	-	X	
а	The governing body?		X	
b	Each committee with authority to act on behalf of the governing body?	1	 -≏-	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached the organization of the page and addresses in Separation O.			Х
Socti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			Λ_
Jecui	on b. Policies (This Section b requests information about policies not required by the internal Never	<u>ue 000</u>	Yes	No
40-	Did the assessment in the selection has about a self-lete O	10a		X
10a	Did the organization have local chapters, branches, or affiliates?		 	 -
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapter affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	' 44	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	, <u></u>		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	X	
u	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		1	_
~	rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	, "		
•	describe in Schedule O how this was done	140	Х	
13	Did the organization have a written whistleblower policy?		Х	
14	Did the organization have a written document retention and destruction policy?		Х	
15	Did the process for determining compensation of the following persons include a review and approval to	1		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		L	
а	The organization's CEO, Executive Director, or top management official	15a	<u> </u>	
b	Other officers or key employees of the organization	. 15b	<u> </u>	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	}		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	140-		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		1	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		<u> </u>	لـــــــا
	organization's exempt status with respect to such arrangements?	. 16b	1	
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 (Sec	tion 501((c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website X Another's website X 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	interest	polic	y, 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 rec	cords ▶ -255-3	153	

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

orm	990	(2016)	

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Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent Co	ontr	actors								

X

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

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

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

Check this box if neither the organization nor	Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.									tee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	office Individua	unle	Pos heck ss pe	rson	than or Highest compensated	ลก	(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) Glynda Samford, Chairman Board of Trustees	30	х		х				0	0	0
(2) Deborah H. Taylor	20									
Board of Trustees	1.5	X	L	X		L		0	0	0
(3) Barbara Olson	20	1	ł				ĺ	_		_
Board of Trustees	<u> </u>	X	ļ	X		 -		0	0	0
(4) Jackie Matt	2	1			}	}				
Executive Director	38	ļ	 -	X		 		0	0	0
(5) Kathy Soppe, Director	2	4								0
of Finance, Treasurer	38	 	├	X	-		ļ	0	0	0
(6)	 	-			1	}	1	}		
(7)	 	 	├		├		 			
		1		1	1	1	1		1	
(8)	 	 -	-		-		\vdash			
	1	1	1	1	1		{			
(9)	<u> </u>									
		1								
(10)							Γ			
		1	<u>L</u>			<u> </u>	<u>L</u>		1	
(11)					}		}			
	ļ	<u> </u>	ļ		<u> </u>	<u> </u>	<u>L.</u>			
(12)		4		1	į			1	}	
	 	 		├	 		-	 	 	
(13)		4								
	 	 	┼	-	-		├	 	 	ļ
(14)		-			}			}		
	1	1	1	1	1		1	I .	1	1

Form 990 (2016) Part VII Section A. Officers,	Directors Trustees Key	, Em	nlo			nd H	iah	nest Compensate	d Employ	985 /00	ntinued		age 8
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted (line)	(do i	nat c	Pos heck	C) ation mon	e is or the state of the state	ne an	(D) Reportable compensation from	(E) Reportal compensatic related organizati (W-2/1099-	ole on from ons	Estr amo o comp fro orga and	(F) mated punt of ther ensation in the nization related eization	1
(15)		-											
(16)				-				 					
(17)		}	-	-	-						 -		
(18)			-		-		 						
(19)			-	-	-			 					
(20)					-								
(21)				-	-								
(22)				-	-			 					
(23)				-	-						· · · · · ·		
(24)		-	-	-			-						
(25)		-	\vdash	-									
1b Sub-total c Total from continuation she d Total (add lines 1b and 1c) 2 Total number of individuals (· · · · · · · · · · · · · · · · · · ·	 	· ·	 	 <u></u>	 	D D Nh(han \$100.00	00 of			
reportable compensation from	n the organization ►										—	Yes	No
3 Did the organization list a employee on line 1a? If "Yes,"	any former officer, direct	tor, c	or t	rust	ee,	key	em	nployee, or highe	st compen	sated	3	168	X
4 For any individual listed on	line 1a, is the sum of re	eporta	ble	cor	npe	ensatio	on :	and other compe	nsation fron	n the			
organization and related of individual											4		Х
5 Did any person listed on lir for services rendered to the c	organization? If "Yes," comp.										5		Х
Complete this table for your compensation from the organ year	five highest compensated												
Nam	(A) e and business address						T	(B) Description of s	ervices	C	(C) Compens	ation	
N/A							T						
							#						
							\pm		· · · · · · · · · · · · · · · · · · ·				
2 Total number of independence received more than \$100,00							to	those listed abo	ove) who				

Form **990** (2016)

Par	t VIII	Statement of Revenue Check if Schedule O contains a response or note to an	v line in this Part V			
		Orlege in Ochequie 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
nue and Other Similar Amounts	1a b c d e f	Federated campaigns	1,744,894			
Program Service Revenue	2a b c d e f	All other program service revenue				
	3 4 5 6a b	Investment income (including dividends, interest, and other similar amounts)	125,345			125,345
	c d 7a b	Rental income or (loss)				
Other Revenue	d 8a	Net gain or (loss)	143,774			143,774
Oth	c 9a	Less direct expenses		t		
	0 10a b c	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances				
	11a b c d	All other revenue	2,014,013			269,11

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 respo	nse or note to any line			
	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				
2	Grants and other assistance to domestic	1	Ì		
	individuals See Part IV, line 22	1,515,000	1,515,000		
3	Grants and other assistance to foreign	}	}		
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	74,000	74,000		
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	42,654	22,333	17,731	2,590
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	2,559	1,340	1,064	155
9	Other employee benefits	5,608	2,936	2,331	341
10	Payroll taxes	3,291	1,723	1,368	200
11	Fees for services (non-employees)				
	Management				
	Legal	186		186	
	Accounting	1,575		1,575	
	Lobbying				
	Professional fundraising services See Part IV, line 17.				
f	investment management fees	14,594		14,594	
	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
	Office expenses	5,272	3,515	1,757	
14	Information technology				
15	Royalties				
	Occupancy	2,100	1,400	700	
	Travel	7,586	7,586		
	Payments of travel or entertainment expenses	į	1	}	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
	Depreciation, depletion, and amortization				
23	Insurance	<u> </u>			
24	Other expenses Itemize expenses not covered	}		}	
	above (List miscellaneous expenses in line 24e If	1		1	
	line 24e amount exceeds 10% of line 25, column	}	1		
	(A) amount, list line 24e expenses on Schedule O)				
	Promotional Materials	352			352
ь	Uncolletible Receivables	9,960	9,960		
C	· [_				
d	·				
е	All other expenses				
	Total functional expenses. Add lines 1 through 24e	1,684,737	1,639,793	41,306	3,638
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)				

Form 990 (2016) Page 11 **Balance Sheet** Part X (A) Beginning of year End of year Cash - non-interest-bearing 590,383 1 474,407 Savings and temporary cash investments 2 2 1,744,218 2,116,742 19,966 3 3 Pledges and grants receivable, net 8,106 Accounts receivable, net 4 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net _______. 7 8 9 3,487 10a 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 4,291,897 4,390,517 11 11 425,943 12 443,514 12 13 13 14 14 15 15 7.089.978 16 7,419,202 16 Total assets. Add lines 1 through 15 (must equal line 34) 97 17 17 45 18 18 19 19 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L........ 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25..... 45 97 26 26 Organizations that follow SFAS 117 (ASC 958), check here Balances complete lines 27 through 29, and lines 33 and 34. 27 27

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

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

Retained earnings, endowment, accumulated income, or other funds

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

Permanently restricted net assets.......

Capital stock or trust principal, or current funds

7,419,202 Form 990 (2016)

5,381,201

2,037,956

7,419,157

28

29

30

31

32

33

5,113,965

1,975,916

7,089,881

7,089,978

28

29

31

32

33

complete lines 30 through 34.

Fund

5

Assets

Form 990 (2016) Page 12 Part XI **Reconciliation of Net Assets** Check if Schedule O contains a response or note to any line in this Part XI..... 2,014,013 1 1,684,737 2 2 329,276 3 3 4 7,089,881 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 5 6 6 7 7 8 8 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 7,419,157 33, column (B)) . Part XII **Financial Statements and Reporting** X Check if Schedule O contains a response or note to any line in this Part XII Yes No Accounting method used to prepare the Form 990 Cash X Other Mod. Cash Accrual If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Х 2a Were the organization's financial statements compiled or reviewed by an independent accountant?...... If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 2b 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 Consolidated basis Separate basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight Х 2c of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in

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

Х

3a

3b

Form 990 (2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Department of the Treasury Internal Revenue Service Complete If the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047
2016
Open to Public Inspection

Name of the organization Employer identification number P. E. O. International Peace Scholarship 42-6078058 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). Х An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives, (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of other support (see (described on lines 1-10 isted in your governing support (see instructions) instructions) above (see instructions)) document? No Yes (A) (B) (C) (D) (E)

Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,305,914	1,403,150	1,588,884	1,923,925	1,744,894	7,966,767
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	1,305,914	1,403,150	1,588,884	1,923,925	1,744,894	7,966,767
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)						811,725
	Public support. Subtract line 5 from line 4			<u> </u>	<u> </u>	<u> </u>	7,155,042
	tion B. Total Support				(1) 2045		(0 Tabel
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	1,305,914	1,403,150	1,588,884	1,923,925	1,744,894	7,966,767
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	121,909	112,115	124,990	122,519	125,345	606,878
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			2,259			2,259
11	Total support. Add lines 7 through 10	<u> </u>	<u> </u>		<u> </u>		8,575,904
12	Gross receipts from related activities, etc. (see instructions) .				12	
13	First five years. If the Form 990 is f organization, check this box and stop here	<u> </u>	<u></u>				
	tion C. Computation of Public Sup						02 42100
14	Public support percentage for 2016 (li						83.4319 % 82.8257 %
15	Public support percentage from 2015					15	
16a	331/3% support test - 2016. If the c						. 101
L	this box and stop here. The organization 331/3% support test - 2015. If the continuous c						•••
D	check this box and stop here. The org						. 1
172							
174	'a 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported						
b	Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
18	supported organization	did not check	a box on line 13		a, or 17b, check	this box and see	▶ [_]
—	instructions	 	• • • • • • • • •	·····		Sabadula A /Form (

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2	016	(f) Total
1	Gifts, grants, contributions, and membership fees							
	received (Do not include any "unusual grants")							
2	Gross receipts from admissions, merchandise				_			
	sold or services performed, or facilities				Į į		}	
	furnished in any activity that is related to the						1	
	organization's tax-exempt purpose							<u></u>
3	Gross receipts from activities that are not an							
	unrelated trade or business under section 513.							
4	Tax revenues levied for the]	
	organization's benefit and either paid							
	to or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the						}	
	organization without charge							
6	Total. Add lines 1 through 5							
7 a	Amounts included on lines 1, 2, and 3							
_	received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified							
	received from other than disqualified persons that exceed the greater of \$5,000							
	or 1% of the amount on line 13 for the year					<u></u>		
С	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from	ļ]		,			
	line 6)			L	<u></u>			
Sec	tion B. Total Support			<u></u>	, , , , , , , , , , , , , , , , , , ,			
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2	2016	(f) Total
9 10 a	Amounts from line 6							
ь	Unrelated business taxable income (less							
	section 511 taxes) from businesses							
	acquired after June 30, 1975							
С	Add lines 10a and 10b			1				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or	!	1	1				
	loss from the sale of capital assets							
	(Explain in Part VI)					<u> </u>		
13	Total support. (Add lines 9, 10c, 11,]	}		
	and 12)		l	<u> </u>				
14	First five years. If the Form 990 is f	-			· ·			
<u></u>	organization, check this box and stop here				· · · · · · · · · · · · · · · · · · ·	<u>· · · · </u>	· · · · ·	···· <u>P</u>
	tion C. Computation of Public Sup	 				145		0/
15 4£	Public support percentage for 2016 (line 8		~			15		<u>%</u>
16	Public support percentage from 2015 Sche			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	16		70
	tion D. Computation of Investmen			10. anti-man (0)		17		%
17	Investment income percentage for 2016 (li			• • • •				
18	Investment income percentage from 2015					18 1	331/2 0/	
ısa	331/3% support tests - 2016. If the organization of the property of the control o							
L	17 is not more than 331/3%, check th							
D	331/3% support tests - 2015. If the orgaline 18 is not more than 331/3%, check							
20	Private foundation. If the organization							. []
JSA	The organization	and HOL CHECK	a box on line	11, 100, 01 151				990 or 990-EZ) 2016

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and ElN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	<u></u>	
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b		

Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		ļ	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
sec <u>u</u>	on B. Type I Supporting Organizations	— Т	Voc	No
			165	140
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2		
Secti	on C. Type II Supporting Organizations	2		
	on or type it outporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1	100	
Sect	on D. All Type III Supporting Organizations			
1	Did the accompation provide to each of its appropriate accompations, but the least day of the fifth month of the		Yes	No
•	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2	-	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
Sect	on E. Type III Functionally Integrated Supporting Organizations	•		
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instance of the organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)	No
2	Activities Test Answer (a) and (b) below.		. 53	1.10
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3 a	Parent of Supported Organizations Answer (a) and (b) below. Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	ization	s	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			
instructions. All other Type III non-functionally integrated supporting organization	zations n	nust complete Section	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or	-1-1-		
collection of gross income or for management, conservation, or			}
maintenance of property held for production of income (see instructions)	6		_
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	ly integra	ated Type III supporting	g organization (see
instructions).			

Part	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exer			
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purpo	ses of supported organi	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
_6	Other distributions (describe in Part VI). See instructions			
7_	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI) See			
	instructions		 	
3	Excess distributions carryover, if any, to 2016			
a				
b				<u> </u>
С	From 2013			
d	From 2014			
e	From 2015			
f	Total of lines 3a through e		L	
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f		L	
4	Distributions for 2016 from			,
	Section D, line 7 ⁻ \$			
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount		<u> </u>	
С	Remainder Subtract lines 4a and 4b from 4	<u> </u>		
5	Remaining underdistributions for years prior to 2016, if	{		1
	any Subtract lines 3g and 4a from line 2 For result	{		
	greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016 Subtract lines 3h			{
	and 4b from line 1. For result greater than zero, explain in			1
	Part VI See instructions			
7	Excess distributions carryover to 2017 Add lines 3j	Í		İ
	and 4c			
8	Breakdown of line 7			
a				
b	Excess from 2013			
_ <u>c</u>	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			_

Schedule A (Form 990 or 990-EZ) 2016

B, lines 1 and 2; 3a and 3b; Part	Part IV, Section V, line 1; Part V, \$	C, line 1; Part IV, Section B, line 1e	Section D, lines 2 ; Part V, Section D	and 3; Part IV, Sec	nd 11c; Part IV, Section ction E, lines 1c, 2a, 2t and Part V, Section E, ns.)
Part II, Line 10:		 			
Other Income:	2012	2013	2014	2015	2016
Currency Exchange:	\$0	\$0	\$2,259	\$0	\$0
Total:	\$0	\$0	\$2,259	\$0	\$0
····					
	· · · · · · · · · · · · · · · · · · ·				
				·	

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Haiile	o di die diganization	Lampoyer identification number
P.E	.O. International Peace Scholarship	42-6078058
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in	donor advised
•	funds are the organization's property, subject to the organization's exclusive legal control?	1 1 1
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fun	
•	only for charitable purposes and not for the benefit of the donor or donor advisor, or for an	
	conferring impermissible private benefit?	
Рa	rt II Conservation Easements.	·····
ı u	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)	
-		f a historically important land area
	· · · · · · · · · · · · · · · · · · ·	f a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in t	he form of a conservation
-	easement on the last day of the tax year	Held at the End of the Tax Year
•		2a
a b		2b
C	<u> </u>	2c
d	Number of conservation easements on a certified historic structure included in (a)	
u	, , ,	2d
3	Number of conservation easements modified, transferred, released, extinguished, or termina	
•	tax year >	to by the organization during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection	n handling of
•	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing cons	
•	b	or validity cadditioning adming the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing co	nservation easements during the year
•	▶\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	n 170(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?	
9	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 financia	
	organization's accounting for conservation easements	
Pa	irt 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	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its re	evenue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, educ	ation, or research in furtherance of
	public service, provide, in Part XIII, the text of the footnote to its financial statements that desc	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re- works of art, historical treasures, or other similar assets held for public exhibition, educ	venue statement and balance sneet
	public service, provide the following amounts relating to these items	and, or receased in future ance of
	(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 a	,
_	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
а	Revenue included in Form 990, Part VIII, line 1	_
b	Assets included in Form 990, Part X	

Par	t III Organizations Maintainin	ng Collections of	Art, Histor	rical T	reasures,	or Oth	er Similar Asse	ts (continued)
3	Using the organization's acquisition	on, accession, and o	other records	, check	any of th	e follow	ing that are a sign	ificant use of its
	collection items (check all that app	ly):						
а	Public exhibition d Loan or exchange programs							
ь	Scholarly research e Other							
C	Preservation for future gene	rations						
4	Provide a description of the organ	nization's collections	and explain	how t	hey further	the org	janization's exempt	purpose in Part
	XIII							
5	During the year, did the organization						~	_
	assets to be sold to raise funds rath		ained as part	of the c	organization	n's collec	tion?	Yes No
Par	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 or othe	er intermedia	ry for c	ontributions	or other	assets not	
	included on Form 990, Part X?	<i></i> .	. <i></i> .					Yes No
b	If "Yes," explain the arrangement i	n Part XIII and comp	plete the follow	wing tab	ole.			
					}	<u> </u>	Amount	
	Beginning balance							
	Additions during the year							
_	Distributions during the year					·		
f n-	Ending balance					Latedial	account liability	Yes No
	Did the organization include an am If "Yes," explain the arrangement is							
Par		II Pait All Check in	ere ii tile expi	anation	nas been p	novided i	on Fall All	
ıaı	Complete if the organizat	ion answered "Yes	s" on Form 9	990. Pa	art IV. line	10.		
		(a) Current year	(b) Prior y		(c) Two yes		(d) Three years back	(e) Four years back
1a	Beginning of year balance	1,975,916				3,433	1,763,542	1,734,496
b	Contributions					0,000		
-	Net investment earnings, gains,							
•	and losses	115,513	101	,449	8	0,587	125,496	78,964
d	Grants or scholarships							
	Other expenditures for facilities							
	and programs	6,297		,872		2,567		
f	Administrative expenses	47,176		,132		5,982	5,650	
g	End of year balance	2,037,956	1,975	,916	1,92	5,471	1,843,433	1,763,542
2	Provide the estimated percentage			(line 1g,	column (a)) held as		
а	Board designated or quasi-endown		_%					
	Permanent endowment ▶ 100.0							
C	Temporarily restricted endowment							
	The percentages on lines 2a, 2b, a	•		41 4				
3a	Are there endowment funds not in	the possession of the	ne organization	on that	are neid ai	na aamir	listered for the	Yes No
	organization by							3a(i) X
	(i) unrelated organizations(ii) related organizations							3a(ii) X
h	If "Yes" on line 3a(ii), are the relati							3b X
4	Describe in Part XIII the intended	_						<u> </u>
Par	W. Land Buildings and Fou	inment						
	Complete if the organiza	ition answered "Ye		990, P	art IV, line			
	Description of property		other basis (stment)		or other basis ther)		cumulated (eccation	d) Book value
1 a	Land							
b	Buildings							
C	Leasehold improvements							
d	Equipment							
<u>e</u>	Other	 			· (D)	1		
Tota	I. Add lines 1a through 1e (Column	(d) must equal Fon	n 990, Part X,	, columi	n (B), line 1	υc)		L. D. (F 000) 0010
							Sched	lule D (Form 990) 2016

Part VII	Complete if the organization answered	"Yes" on Form 990	Part	IV line 11b. See Form 990	Part X. line 12.
	(a) Description of security or category	(b) Book value	1	(c) Method of valuati	on.
	(including name of secunty)		<u></u>	Cost or end-of-year marke	et value
	al derivatives	425,943	Cost		
	-held equity interests		 -		
					
(A)		 	 		
(B)		 	 		
(C)			 		
(D)			 		
(E)					
(F)					
(G)					
(H)	(h)	405 043	 	 	
	n (b) must equal Form 990, Part X, col (B) line 12)	425,943	L		
Part VIII	Investments - Program Related. Complete if the organization answered	"Yes" on Form 990	, Part	IV, line 11c. See Form 990,	Part X, line 13.
	(a) Description of investment	(b) Book value		(c) Method of valuat Cost or end-of-year mark	
(1)				2222 2. 0 0 you. man	
(2)			 		
(3)					
(4)	· · · · · · · · · · · · · · · · · · ·				
(5)			1		
(6)					
(7)					
(8)					
(9)					
	n (b) must equal Form 990, Part X, col (B) line 13)				
Part IX	Other Assets.				
	Complete if the organization answered	"Yes" on Form 990), Part	IV, line 11d See Form 990,	Part X, line 15
	(a) Des	scription			(b) Book value
(1)					
(2)					
(3)					
(4)					'
(5)					
(6)					
(7)					
_(8)					
(9)					
	umn (b) must equal Form 990, Part X, col (B) li	ine 15)	<u></u>	<u></u>	
Part X	Other Liabilities.			B4 B 444 O F	000 D 43
	Complete if the organization answered line 25.	I "Yes" on Form 990), Part	IV, line 11e or 11f. See For	m 990, Part X,
1.	(a) Description of liability	(b) Book valu	ıe		
(1) Fede	ral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total (Colum	mn (h) must equal Form 000. Part Y col. (R) line 25.)	▶ ↓	1		

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

JSA
6E1270 1 000

Schedule D (Form 990) 2016

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

1	Page	. 4

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	٦.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
đ	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	1 1	
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ırn.	
1	Total expenses and losses per audited financial statements	1	
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		
С	Other losses		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	1. 1	
	Add lines 4a and 4b	4c	
5 Dogg	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Pat XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	art V, lir nation	ne 4; Part X, line
Part	V, Line 4 Net income from the endowment fund of the reporting of	rgani	zation is
used	to provide additional funds for the educational scholarships as we	ll as	to
	ide community to come the community of t		
prov	ide support toward the cost of administering the organization.		
			

Schedule D (Fo	rm 990) 2016	Page 5
Part XIII	Supplemental Information (continued)	
		
		
		
		· -
		 ··
		
		

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

Open to Public

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

of the organization					ation number
	ce Scholar	ship			
General Information of	n Activities C		nited States. Complete i		
assistance, the grantees' eligibil	ity for the grant	s or assistance	e, and the selection criteria	a used to award the	X Yes No
		ganization's pi	rocedures for monitoring	the use of its grants	and other
Activities per Region (The follow	wing Part I, line	3 table can be	e duplicated if additional sp	ace is needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
North America	0	0	grantmaking	scholarships	74,000
Europe			investments		82,000
Central America & Caribb			investments		1,000
E. Asia & Pacific			investments		17,000
North America			investments		8,000
Middle East & N. Africa			investments		3,000
					-
					-
·	 				
Sub-total	0	0			185,000
	General Information of Form 990, Part IV, Ine 14 For grantmakers. Does the organistance, the grantees' eligibility grants or assistance? For grantmakers. Describe in assistance outside the United Stativities per Region (The follow (a) Region North America Europe Central America & Caribb E. Asia & Pacific North America Middle East & N. Africa	General Information on Activities C Form 990, Part IV, line 14b. For grantmakers. Does the organization maintal assistance, the grantees' eligibility for the grant grants or assistance? For grantmakers. Describe in Part V the organisation of the control of th	General Information on Activities Outside the U Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to sassistance, the grantees' eligibility for the grants or assistance; For grantmakers. Describe in Part V the organization's procession of the sassistance outside the United States. Activities per Region (The following Part I, line 3 table can be conficient in the region offices in the region of the sassistance outside the United States. Activities per Region (The following Part I, line 3 table can be conficient in the region offices in the region of the sassistance outside the United States. Activities per Region (The following Part I, line 3 table can be conficient in the region offices in the region of the sassistance outside the United States. Activities per Region (The following Part I, line 3 table can be conficient in the region offices in the region of the sassistance outside the United States. Activities per Region (The following Part I, line 3 table can be conficient in the region offices in the region of the sample of the sampl	O. International Peace Scholarship General Information on Activities Outside the United States. Complete in Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of assistance, the grantees' eligibility for the grants or assistance, and the selection criteria grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring assistance outside the United States. Activities per Region (The following Part I, line 3 table can be duplicated if additional specific plants or assistance outside the United States. Activities per Region (The following Part I, line 3 table can be duplicated if additional specific plants in the region of the properties o	It the organization O. International Peace Scholarship

185,000

Page 2

Schedule F (Form 990) 2016

(1)	(a) Name of	OP 100 (4)	(r) Region						
(1)	organization	section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(l) Method of valuation (book, FMV, appraisal, other)
(2)									
(3)									
(4)									
(5)									
(9)									
(2)									
(8)									
6									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(46)									

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.

Schedule F (Form 990) 2016

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JSA 6E1275 1 000

Page J

Schedule F (Form 990) 2016

Part III can be duplicated if additional space is needed	litional space is needed		•)			
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisat, other)
(1) Educational Awards/Grants	North America	8	74,000	check	0	N/A	N/A
(2)							
(3)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)					,		
(16)							
(17)							
(48)			:				
						Sch	Schedule F (Form 990) 2016

Part	IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) Form 5471 not required.	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2016

Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method, amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
Part I	line 2Proof of enrollment is required before a scholarship can be granted
and red	cipients are required to submit proof of enrollment each semester. The reports
are rev	viewed and acted upon as necessary. All scholarships paid outside the U.S. are
paid fo	or recipients studying in Canada.
	
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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.

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Attach to Form 990.	:= S	ł
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	▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	
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Open to Public

Employer identification number 42-6078058 ž

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Part | General Information on Grants and Assistance

P.E.O. International Peace Scholarship

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. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 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 noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.	government	rganizations lis	ted in the line 1 tab	le		A	
3 Enter total number of other organizations listed in the line	ted in the line	1 table	•		1 table	A	

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

Schedule I (Form 990) (2016)

JSA 6E1288 1 000

Schedule I (Form 990) (2016) (f) Description of noncash assistance educational program, as well as proof of an address in the United States. Transcripts are required each Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b), and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Pt. I, Line 2--Scholarship recipients are required to show proof of admission and enrollment in their N/A (e) Method of valuation (book, FMV, appraisal, other) N/A 0 (d) Amount of noncash assistance 1,515,000 (c) Amount of cash grant semester. These reports are acted upon as necessary. Part III can be duplicated if additional space is needed. (b) Number of recipients 167 1 Educ awards for edu study in US (a) Type of grant or assistance JSA 6E1289 1 000 Part III ~ 3 4 Ŋ ဖ

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

20**16**

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

Open to Public Inspection

Name of the organization	Employer identification number
P.E.O. International Peace Scholarship	42-6078058
Part I, Line 6: The number of volunteers is estimated, based on t	the number of state
chairmen and number of Board of Trustees.	
Part VI, Line 7a-7b: The president of the related "parent" organi	ization, International
Chapter of the P.E.O. Sisterhood, appoints the board of trustees	for the organization.
Some decisions of the board of trustees are subject to approval b	by the executive board
of the parent organization.	
Part VI, Line 11: Copies of Form 990 were provided to each member	r of the board of
trustees and to the audit committee of the parent organization p	rior to filing. A
formal review process was conducted with the audit committee, with	th opportunities for
questions from that committee and the board of trustees to be add	dressed before the
return was filed.	
return was rried.	
Part VI, Line 12c: Conflict of Interest policies and signature pa	ges are distributed
yearly to each member of the board of trustees. Signature pages	are collected at the
office in Des Moines, IA and monitored for completion. Any confl	icts of interest that
arise pursuant to this process or otherwise throughout the year	are to be reported
immediately, and the remaining members take the appropriate acti	on.
Part VI, Line 15a-15b: The organization's Executive Director	is employed by the
related "parent" organization, International Chapter of the P.E.	O. Sisterhood, and the
organization shares her services with International Chapter. The	International Chapter
explains on its Form 990 the process determining the Executive D	irector's
compensation. A similar arrangement exists for the Director of F	inance/Treasurer.

Name of the organization	Employer identification number
P.E.O. International Peace Scholarship	42-6078058
Part VI, Line 19: Governing documents, conflict of interest police	ies and financial
statements are available to members of the parent corporation onl	y. These items are not
available to the general public.	
Part VII, Line la: The Executive Director and Director of Finance	/Treasurer of the
parent organization, International Chapter of the P.E.O. Sisterho	od, also serve in the
same capacity for the reporting organization. An estimate of aver	age hours worked each
week for reporting and related organizations has been included in	column (B). No wages
are paid or reimbursed for either officer from the reporting orga	nization. All wages
and related benefits for the individuals are paid and reported by	the parent
organization.	
Part IV, Line 12a and Part XII, Line 2b: The organization's modif	ied cash basis
financial statements were audited by an independent auditing firm	on a consolidated
basis with the other philanthropic funds of the P.E.O. Sisterhood	, excluding Cottey
College and P.E.O. Foundation. (Listed on Schedule R, Part II)	

Page 1/2

OMB No 1545-0047

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

International Peace Scholarship

P.E.O.

Department of the Treasury Internal Revenue Servce Name of the organization

SCHEDULE R (Form 990)

Open to Public 2016

Employer identification number Inspection

42-6078058

(f) Direct controlling entity Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (e) End-of-year assets (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33, (c)
Legal domicile (state
or foreign country) Primary activity (a)
Name, address, and EIN (f applicable) of disregarded entity Part II Part I

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(a)	(a)	(၁)	(p)	(0)	(4)	(B)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public chanty status (if section 501(c)(3))	Direct controlling entity	Section 512(b controlled entity?	b)(13)
							2
(1) Int'l Chapter P.E.O. Sisterhood 42-0453829							ł
3700 Grand Ave, Des Moines, IA 50312	membershp org lowa	Iowa	501(c)4	N/A	N/A		×
(2) P.E.O. Scholar Awards 42-1379026							
3700 Grand Ave, Des Moines, IA 50312	schol. fund	Iowa	501 (c) 3	7	See Pt VII		×
(3) P.E.O. STAR Scholarship Fund 30-0583651							
3700 Grand Ave, Des Moines, IA 50312	schol. fund	Iowa	501 (c) 3	7	See Pt VII		×
(4) P.E.O. Prog for Continuing Educ. 23-7405311							
3700 Grand Ave, Des Moines, IA 50312	grant fund	Iowa	501 (c) 3	7	See Pt VII		×
(5) P.E.O. Foundation 42-6094564							
3700 Grand Ave, Des Moines, IA 50312	educ scholshp Iowa	Iowa	501(c)3	7	See Pt VII		×
(6) Cottey College							
1000 West Austin, Nevada, MO 64772	college	Missouri	501(c)3	2	See Pt VII		×
(7) Cottey College Building Fund 42-6078016							
3700 Grand Ave, Des Moines, IA 50312	suppt college lowa	Іома	501 (c) 3	12-Type II	See Pt VII		×
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					Schedule f	Schedule R (Form 990) 2016) 2016

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

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

P.E.O. International Peace Scholarship

Part 1

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

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OMB No 1545-0047

Employer identification number

42-6078058

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

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)						
(2)						
(3)						
(4)						
(2)						
(9)						
Part	Identification of Related Tax-Exempt Organizations. Complete if the one or more related tax-exempt organizations during the tax year.	. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had the tax year.	wered "Yes" on Fo	rm 990, Part IV,	line 34 because	it had

(a)	(a)	(6)	Ð	(9)	€	9	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public o	rolling	Section 512(controlle entity?	Section 512(b)(13) controlled entity?
					!	Yes	Š
(1) Cottey College Endowment Fund 42-6078017							
3700 Grand Ave, Des Moines, IA 50312	endow. Fund	Iowa	501(c)3	12-Type II	See Pt VII		×
(2) P.E.O. Educational Loan Fund 42-6078059					 		
3700 Grand Ave, Des Moines, IA 50312	loan fund	Iowa	501(c)3	7	See Pt VII		×
(3)			İ				
(4)							
					!		
(5)							
(9)			 				
(2)							
							!
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					Schedule R (Form 990) 2016	R (Form 9	90) 2016

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 Schedule R (Form 990) 2016

(h) (i)
Percentage 512(b)(13)
connecting controlled entity? Schedule R (Form 990) 2016 Yes No (k) Percentage ownership (j) General or managing partner? Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year Yes No end-of-year assets (i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065) (g) Share of (f) Share of total (h) Dispropositorna ş income Yes (g) Share of end-of-(e)
Type of entry
(C corp. S corp. or trust) year assets (f) Share of total income (d) Direct controlling because it had one or more related organizations treated as a partnership during the tax year. entity (c) Legal domicite (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) state or foreign country) (b) Primary activity (d)
Direct controlling entity (c) Legal domicile (state or foreign (a) Name, address, and EIN of related organization (b) Primary activity (a)
Name, address, and EIN of related organization N/A N/A JSA 6E1308 1 000 Part III Part IV 4 티 **⊕** (5) 3 Ξ (2) 3 9 9 3 9 ල

	Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36
	IV, line 34
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Schedule	Part ∨

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	elated organizations list	ed in Parts II-IV?	Yes No
 a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity. b Gift, grant, or capital contribution to related organization(s) 			
c Gift, grant, or capital contribution from related organization(s)			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			\prod
f Dividends from related organization(s),			1f ×
g Sale of assets to related organization(s)			79 × ×
			- - -
b I onco of facilities commonst or other access from related organization(s)			>
Performance of services or membership or fundraising solicitation			
 m Performance of services or membership or fundraising solicitations by related organization(s). n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s). 			1 x ×
o Sharing of paid employees with related organization(s)			10 X
p Reimbursement paid to related organization(s) for expenses			1
s Other transfer of cash or property from related organization(s)	is line, including cover	ed relationships and transa	ction thresholds
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) P.E.O. Foundation	U	384,405	Cash-FMV
(2) International Chapter P.E.O. Sisterhood	о'ш	54,112	Cash-FMV
(3)			
(4)			
(5)			
(9)			
JSA 6E1309 1 000		Sch	Schedule R (Form 990) 2016

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

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

(a) Name, address, and EIN of enuty	(b) Primary activity	(c) Legal domicie (state or foreign country)	1 .	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	(I) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(I) General or managing partner?	(k) Percentage ownership
			sections 512-514)	Yes No			Yes No		Yes No	
(1)										
(2)				-			-		-	
72)	1									
(3)										
(4)										
(5)									-	
(9)										
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(6)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
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