	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (
Form	990

Department of the Treasury

## **Return of Organization Exempt From Income Tax**

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

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

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open to Public
Inspection

OMB No 1545-0047

	or the	2017 calendar year, or tax year beginning $April 1$ , 2017, and ending	March 31	, 20 18
€ .		C Name of organization	D Employer iden	tification number
•	Check if ap	1.E.O. Discernood on State Chapter		
$\mathbb{Z}$	Addres		31-61	181539
	Name	change Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephone num	ber
2000	Initial	return 3700 Grand Ave	515 2	255 3153
3	Final r			
	Ameno	bed Des Moines. IA 50312-2899	G Gross receipts	555,844
	Applic pendir	F Name and address of puncipal officer	H(a) Is this a group subordinates?	return for Yes X N
_		Linda Coulles - same as C above	H(b) Are all subordin	ates included? Yes N
$\overline{\Gamma}$	Tax-exe	empt status 501(c)(3) X 501(c) (4) ◀ (insert no) 4947(a)(1) or 52	If "No," atta	ch a list (see instructions)
J	Websit	www.peointernational.org	H(c) Group exempt	ion number ▶ 1072
	_		formation 1927 M s	tate of legal domicile IA
Р	art l	Summary		<del></del>
		Briefly describe the organization's mission or most significant activities. Women's member	rship organiz	ation
a		supporting six philanthropic projects for women. Thes		
anc	Ï	loan and award programs and a women's college owned by		
Ë	2	Check this box ▶ ☐ If the organization discontinued its operations or disposed of more that		
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3   5
ಷ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4 5
ies	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)		5 1
Ξ	6	Total number of volunteers (estimate if necessary)		6 100
Activities & Governance	72	Total unrelated business revenue from Part VIII, column (C), line 12		7a
	/ a	Net unrelated business taxable income from Form 990-T, line 34		7b
	- 5	Net unrelated business taxable income noni i orni 550-1, inie 54	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	542,78	<del></del>
ine	9		342,70	332,743
Revenue	40	Program service revenue (Part VIII, line 2g)		0 60
æ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,10	<del></del>
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	544,96	
_	7	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	335,41	
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	333,41	382,192
	4 -	Benefits paid to or for members (Part IX, column (A), line 4)	7.00	7 005
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,03	7,085
ë	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
Š	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	140.05	016 051
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	183,35	
	178	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	525,80	
. "	19	Revenue less expenses Subtract line 18 from line 12.	19,16	
SOC		1 2018 Por	Beginning of Current Ye	
Assets or	20	Total assets (Part X, line 16)	243,57	7 192,602
걸	21	Total liabilities (Part X, line 26)		
Piet Tage		Net assets or fund balances Subtract line 21 from line 20.	243,57	7 192,602
	Tielle	Signature Block		
Pa		alties of perjury, I declare that I have examined this return, including accompanying schedules and staten		my knowledge and belief, it is
Un	der pen			
Un	der pen	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer ha	C L A	110
Un tru	der pen e, corre		8/9	[18
Un tru	der pen e, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has  Tarry 9. Symp  Signature of officer	8/9 Date	[18
Un tru	der pen e, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has  Tathy 9. Soppe  Signature of officer  Kathy A. Soppe, Director of Finance	8/9 Date	[18
Un tru	der pen e, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has  Tarry 9. Sympletic Property 9. Signature of officer  Kathy A. Soppe, Director of Finance  Type or print name and title	8/9 Date	[18
Sig He	der pen e, correc yn re	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has  Tathy 9. Soppe  Signature of officer  Kathy A. Soppe, Director of Finance	Date Check	//8
Sig He	der pen e, correc yn re	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has  Tarry 9. Sympletic Property 9. Signature of officer  Kathy A. Soppe, Director of Finance  Type or print name and title	8/9 Date	' [
Sig He Paid	der pen e, correc gn re d parer	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has  Tarry 9. Sympletic Property 1. Signature of officer  Kathy A. Soppe, Director of Finance  Type or print name and title	Date Check	' [
Sig He Paid Pre	der penee, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has  Tathy A. Soppe, Director of Finance  Type or print name and title  Print/Type preparer's name  Preparer's signature  Date	Date  Check self-employed	' [

NE 16



Part IV (2017) Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	Complete Schedule A		<u> </u>	X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<u> </u>	_X_
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	1		
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,			
	Part III	5_	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	}	[	
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		1	
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	ł _	ĺ	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X_
8	complete Schedule D, Part III		Ì	Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8		
3	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	) )	х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	<u> </u>		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1.7		
	VII, VIII, IX, or X as applicable			, ,
٠a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		Х
· b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		_X
ı C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
. <b>d</b>	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
1	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_ <u>X</u>
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		_ <u>X</u> _
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
420	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes" complete	11f	+	<u> X</u>
124	Schedule D. Parts XI and XII.	12a	$ \mathbf{x} $	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If	120	^	
	"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		
	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	} }	1	
	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		1	
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_ <u>X</u> _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		ļ	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and I' /	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		1	17
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		_ <u>X</u> _
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	ŀ	v
10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	"		<u>X</u>
19	If "Yes," complete Schedule G, Part III	19	-	Х
	11 Tau, complete concours of distinct the transfer of the tran		990 /	

Form 9	90 (2017)		1	Page <b>4</b>
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
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	1		}
	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			١
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			1
	organization's current and former officers, directors, trustees, key employees, and highest compensated			1,7
04-	employees? If "Yes," complete Schedule J	_23_		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	1		1
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
C	to defease any tax-exempt bonds?	24c		ļ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<del> </del>
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			ĺ
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	, ,	İ	
а	, , , , , , , , , , , , , , , , , , , ,	28a		<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		{	
	Schedule L, Part IV	28b		<u>X</u>
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		<u>X</u> _
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		v
31	conservation contributions? If "Yes," complete Schedule M	30		<u>X</u> _
31	Part 1	31	ļ	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes,"</i>	<del>ان</del> ا		<del></del> -
<b>0</b> 2	complete Schedule N, Part II	32	Ì	Х
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
-	or IV, and Part V, line 1	34	ł	Х
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		-	
	Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		Ì	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (	(2017)

Form	990 (2017)		ı	Page
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	]		1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	ļ		
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1		ſ
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1	1		ł
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			ļ
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	į į		ļ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a_		X
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			Ì
	(FBAR)			•
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	}		Ì
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	_X_	<b></b> _
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	<u> X</u>	
7	•	li		
·a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		ł
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	i <b>.</b>		
	required to file Form 8282?	7c		<del> </del>
	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		<u> </u>
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b></b> -
	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		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
۵	sponsoring organization have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a		9b		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter	, ,	ļ	
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources		ſ	
_	against amounts due or received from them )			 
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	}	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			_
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which	Ì	]	
	the organization is licensed to issue qualified health plans		}	
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Χ
		14b	I	

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O			
	Check if Schedule O contains a response or note to any line in this Part VI	<u>···</u>	· · ·	X
Sect	ion A. Governing Body and Management		Yes	No
		<del></del>	169	NO
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O		1	
b	Enter the number of voting members included in line 1a, above, who are independent	]		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			}
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
-	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	}		ł
	one or more members of the governing body?	7a	X	<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	}		
	stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	-		}
	the year by the following	1	l	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
<del></del>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	Yes	No
		10a	X	-
	Did the organization have local chapters, branches, or affiliates?	Tua		<del>                                     </del>
þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b	Х	Ì
44.	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	<u>X</u>	
11a		- 1.0		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	}
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		_==-	<del> </del> -
b	rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			ļ —
·	describe in Schedule O how this was done	12c	Х	ļ
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		_X_
b	Other officers or key employees of the organization	15b		X
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	ļ ,	. ;	
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply  Own website Another's website X Upon request Other (explain in Schedule O)	501(0	c)(3)s	only)
19	Describe in Schedule O whether (and if so, how) the organization made its gove ning documents, conflict of int	erest	policy	, and
20	financial statements available to the public during the tax year  State the name, address, and telephone number of the person who possesses the organization's books and record Kathy A. Soppe. 3700 Grand Ave. Des Moines. TA 50312 (515) 255–3153	s <b>&gt;</b>		

Form 990 (	(2017)	
------------	--------	--

Page 7

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (C) Position (A) (B) (D) (E) (F) Name and Title (do not check more than one Average Reportable Reportable Estimated box, unless person is both an hours per compensation compensation from amount of veek (list any officer and a director/trustee) from related other hours for the organizations compensation Individual Officer Institutional employee Highest compensated related organization (W-2/1099-MISC) from the employee organizations (W-2/1099-MISC) organization below dotted and related trustee organizations (1) Linda Coulles 40 President Х Х 0 0 0 (2) Kylie Elizabeth Smith 35 Vice President Х X 0 0 0 (3) Martha Billing 35 Organizer X Χ 0 0 0 35 Nancy R Shelton Treasurer Х Х 0 0 0 30 Janice Hornack Secretary Х Х 0 0 0 (6) (7) (8) (9) (10)(11)(12)(13)(14)

Part VII Section A. Officers, Directors, Tru	istees, Key	/ Em	pio			ind H	ligh	est Compensate	d Employees	(conti	nued	<u>)                                    </u>	
		İ		•	C)								
(A)	(B)	(do )	not cl		sition more	e than c	one	(D)	(E)			(F)	
Name and title	Average hours per	box,	unles	ss pe	erson	is both	an	Reportable compensation	Reportable			imated ount o	
	week (list any	office	_			or/trust	<u> </u>	from	compensation from related	om		other	•
	hours for	2 0	nstı	Officer	e	l age Hg∓	Former	the	organizations			ensati	
	related organizations	Individual trustee or director	Institutional trustee	g	Key employee	loye	턭	organization (W-2/1099-MISC)	(W-2/1099-MIS	C)		m the	
	below dotted	학학	mal		οğ	ြို့ ရှိ	l	(** = *********************************			and	relate	d
	line)	uste	TZ.	ļ ,	ĕ	per	ŀ				orga	nızatıo	ns
		0	tee	Ì '		Highest compensated employee		1		ľ			
	<del> </del>					_ <u>~</u>	-			$-\!$	_		
(15)	<del> </del>	{			}	<u> </u>	}	ł		-			
(16)	<del> </del>	ļ	H		├─-	<del> </del>		<del> </del>		$\dashv$			
(10)	<del> </del>	! 				<u> </u>							
(17)	<del>                                     </del>			-	├─	<b>-</b>	<del> </del>	<del></del>	<u> </u>				
		1			1	ļ	1	}		}			
(18)					$\vdash$		T			_			
					l			[					
(19)													
(20)			1				1	[					
	ļi						Ĺ						
(21)	<del> </del>						i	]					
	ļ	<u> </u>		<u> </u>			<b>├</b> -					<u> </u>	
(22)			} }				ł	[					
(02)	<del> </del>		$\vdash$				<del> </del>	ļ		<del></del> -		<del></del> -	
(23)	<u> </u>												
(24)	<del>  </del>		$\vdash$	_	<u> </u>								
(24)	<del> </del>							l					
(25)							_	-	<del></del>				——
				- (				{					
1b Sub-total	·						•			$\dashv$			
c Total from continuation sheets to Part VII,	Section A						•						
d Total (add lines 1b and 1c)							•						
2 Total number of individuals (including but no							who	received more th	an \$100,000	of	-		
reportable compensation from the organization	on ▶		(	)									
										_		Yes	No
3 Did the organization list any former offi	cer, directo	or, o	r tr	uste	е,	key	emp	ployee, or highes	t compensate	d L			
employee on line 1a? If "Yes," complete Sched	dule J for su	ch ind	dıvıd	lual <sub>.</sub>							3		_X_
4 For any individual listed on line 1a, is the	sum of reg	portal	ole (	com	ipei	nsatio	n a	and other compens	sation from th	е	ł	[	, !
organization and related organizations gi													
ındıvıdual										-	4		_X
5 Did any person listed on line 1a receive or	accrue co	mper	ısatı	ion	fror	n any	un un	related organization	on or individua	al	}		
for services rendered to the organization? If "	res," compie	te Sc	nea	uie .	J TO	r sucr	ı pe	rson	<u> </u>		5		X
1 Complete this table for your five highest con	on one atod i	ndon	ond.	ont.		troote		that recovered mark	4hon \$100 00	20 of			
<ol> <li>Complete this table for your five highest concompensation from the organization. Report</li> </ol>											tax		
year						, -		• · · · · · · · · · · · · · · · · · · ·	m, and organia				
(A)							T	(B)			(C)		
Name and business add	lress						1	Description of ser	vices	Com		ation	
None													
							<u> </u>						
2 Total number of independent contractors						ted t	o 1		e) who				
received more than \$100,000 of compensation	on from the	orga	nıza	tion	<u> </u>			0		<del></del> -		000	
7E1050 1 000										F	orm 9	90 (	2017)

	990 (2							Page <b>9</b>
Par	ťVIII				har 11 B 434			
		Check if Schedule O contains	a respo	nse or note to an	y line in this Part VI	(B)	(C)	   (D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns	. 1b . 1c . 1d . 1e	192,705 360,038				
Co	g h	Noncash contributions included in lines 1  Total. Add lines 1a-1f			552,743			
Program Service Revenue	2a b c d e f	All other program service revenue . Total. Add lines 2a-2f						
<u> </u>	3 4	Investment income (including and other similar amounts) Income from investment of tax-exe	dıvıde  mpt bond	nds, interest,  i proceeds .	60			60
	5 6a	Royalties	Real	(II) Personal				
	b c d	Rental income or (loss)						
	7a	assets other than inventory	ecunties	(ii) Other				
	c d	Less cost or other basis and sales expenses  Gain or (loss)  Net gain or (loss)						
Other Revenue	8a b	Gross income from fundraising events (net including \$ of contributions reported on line 1c) See Part IV, line 18 Less direct expenses	 a					
	9a	See Part IV, line 19	es a					-
	b c 10a	Less direct expenses						

1,271

**Business Code** 

1,770

554,573

1,770

1,770

b

60

returns and allowances . . .

Total revenue. See instructions

d All other revenue . . e Total. Add lines 1 la-11d .

Less cost of goods sold . . . . .

Net income or (loss) from sales of inventory.

Miscellaneous Revenue

## Part IX Statement of Functional Expenses

Section 50 1(c)(3) and 501(c)(4)	organizations must complete all columns	All other organizations must complete column (A)	•
Check if Schedule	O contains a response or note to any line	in this Part IX	

Do 1 3b,	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	381,649	381,649		
2	Grants and other assistance to domestic	-		İ	
	individuals See Part IV, line 22	543	543		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16			<del></del>	
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	6,369	2,123	4,246	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
	Payroll taxes	716	239	477	
	Fees for services (non-employees)				
	Management				
	Legal				
С	Accounting	4,300		4,300	
	Lobbying				
	Professional fundraising services See Part IV, line 17.				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				·
13	Office expenses				
14	Information technology	500			500
15	Royalties				
16	Occupancy				
17	Travel	76,555	25,518	51,037	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	10 200			
	Conferences, conventions, and meetings	10,300	3,352	6,704	244
	Interest	110 505	440 505		
21	· ·	110,525	110,525		
22		7.64	<del></del>		<del></del>
	Insurance	764	<del></del>	764	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	Operating Expense	13,327	4,442	8,885	
		13,321	4,442	8,883	
	·		+		<del></del>
٥		<del>-</del>			
d				<del></del>	
	All other expenses	605 540	520 301	76 412	744
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and	605,548	528,391	76,413	744
ICA	fundraising solicitation Check here   if following SOP 98-2 (ASC 958-720)				5 000 (0047)

Form 990 (2017)
Part X Balance Sheet

Pledges and grants receivable, net  Accounts receivable, net  Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L  Loans and other receivables from other disqualitied persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(3(6)) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L  Notes and loans receivable, net  Notes and loans receivable, net  Notes and loans receivable, net  Notes and loans receivable, net  Notes and loans receivable, net  Notes and loans receivable, net  Notes and loans regerible, net  Notes and loans regerible, net  Notes and loans regerible, net  Notes and loans regerible Part II of Schedule D  Less accumulated depreciation.  Investments - publicly traded securities  Investments - publicly traded securities  Investments - publicly traded securities  Investments - publicly traded securities  Notes assets See Part IV, line 11  Notes assets See Part IV, line 11  Notes assets See Part IV, line 11  Notes assets See Part IV, line 11  Notes assets See Part IV, line 11  Notes assets See Part IV, line 11  Notes assets See Part IV, line 11  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 1 through 15 (must equal line 34)  Notes assets, Add lines 17 (line 11)  Notes assets, Add lines 17			Check if Schedule O contains a response o	r note to any line in this Pa	art X		
Pledges and grants receivable, net  Accounts receivable, net  Accounts receivable, net  Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part IV of Schedule L  Complete Part IV of Schedule D  Dess accumulated depreciation  II Investments - publicly traded securities  II Investments - program-related See Part IV, line 11  Investments - program-related See Part IV, line 11  Investments - program-related See Part IV, line 11  If Total assets. Add lines 1 through 15 (must equal line 34)  Deferred revenue  Deferred revenue  Complete Part IV of Schedule D  Deferred revenue  Deferred revenue  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Co					(A)		(B)
Pledges and grants receivable, net  Accounts receivable, net  Accounts receivable, net  Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part II of Schedule L  Complete Part IV of Schedule L  Complete Part IV of Schedule D  Dess accumulated depreciation  II Investments - publicly traded securities  II Investments - program-related See Part IV, line 11  Investments - program-related See Part IV, line 11  Investments - program-related See Part IV, line 11  If Total assets. Add lines 1 through 15 (must equal line 34)  Deferred revenue  Deferred revenue  Complete Part IV of Schedule D  Deferred revenue  Deferred revenue  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Complete Part IV of Schedule D  Escrow or custodial account liability Co		1	Cash - non-interest-bearing		168,456	1	117,421
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 498ft)(11), persons described in section 498ft)(12), persons described in section 498ft)(13), persons described in section 498ft), persons described in section 498ft)(13), persons described in section 498ft), persons described in 10a, persons described in		2	Savings and temporary cash investments		75,121	2	75,181
4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Complete Part II of Schedule L 5 Complete Part II of Schedule L 5 Complete Part II of Schedule L 5 Complete Part II of Schedule L 5 Complete Part II of Schedule L 7 Complete Part II of Schedule L 7 Complete Part II of Schedule L 7 Complete Part II of Schedule L 7 Complete Part II of Schedule L 7 Complete Part II of Schedule L 7 Complete Part II of Schedule L 10 Complete Part II of Sched	sets	3	Pledges and grants receivable, net			3	
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L  6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(11)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L  7 Notes and loans receivable, net  8 Inventories for sale or use,  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D  11 Investments - publicly traded securities  12 Investments - publicly traded securities  13 Investments - program-related See Part IV, line 11  14 Intangible assets  15 Other assets See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 34)  17 Accounts payable and accrued expenses,  18 Grants payable  19 Deferred revenue  20 Tax-exempt bond liabilities  21 Escrow or custodial account liability Complete Part IV of Schedule D  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L  22 Cother liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D  26 Total liabilities. Add lines 17 through 25.  27 Total liabilities. Add lines 17 through 25.  28 Organizations that follow SFAS 117 (ASC 958), check here ▶ and		4	Accounts receivable, net		4		
Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(E), and contributing employers and sponsoring organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D 10 b Less accumulated depreciation. 10 b Less accumulated depreciation. 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - other securities See Part IV, line 11 14 Intangible assets. 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses. 17 Investment equal line 34) 18 Grants payable 19 Deferred revenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Cans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25.  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow SFAS 117 (ASC 958), check here  and contributing employees and content and payables to related third parties. 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 4 Complete Part II of		5	Loans and other receivables from current and t	former officers, directors,			
Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(E), and contributing employers and sponsoring organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D 10 b Less accumulated depreciation. 10 b Less accumulated depreciation. 11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - other securities See Part IV, line 11 14 Intangible assets. 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses. 17 Investment equal line 34) 18 Grants payable 19 Deferred revenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Cans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25.  26 Total liabilities. Add lines 17 through 25.  27 Organizations that follow SFAS 117 (ASC 958), check here  and contributing employees and content and payables to related third parties. 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 3 and 5 Complete Part II of Schedule D 4 Complete Part II of			trustees, key employees, and highest co		} }		
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation		6	Complete Part II of Schedule L Loans and other receivables from other disqualified persit 4958(f)(1)), persons described in section 4958(c)(3)(B), and sponsoring organizations of section 501(c)(9) volu organizations (see instructions) Complete Part II of Sche				
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D b Less accumulated depreciation		7	Notes and loans receivable, net			7	
10a Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D  b Less accumulated depreciation. 10b 10c  11 Investments - publicly traded securities See Part IV, line 11 12  13 Investments - other securities See Part IV, line 11 13  14 Intangible assets 14  15 Other assets See Part IV, line 11 15  16 Total assets. Add lines 1 through 15 (must equal line 34) 243,577 16 192,60  17 Accounts payable and accrued expenses 177  18 Grants payable 18  19 Deferred revenue 19  20 Tax-exempt bond liabilities 20  21 Escrow or custodial account liability Complete Part IV of Schedule D 21  22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22  23 Secured mortgages and notes payable to unrelated third parties 23  24 Unsecured notes and loans payable to unrelated third parties 24  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25  26 Total liabilities. Add lines 17 through 25. 26  Organizations that follow SFAS 117 (ASC 958), check here ▶ and	Ass	8	Inventories for sale or use			8	
other basis Complete Part VI of Schedule D b Less accumulated depreciation	•		•	, ,		9	
b Less accumulated depreciation		10 a	Land, buildings, and equipment cost or				
11 Investments - publicly traded securities 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25.  26 Organizations that follow SFAS 117 (ASC 958), check here   19   10   12   13   14   15   15   15   15   15   15   15							
12 Investments - other securities See Part IV, line 11		b				10c	
13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notices and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25. 26 Organizations that follow SFAS 117 (ASC 958), check here   □ and		11	Investments - publicly traded securities		<del></del>	11	
14 Intangible assets		12				12	<del> </del>
15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34)		13				13	
16 Total assets. Add lines 1 through 15 (must equal line 34)		14	Intangible assets			14	<del></del>
17 Accounts payable and accrued expenses		15	Other assets See Part IV, line 11				·
18 Grants payable		16			243,577		192,602
19 Deferred revenue		17				17	<del></del>
20 Tax-exempt bond liabilities		18			18		
Escrow or custodial account liability Complete Part IV of Schedule D		19				<del>`</del>	
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			Tax-exempt bond liabilities	<u>.</u>			
trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		21		· · · · · · · · · · · · · · · · · · ·		21	
23 Sectived mortgages and notes payable to unrelated third parties	es	22	• •	· ·		}	
23 Sectived mortgages and notes payable to unrelated third parties	Ħ						
23 Sectived mortgages and notes payable to unrelated third parties	iab						
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	_						
parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D						24	
of Schedule D		25	,	-		1	
26 Total liabilities. Add lines 17 through 25		ĺ	•				
Organizations that follow SFAS 117 (ASC 958), check here ▶ and			of Schedule D	· · · · · · · · · · · · · · · · · · ·			
	_	26			<del></del>	26	
Temporarily restricted net assets  27  28  Temporarily restricted net assets  29  Permanently restricted net assets  Organizations that do not follow SFAS 117 (ASC 958), check here  X and	ces		complete lines 27 through 29, and lines 33 and	34.			
Temporarily restricted net assets	<u>a</u> n	<b>\</b>	Unrestricted net assets				
Permanently restricted net assets	Ba	l	Temporarily restricted net assets	. <i>.</i>			
Organizations that do not follow SFAS 117 (ASC 958), check here	pu	29				29	
complete lines 30 through 34.	or Fu		complete lines 30 through 34.	+			
30 Capital stock or trust principal, or current funds	sts	30	Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund	SS	l	Paid-in or capital surplus, or land, building, or equi	pment fund			
32 Retained earnings, endowment, accumulated income, or other funds 243,577 32 192,60	Ť	32	Retained earnings, endowment, accumulated inco	ome, or other funds			192,602
	Š	1	Total net assets or fund balances				192,602
34 Total liabilities and net assets/fund balances		34	Total liabilities and net assets/fund balances	<u> </u>	243,577	34	192,602

orm 99	0 (2017)				Pa	ge <b>12</b>
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1				573
2	Total expenses (must equal Part IX, column (A), line 25)	2			605,	548
3	Revenue less expenses Subtract line 2 from line 1	3			-50,	975
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			24 <u>3,</u>	577
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		_		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			192,	602
Part		_				
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u></u>	<u></u> .	. <u></u>	X
					Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	ı ın			
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		<u> x</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	ог			
	reviewed on a separate basis, consolidated basis, or both			, :		
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were aud					
	separate basis, consolidated basis, or both					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversi	ght			
	of the audit, review, or compilation of its financial statements and selection of an independent ac			2c		X
	If the organization changed either its oversight process or selection process during the tax year,	explair	ı ın			
	Schedule O					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	חו ו			
	the Single Audit Act and OMB Circular A-133?			3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	lergo	the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits		3b_		
				Form	990	(2017)

#### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organ ization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organ ization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

_	0000000		on anaci sconon con(i	in complete all the bolic	A complete rait ii-A
f the	e orgaraization answered "Yes," (see se parate instructions), the	on Form 990, Part IV, line 5 (Proxy	Tax) (see separate i	instructions) or Form 990-	EZ, Part V, line 35c (Prox
	Section 501(c)(4), (5), or (6) org				
	e of organization	<del></del>		Employer ide	ntification number
Ρ.	E.O. Sisterhood OH	State Chapter		31-6181	539
		organization is exempt under	section 501(c) or		
1		organization's direct and indirect p		<del></del>	
	definition of "political campa		. •	•	
2	Political campaign activity e	xpenditures (see instructions)		▶ \$	
3	Volunteer hours for political	campaign activities (see instruction	ns)		
	rt I-B Complete if the c	organization is exempt under s	section 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	55 ▶ \$	
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under sect	tion 4955 ▶ \$	
3	If the organization incurred	a section 4955 tax, did it file Form	4720 for this year?		Yes No
					Yes No
_	If "Yes," describe in Part IV				
Pai	rt I-C Complete if the c	organization is exempt under	section 501(c), e	xcept section 501(c)(3	<u>s).                                    </u>
1		expended by the filing organization			
2		ng organization's funds contributed			
		es			
3		enditures Add lines 1 and 2 En			
	line 17b		• • • • • • • • • •	▶\$	<del></del>
4 5	Did the filling organization fill	e Form 1120-POL for this year? and employer identification numb	er (FIN) of all sectu	on 527 political organiz	Yes No
3		s For each organization listed, en			
	the amount of political conf	tributions received that were prom	ptly and directly de	elivered to a separate po	litical organization, such
	as a separate segregated fur	nd or a political action committee (F	PAC) If additional sp	pace is needed, provide i	nformation in Part IV
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If
					none, enter -0-
(1)			<del></del>		
,					
(2)					
	_				
(3)					
(4)					
(5)					
		 		<u> </u>	
(6)					

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

Schedule C (Form 990 or 990-EZ) 2017

	edule C (Form 990 or 990-EZ) 2017			<del></del>		Page 2
Pa	rt II-A Complete if the org section 501(h)).	anization is e	exempt under section	on 501(c)(3) and	filed Form 5768 (elec	ction under
A	Check ▶ if the filing organize	ation belongs to	an affiliated group (a	nd list in Part IV e	ach affiliated group mem	ber's name,
			re of excess lobbying ex	•		
В			oox A and "limited cont	rol provisions ap	<del>'</del>	<del></del>
	Timits ( The term "expenditu")	on Lobbying Ex ires" means ai	penditures nounts paid or incurre	d.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to in	fluence public	opinion (grass roots lo	bbying)		
b	Total lobbying expenditures to in	ifluence a legis	lative body (direct lobb	yıng)		
С	Total lobbying expenditures (add	d lines 1a and 1	b)	. <i>.</i> [		
d	Other exempt purpose expendition	ures		. <i>.</i> [		
е	Total exempt purpose expenditu	res (add lines 1	c and 1d)	. <i>.</i>		
f	Lobbying nontaxable amount	Enter the amo	unt from the following	g table in both		
	columns					
	If the amount on line 1e, column (a)	or (b) is: The lo	bying nontaxable amour	t is:		
	Not over \$500,000	20% of	the amount on line 1e			
	Over \$500,000 but not over \$1,000	,000 \$100,0	00 plus 15% of the exces	s over \$500,000		
	Over \$1,000,000 but not over \$1,50	0,000 \$175,0	00 plus 10% of the exces	s over \$1,000,000		
	Over \$1,500,000 but not over \$17,0	000,000 \$225,0	00 plus 5% of the excess	over \$1,500,000		
	Over \$17,000,000	\$1,000	<del></del>			<del></del>
g	Grassroots nontaxable amount					
h	Subtract line 1g from line 1a If					
i	Subtract line 1f from line 1c If z					
j	If there is an amount other that			_		
	reporting section 4911 tax for th					Yes No
			Averaging Period Und	• •		
	(Some organizations that			-		ns below.
		See the se	parate instructions for	lines 2a through	2f.)	
_		Lobbying E	xpenditures During 4-	Year Averaging Pe	eriod	
	Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) Total
2a	Lobbying nontaxable amount	<del></del>				

Schedule C (Form 990 or 990-EZ) 2017

**b** Lobbying ceiling amount (150% of line 2a, column (e))

c Total lobbying expenditures

Grassroots ceiling amount
 (150% of line 2d, column (e))

f Grassroots lobbying expenditures

d Grassroots nontaxable amount

	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).		orm 5/6	8		
For ea	ch "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b	)	
	· · · · · · · · · ·	Yes No		Amo	unt	
le	gring the year, did the filing organization attempt to influence foreign, national, state or local gislation, including any attempt to influence public opinion on a legislative matter or ferendum, through the use of					
a Vo	olunteers?		-			
	uid staff or management (include compensation in expenses reported on lines 1c through 1i)?.	_	4			
	edia advertisements?	$\dashv$	+			
	ublications, or published or broadcast statements?		<del>                                     </del>			
	rants to other organizations for lobbying purposes?		<del>                                     </del>			
	rect contact with legislators, their staffs, government officials, or a legislative body?					
	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	her activities?					
j To	otal Add lines 1c through 1i					
	d the activities in line 1 cause the organization to be not described in section 501(c)(3)? $\dots$ $igspace$		4			
	'Yes," enter the amount of any tax incurred under section 4912		<u> </u>			
	'Yes," enter the amount of any tax incurred by organization managers under section 4912 the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		-			_
Part i	I-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	c)(5), or	section	1		
	501(c)(6).				Yes	No
1 W	ere substantially all (90% or more) dues received nondeductible by members?			1	Х	
2 D	d the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Х	
3 D	d the organization agree to carry over lobbying and political campaign activity expenditures from	the prio	r year?	3		Х
Part II	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."	OR (b) P	art III-A		3, is	
	ies, assessments and similar amounts from members		1			
	ection 162(e) nondeductible lobbying and political expenditures (do not include amoun	its of				
	Hitical expenses for which the section 527(f) tax was paid).		2a			
	arryover from last year.		$\overline{}$			
	tal		2c			
	gregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
ex	cess does the organization agree to carryover to the reasonable estimate of nondeductible lob	bying	1.1			
ar <b>5</b> Ta	d political expenditure next year?	 <u></u>	5			
Part I						
	the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated instructions), and Part II-B, line 1. Also, complete this part for any additional information	group lis	st), Part	II-A, lu	nes 1	and
2 (see ı						
2 (see ı						_
2 (see 1						
2 (see I						
2 (see 1						
2 (see :						
2 (see 1						
2 (see 1						
2 (see 1						

Schedule C (F	orm 990 or 990-EZ) 2017	Page <b>4</b>
Part IV	orm 990 or 990-EZ) 2017 Supplemental Information (continued)	
Laitiv	Supplemental information (Schillings)	
		<del></del>
		-
	· · · · · · · · · · · · · · · · · · ·	
	<del> </del>	· · · · · · · · · · · · · · · · · · ·
		<del></del>

## 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.

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

Name	of the organization		Employer identification number
P.E	.O. Sisterhood OH State Chapter		31-6181539
Pa	rt   Organizations Maintaining Donor Adv	vised Funds or Other Similar Funds or	
	Complete if the organization answered		
		(a) Donor advised funds	(b) Funds and other accounts
	Tatal number at and of year		(a) raines and said assessing
1	Total number at end of year		<del></del>
2	Aggregate value of contributions to (during year)		<del></del>
3	Aggregate value of grants from (during year)		<del></del>
4	Aggregate value at end of year		
5	Did the organization inform all donors and dono		
	funds are the organization's property, subject to the	e organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors,	and donor advisors in writing that grant fu	nds can be used
	only for charitable purposes and not for the bend	efit of the donor or donor advisor, or for ar	ny other purpose
	conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements.		<del></del>
	Complete if the organization answered	d "Yes" on Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held by th		
	Preservation of land for public use (e.g., re-		of a historically important land area
	Protection of natural habitat	· -	of a certified historic structure
	Preservation of open space	Treservation c	or a certified motoric structure
2	Complete lines 2a through 2d if the organization h	seld a gualified concervation contribution in	the form of a consoniation
_	easement on the last day of the tax year		Held at the End of the Tax Year
	•	<u> </u>	<del> </del>
а	Total number of conservation easements	1	2a
b	Total acreage restricted by conservation easemen		2b
C	Number of conservation easements on a certified		2c
d	Number of conservation easements included in (	· · · · · · · · · · · · · · · · · · ·	Í
	historic structure listed in the National Register		_2d
3	Number of conservation easements modified, tra	nsferred, released, extinguished, or termina	ated by the organization during the
	tax year ▶		
4	Number of states where property subject to cons	ervation easement is located >	
5	Does the organization have a written policy re	garding the periodic monitoring, inspection	on, handling of
	violations, and enforcement of the conservation ea	asements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforcing cons	servation easements during the year
	•		ů ,
7	Amount of expenses incurred in monitoring, inspec	cting, handling of violations, and enforcing co	inservation easements during the year
	<b>▶</b> \$	and and an arranged	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of section	on 170(h)(4)(B)(ı)
Ŭ	and section 170(h)(4)(B)(ii)?		
۵	In Part XIII, describe how the organization reports		
9	balance sheet, and include, if applicable, the text		•
	organization's accounting for conservation easeme		al statements that describes the
Da	rt III Organizations Maintaining Collection		Similar Assots
Га	Complete if the organization answered		Jilillai Assets.
	<del></del>	<del></del>	
1a	If the organization elected, as permitted under S	FAS 116 (ASC 958), not to report in its re	evenue statement and balance sheet
	If the organization elected, as permitted under S works of art, historical treasures, or other simil public service, provide, in Part XIII, the text of the fi	ootnote to its financial statements that desc	cribes these items
b	If the organization elected, as permitted under		
_	works of art, historical treasures, or other simil	ar assets held for public exhibition, educ	ation, or research in furtherance of
	public service, provide the following amounts rela-		
	(i) Revenue included on Form 990, Part VIII, line	1	▶\$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a		
_	following amounts required to be reported under s		
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		
	Paperwork Reduction Act Notice, see the Instructions for		Schedule D (Form 990) 2017

	•							
Sched	iule D (Form 990) 2017							Page 2
Par	t III Organizations Maintaini	ng Collections o	f Art, Hist	orical Trea	asures,	or Other Sim	lar Asse	ts (continued)
3	Using the organization's acquisition		other recor	ds, check a	ny of the	e following that	are a sign	ificant use of its
	collection items (check all that app	ly)		-				
а	Public exhibition		d _	∐ Loan or e	exchange	programs		
b	Scholarly research		e	Other				
C	Preservation for future gene							
4	Provide a description of the organ	nization's collection	s and expla	ain how the	y further	the organization	n's exemp	t purpose in Part
	XIII							
5	During the year, did the organization							
	assets to be sold to raise funds rath		tained as pa	rt of the org	anization	n's collection?		Yes No
	Complete if the organizate 990, Part X, line 21.	tion answered "Ye						t on Form
1 a	Is the organization an agent, truste			•			_	
	included on Form 990, Part X?					<i></i> .	\	Yes No
b	If "Yes," explain the arrangement i	n Part XIII and com	plete the fo	lowing table		<del> </del>		
	_				<u> </u>	+	Amount	
C	Beginning balance							
d	Additions during the year							
e	Distributions during the year							
1	Ending balance						-1-14-0	
	Did the organization include an am						· · · · · ·	Yes No
_	If "Yes," explain the arrangement i	n Part Alli Check i	nere ir the e	manation na	is been p	rovided on Part X		<del>                            </del>
Pai	t V Endowment Funds. Complete if the organizat	ion answered "Ve	e" on Form	000 Part	N/ line	10		
	Complete if the organization	(a) Current year	(b) Pric		c) Two year		years back	(e) Four years back
	D	<del></del>	1 (2)	, , , , ,		(4) (11100	yours buck	(o) i bai youro baok
1a	Beginning of year balance	<del></del>	<del> </del>					
b	Contributions		<del>                                     </del>					
С	Net investment earnings, gains, and losses							
a	Grants or scholarships		<del> </del>					
	Other expenditures for facilities	<del> </del>	<del>                                     </del>					
t	and programs	1	1				1	
	Administrative expenses		<del>                                     </del>					
'	End of year balance							
g 2	Provide the estimated percentage		end halance	line 1a co	lumn (a))	held as		
a	Board designated or quasi-endown		%	, (o 19, oo	ιαιτιτι (α//	noid do		
b	Permanent endowment >	%	_					
C	Temporarily restricted endowment	▶ %						
	The percentages on lines 2a, 2b, a		100%					
3 a	Are there endowment funds not in	the possession of t	he organiza	tion that are	held an	d administered fo	r the	
	organization by		_					Yes No
	(i) unrelated organizations	<i></i>						3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" on line 3a(ii), are the relate					,		3b
4	Describe in Part XIII the intended in	uses of the organization						
Par	t VI Land, Buildings, and Equ	ipment.	ooli on Ear-	- 000 Dc-		110 See Fee	000 Por	t Y line 10
	Complete if the organiza  Description of property		es" on Forr	(b) Cost or of		(c) Accumulated		I X, IINE 10
	peachtron or broberry	(a) Cost c		(othe		depreciation	1 "	, Door false

e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c)

b Buildings
c Leasehold improvements
d Equipment

	Investments - Other Securities.		0-4 N / 15-2 44h   C F 000   D4 V	40
			Part IV, line 11b See Form 990, Part X, I	ine 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
	al derivatives			
•	-held equity interests	1 - 1-		
• •				
(A) (B)		<del></del>		
(C)		<del></del>		
(D)				
(E)			<del></del>	
(F)				
(G)				
(H)				
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments - Program Related. Complete if the organization ans	wered "Yes" on Form 990, F	art IV, line 11c. See Form 990, Part X, li	ine 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1)				
(2)			<del></del>	
(3)				
(4)		<del></del>		
(5)				
(6)				
(7)				
<u>(8)</u> (9)				
	n (b) must equal Form 990, Part X, col (B) line 13)	<b>•</b>		
Part IX	Other Assets. Complete if the organization ans	wered "Yes" on Form 990, F	art IV, line 11d See Form 990, Part X, li	ine 15
		(a) Description	( <b>b</b> ) Boo	ok value
<u>(1)</u>				
(2)				
(0)		<del></del>		
(3)				
(4)				
(4) (5)				
(4) (5) (6)				
(4) (5) (6) (7)				
(4) (5) (6) (7) (8)				
(4) (5) (6) (7) (8) (9)	ımn (b) must equal Form 990, Part X, co	I (B) line 15)		
(4) (5) (6) (7) (8) (9)	Other Liabilities.		▶ art IV, line 11e or 11f See Form 990, Pa	art X,
(4) (5) (6) (7) (8) (9) Total. (Columnation)	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability			art X,
(4) (5) (6) (7) (8) (9) Total. (Colu Part X	Other Liabilities. Complete if the organization ansuline 25.	wered "Yes" on Form 990, P		art X,
(4) (5) (6) (7) (8) (9) Total. (Colu Part X	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability	wered "Yes" on Form 990, P		art X,
(4) (5) (6) (7) (8) (9) Total. (Columnary X) 1. (1) Federal (2) (3)	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability	wered "Yes" on Form 990, P		art X,
(4) (5) (6) (7) (8) (9) Total. (Columnary X) 1. (1) Federal (2) (3) (4)	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability	wered "Yes" on Form 990, P		art X,
(4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability	wered "Yes" on Form 990, P		art X,
(4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability	wered "Yes" on Form 990, P		art X,
(4) (5) (6) (7) (8) (9) Total. (Columnary X) 1. (1) Federary (2) (3) (4) (5) (6) (7)	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability	wered "Yes" on Form 990, P		art X,
(4) (5) (6) (7) (8) (9) Total. (Columnation of the columnation of the	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability	wered "Yes" on Form 990, P		art X,
(4) (5) (6) (7) (8) (9) Total. (Columna   Part X  1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability al income taxes	wered "Yes" on Form 990, P		art X,
(4) (5) (6) (7) (8) (9) Total. (Column Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X)	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability al income taxes	wered "Yes" on Form 990, P  (b) Book value	art IV, line 11e or 11f See Form 990, Pa	
(4) (5) (6) (7) (8) (9) Total. (Column (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (2) Liability fo	Other Liabilities. Complete if the organization ansuline 25.  (a) Description of liability al income taxes  In (b) must equal Form 990, Part X, col (B) In or uncertain tax positions.	wered "Yes" on Form 990, P  (b) Book value  de 25) ▶  de the text of the footnote to the		he

Dana	4
Page	•

Part 2	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	n.	
1	Total revenue, gains, and other support per audited financial statements	1	554,573
-	Amounts included on line 1 but not on Form 990, Part VIII, line 12		<del> </del>
	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
	Recoveries of prior year grants		
۲ C	Other (Describe in Part XIII )		
d	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	554,573
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1		331/3/3
-	Investment expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIII )	4c	
С 5	Add lines 4a and 4b	5	554,573
Part			334,373
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	605,548
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	. [	
а	Donated services and use of facilities	i	
b	Prior year adjustments	}	
c	Other losses		
d	Other (Describe in Part XIII )		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	605,548
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	·	
b	Other (Describe in Part XIII )		
	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	605,548
	Supplemental Information.  The the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part III, lines 1a and 4, Part IV, lines 1b and 4, Part IV, lin		
2, Part	XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	
			<del></del>
			<del></del>
<del></del>			

Schedule D (Fo	orm 990) 2017					Page <b>5</b>
Part XIII	Supplemental I	nformation (contir	nued)			
		<del>-</del>				
				<del></del>		
		<del>-</del>	<del></del>			
		<del> </del>				
	<del></del>	<del></del>				
			<del></del>		<del></del>	
	<del></del>					
				·		
	<del> </del>	<del></del>				
	- <del>-</del>	<del> </del>	<del></del>		<del></del>	
		<del></del>			<del></del>	
	<del></del>					
		<del>_</del>				
				<del></del>	<del></del>	
			<del></del> .		<del></del>	
	<del></del>		-			

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

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

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

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047	2017
------------------	------

31-6181539

P.E.O. Sisterhood OH State Chapter

General Information on Grants and Assistance Part

..... X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ................. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Cottey College, 1000 W Austin							
Nevada, MO 64772	440545271	501(c)(3)	71,597	0	1		Gen Supp/Schol
(2) P.E.O. Educational Loan Fund							
Des Moines, IA 50312	426078059	501(c)(3)	28,187	0			Educ Loans
(3) P.E.O. Int'l Peace Scholarship							
Des Moines, IA 50312	426078058	501(c)(3)	37,247	0			Scholarships
(4) P.E.O. Program for Contin Educ	1						
Des Moines, IA 50312	237405311	501(c)(3)	48,525	0			Educ Grants
(5) P.E.O. Scholar Awards	] ]						
Des Moines, IA 50312	421379026	501(c)(3)	32,794	0			Educ Awards
(6) P.E.O. STAR Scholarship							
Des Moines, IA 50312	300583651	501(c)(3)	36,086	0			Scholarships
(7) P.E.O. Foundation							
Des Moines, IA 50312	426094564	501(c)(3)	127,213	0			Schol/Grants
(8)	: :						
				i			
(6)							
(10)							
					;		
(11)							
					:	:	
(12)							
2 Enter total number of section 501(c)(3) and government org	government	organizations list	anizations listed in the line 1 table.	ie			7

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

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

Schedule 1 (Form 990) (2017)

JSA 7E1288 1 000

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Part III

	ו מול זון כמין פה מחלווים וו מתמווים ומו בלמכה וא וובבתכת	שטווטן שטשלט וו	200			
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(f) Description of noncash assistance
		recipients	cash grant	noncash assistance	FMV, appraisal, other)	
1						
c					•	
7						
က						
4			!			
5						
ဖ						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	the informati	on required in P	art I, Ine 2, Part I	II, column (b), and any o	ither additional information.

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

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

Reports of these organizations are available to all members of P.E.O. Sisterhood. P.E.O. of other organizations share a mailing address allPart II, Line 1(a) -- With the exception of Cottey College,

Des Moines, IA 50312 3700 Grand Ave, Schedule I (Form 990) (2017)

## SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2017

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Reversue Service Name of the Organization

► Go to www.irs.gov/Form990 for the latest information.

Sisterhood OH State Chapter 31-6181539 Part VI, Lines 6-7b: The organization's members consist of the active, dues-paying members of P.E.O. chapters within the state. Delegates from each chapter attend annual state conventions where new officers are elected by the voting members present. addition, certain proposed amendments to the bylaws are presented and voted upon. Part VI, Line 11b: copies of the final Form 990 were provided to each member of the executive board of Ohio State Chapter prior to filing. Board members are asked to review the return and respond with any questions, though no formal review process is currently in place. Part VI, Line 12c: Conflict of Interest policies and signature pages are distributed each year to all executive board members and to any committee members having influence over financial transactions. Signature pages are collected by the state president and monitored for completion. Any conflicts of interest that arise are to be reported immediately to the affected committee/board, and the remaining members vote on the appropriate action. Part VI, Line 19: Governing documents, conflicts of interest policy and financial statements are available to members upon request. These items are not made available to the general public. Part XII, Line 2b: The organization's financial statements were audited by an independent accountant on a cash basis.

Name of the	organization	Employer identification number	Page Z
P E O	Sisterhood OH State Chapter	31-6181539	
1.12.0.			
		<del></del>	
		···-	
			·
		<del></del>	
		<del>-</del>	
		<del></del>	
		···	
	•		
		<del></del>	
		· · · · · · · · · · · · · · · · · · ·	