CENTRIOPEL TO STATE AUG 0 9 2019

SCANNED SEP 1 8 2019

2949323604802 9
Return of Organization Exempt From Income Tax

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

2018

Department of the Treasury Internal Revenue Service

▶ 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.

O	oen	to	Pu	blic
	ins	pec	tic	on

A F	or th	e 2018	calendar year, or tax year beginning	Aprıl 1	, 2018, a	nd ending		ch 31		, 20 19	
			C Name of organization				I □	Employer ident	ification	number	
B 0	heck if a	pplicable	P.E.O. Sisterhood PA	State Chapter							
	Addre		Doing business as					23-62		В	
	Name	change	Number and street (or P O box if mail is	not delivered to street address) R	loom/suite	E	Telephone num	ber		
	Initial	return	3700 Grand Ave				L_	515 2	55 3	153	
	Final termi	return/ nated	City or town, state or province, country, a	and ZIP or foreign postal code							
Г	Amen	ded	Des Moines, IA 50312	-2899			G	Gross receipts \$	5	33	8,476
		cation	F Name and address of principal officer				H	(a) Is this a group subordinates?	return for	Yes	X No
			Ellen Endslow - same	as C above			H((b) Are all subording	stes included?	Yes	No
ī	Tax-ex	empt sta	atus 501(c)(3) X 501(c) (4) ∢ (insert no)	4947(a)(1) or	527	7	if 'No " attac	ch a list (se	e instruction	5)
J	Websi	te 🕨	www.peointernational.	org	1		о 1 н	c) Group exempte	on number	▶ 107	2
		of organ		Association Other		L Year of	formation	1938 M s	ate of leg	al domicile	IA
_	art l		ımmary								
		Briefly	describe the organization's mission o	r most significant activities	Women's	s membe	rship	organız	atior	1	
به	`		porting six philanthrop	_				scholar			t,
anc			n and award programs ar								
ern	2		this box if the organization d								
Governance	3		er of voting members of the governing						3		5
	4		er of independent voting members of t					i-	4		5
Activities &	5		number of individuals employed in cale					F	5		0
Ž	6		number of volunteers (estimate if neces					Г-	6		100
Ac	1 -		unrelated business revenue from Part V						7a		
	1		nrelated business taxable income from						'b		-
								Prior Year		Current	Year
	8	Contri	ibutions and grants (Part VIII, line 1h)					331,09	4 .	32:	7,24,9
Revenue	9		am service revenue (Part VIII, line 2g)					<u> </u>			
š	10		ment income (Part VIII, column (A), line			ſ		41	.5		876
æ	11		revenue (Part VIII, column (A), lines 5,			ſ		2,62			3,985
	12		revenue - add lines 8 through 11 (must			F		334,13			2,110
	13		s and similar amounts paid (Part IX, coli	•				199,83			5,968
	14		its paid to or for members (Part IX, colu	• • • • • • • • • • • • • • • • • • • •						÷	
, 0	4-		es, other compensation, employee bene								
Expenses	16 a		ssional fundraising fees (Part IX, column	•				· · · · · · · · · · · · · · · · · · ·	_		
per	h		fundraising expenses (Part IX, column (I	D) less 25) b 321							
ũ	17		expenses (Part IX, column (A), lines 11	· ———				136,74	4	9.	3,035
			expenses Add lines 13-17 (must equal					336,57			9,003
			nue less expenses Subtract line 18 from					-2,44			3,107
es	-	1101011	ide lead expenses educate interiories	T	<u> </u>	· · · · · ·	Beginnin	g of Current Ye		End of Ye	
Net Assets or Fund Balances	20	Total a	assets (Part X, line 16)			ļ		189,40	3	212	2,510
Ass Bal	21		liabilities (Part X, line 26)								
Set of	22		ssets or fund balances Subtract line 21					189,40	3	212	2,510
	rt II		gnature Block					203,10	<u> </u>		
Und	der per	nalties o	of perjury, I declare that I have examined th	is return, including accompa	nying schedule	s and statem	ents, and	to the best of r	ııy knowl	edge and L	velief, it is
true	e, corre	ct, and	complete Declaration of preparer (other than	officer) is based on all inform	ation of which	preparer has	any know	rledge			
			Mathy A. Some					211	119		
Sig			Signature of officer					Date			
He	re		Kathy A. Soppe, Direct	or of Finance							
			Type or print name and title	<u> </u>							
		Print/	Type preparer's name	Preparer's signature		Date		Check	PTIN		
Paid								self-employed	·		
	parer	Firm's	s name 🕨				Fır	m's EIN ▶			
Use	Only		address >					none no			
May	y the		iscuss this return with the preparer	shown above? (see ins	structions)				[Yes	No
			Reduction Act Notice, see the separat	·	· · ·				<u> </u>		0 (2018)



Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х Х 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Χ Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 5 assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Х 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 6 Х 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Х 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 9 Х 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 Χ If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," Х 11a b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more 11b Χ c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more 11c Х d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part 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 Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Χ b Was the organization included in consolidated, independent audited financial statements for the tax year? If 12b "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional". Χ Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. 13 Х 14a Did the organization maintain an office, employees, or agents outside of the United States?......... Х 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b Χ Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 Х 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 Х 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).......... Х Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Χ Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 Х Х b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 21 Х

Part	Checklist of Required Schedules (continued)		Yes	No
	The second secon		res	NO
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	44		
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
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			
	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?			
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	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			
	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?	25b		х
26	If "Yes," complete Schedule L, Part I	235		
26	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)	ړ د د ا		
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			١
	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		,
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			<u>~</u>
00	conservation contributions? If "Yes," complete Schedule M	30	İ	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		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	ļ	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	<u>. </u>	X
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1 2	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			<u> </u>
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1	İ	Ì
	Did the organization comply with backup withholding rules for reportable payments to vendors and]		}
	reportable gaming (gambling) winnings to prize winners?	1 c	X	<u> </u>
		_	000	

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
_	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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)		ļ	1
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization			
	solicit any contributions that were not tax deductible as charitable contributions?	6a	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		-	į
	gifts were not tax deductible?	6b	X	<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).		ļ	ĺ
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		- 1	İ
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		-
	If "Yes," indicate the number of Forms 8282 filed during the year	_		ĺ
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8	1	ĺ
_	sponsoring organization have excess business holdings at any time during the year?	٥		
9	Sponsoring organizations maintaining donor advised funds.	9a	1	
	Did the sponsoring organization make any taxable distributions under section 4966?	9b		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	- 55		
10	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		İ	
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
_	against amounts due or received from them)			ĺ
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 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			-
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	,		
	excess parachute payment(s) during the year?	15_		Х
	If "Yes," see instructions and file Form 4720, Schedule N	46		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u> X</u>
	If "Yes," complete Form 4720, Schedule O			

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b by 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				
	The state of the s			Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year	5 [
14	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				
b	committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent	5	- 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship w	/ith			
	any other officer, director, trustee, or key employee?		2		Χ
3	Did the organization delegate control over management duties customarily performed by or under the dir				
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	- 1	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	. L	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		Х
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	oint			
	one or more members of the governing body?	· · _ '	7 a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) member				
	stockholders, or persons other than the governing body?	· · ⊢	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken dur	ing			
	the year by the following				
а	The governing body?	• •	Ва	X	
	Each committee with authority to act on behalf of the governing body?	• •	3b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached		.		v
Secti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	1	X
Occi	on B. Folicies (This decilor B requests information about policies not required by the internal Nevel	100 00		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	1	0a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapte	• •	-		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	1 4	оь	Х	
11a		·	1a	Х	
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? <i>If "No," go to line 13 </i>	_ 1	2a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could g				
	rise to conflicts?		2b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "You	es,"			
	describe in Schedule O how this was done		2c	Х	
13	Did the organization have a written whistleblower policy?	. [_1	13		X
14	Did the organization have a written document retention and destruction policy?		14	Χ	
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	. 1	5a		<u>X</u>
b	Other officers or key employees of the organization	· <u> 1</u>	5b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	ļ			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem		_		v
	with a taxable entity during the year?	· -	6a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard to the participation of the procedure of the participation of the par	the			
Socti	organization's exempt status with respect to such arrangements?	. 1	6b]		
	on C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed None	00 T //	2001		01/-
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 9 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website	90-1 (3	secu	юп 5	U I(C)
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of	of intere	est p	olicy	, 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 re	cords I	>		
	Kathy A. Soppe, 3700 Grand Avenue, Des Moines, IA 50312 (515)255-3153				

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

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	orga	nıza	ition	CO	npen	sate	ed any current office	er, director, or trus	tee
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unle: er an	Pos heck ss pe	rson	n both Highest compensated	an	(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) Ellen Endslow	25									_
President	1	X	ļ	Х				0	0	0
(2) Alicia King Redfern	25			.,					0	0
Vice President	25	X	 	Х	-			0	<u> </u>	0
(3) Ann Huddleston	25	X		х				0	0	0
Organizer (4) Jennifer Young Pioch	25	_^		^			 	<u> </u>	<u> </u>	- 0
Treasurer	23	x		Х				0	0	0
(5) Starr Hull	25	\ \ \ \	 	^			<u> </u>	· · · · · ·		
Secretary	123	x		х				0	0	0
(6)			1	ļ	_					
		<u> </u>								
(7)										
			<u> </u>							
(8)		1								
			_				ļ			
(9)		-			ŀ				,	
(10)										
		1	i							•
(11)										
	ļ		<u> </u>	ļ						"
(12)		}								
(13)				-	-		<u> </u>			
(10)	<u> </u>	1								
(14)			-							
		1		1	1	1	l			

Part VII Section A. Officers, Directors, Trus	stees, Key	/ Emj	oloy	/ee	s, a	nd Hi	igh	est Compensate	d Employ	ees (co	ntınued	")
(A) Name and title	(B) Average hours per week (list any	(C) Position (do not check more than on box, unless person is both a officer and a director/truste						(D) Reportable compensation from	(E) Reportable compensation from related		Est am	(F) imated ount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizat (W-2/1099-		fro orga and	ensation im the inization related nizations
(15)												
(16)												
(17)											-	
(18)												
(19)												
(20)												
(21)												
(22)												
(23)												
(24)												
(25)												
1b Sub-total c Total from continuation sheets to Part VII, 5 d Total (add lines 1b and 1c) Total number of individuals (including but no	Section A ot limited to	 <u>.</u>	 se li	 sted	 	 	▶ ▶ who	o received more the	nan \$100,0	00 of		
Did the organization list any former offi employee on line 1a? If "Yes," complete Sched	cer, direct	or, o	r tr	uste dual	ee,	key	em	ployee, or highes	st compens	sated	3	Yes No
4 For any individual listed on line 1a, is the organization and related organizations grandividual	eater than	n \$1: 	50,0 		? / 	f "Ye	s," 	complete Sched	ule J for	such 	4	
5 Did any person listed on line 1a receive or for services rendered to the organization? If ")											5	- X
Complete this table for your five highest concompensation from the organization Report year												
(A) Name and business add	Iress		-					(B) Description of se	rvices	С	(C) ompens	ation
None												
Total number of independent contractors received more than \$100,000 of compensations.						ted t	io	those listed abo	ve) who			
JSA 8E1050 1 000		<u> </u>			-						Form	990 (2018)

	990 (2						Page S
Par	t VIII		no or note to any	ulino in this Bort VII	11		
		Check if Schedule O contains a respon	se or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta: under sections - 512-514
evenue and Other Similar Amounts	1a b c d e f g h	Federated campaigns	208,111 Business Code	327,249			
Program Service Revenue	b c d e f g	All other program service revenue					
Other Revenue	b c	Investment income (including dividen and other similar amounts)	(ii) Personal (ii) Personal (iii) Other 10,351 6,366	3,985	3,985		. 876
		Miscellaneous Revenue	Business Code				
	11a		 				

3,985

332,110

d All other revenue . . . e Total. Add lines 11a-11d

Total revenue. See instructions

Part IX Statement of Functional Expenses

10	Check if Schedule O contains a respo			(C)	(D)
### Grants and other assistance to domestic individuals See Part IV, line 22	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses		Management and	Fundraising
2 Grants and Other assistance to domestic individuals See Part V, line 22. 30,713 30,		185,255	185,255		
Individuals See Part IV, line 22 Grants and Other assistance to foreign organizations, foreign operaminents, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, frustees, and key employees Compensation of current officers, directors, frustees, and key employees Compensation not included above, to disqualified parious list affered under section 498 (R(X))(8) Person plan accrusits and sogges Penson plan accrusits and contributions (include section 401 (R) and 403 (ts) employer contributions) Other semployee benefits Person plan accrusits and contributions (include section 401 (R) and 403 (ts) employer contributions) Other employee benefits Person plan accrusits and contributions (include section 401 (R) and 403 (ts) employer contributions) Other imployee benefits Person plan accrusits and contributions (include section 401 (R) and 403 (ts) employer contributions) Other imployee benefits Person plan accrusits and contributions (include section 401 (R) and 403 (ts) employer contributions) Other imployee benefits Person plan accrusits and contributions (include section 401 (R) and 403 (ts) employer contributions) Other imployee benefits Interest include a service see Part IV, line 17, include a section 401 (R) and 403 (ts) employees Accounting Accounting Professional fundaming services See Part IV, line 17, include a section 401 (R) and 403 (ts) employees Other accrusion and escens (R) of the 25 course (victorian) and 401 (ts) employees (ts) empl	T T				
organizations, foreign governments, and foreign indunduals See Part IV, lines 15 and 16. 8 Benefits paid to or for members. 5 Compensation of current officers, directors, trustees, and key employees. 6 Compensation not includes above, to disquaffed persons (see defined under section 49816(13/8)). 7 Other salaries and wages. 8 Pension plan accruals and contributions (include section 40) (t) and 403(0) employer contributions. 9 Other employee benefits. 10 Payroll taxes. 11 Pega for services (non-employees) 12 Accounting. 13 Amangement. 14 Legal. 15 Eess for services (non-employees) 15 Amangement. 16 Legal. 17 Foreign for services. 18 Portifersional fundinating services. See Part IV, line 17. 16 Investment management lees. 19 Other griters 17 amonet severates 15% of line 25 column (Justice Application). 19 Office expenses. 10 Office expenses. 11 Information technology. 13 Office expenses. 14 Information technology. 15 Reyalties. 16 Occupancy. 17 Travel. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials for any federal, state, or local public officials in Increase. 19 Eymments to affinities. 19 Eymments to affinities. 19 Eymments to affinities. 19 Eymments to affinities. 19 Eymments to affinities. 20 Expension, depletion, and amortization. 21 Payments to affinities. 22 Deprecation, depletion, and amortization. 23 Insurance. 23 12 312 24 Other openses Items expenses on Sciedule 0) 25 East functional expenses. Add lines 1 through 24e. 26 Interest. 27 Expenses. 28 Total functional expenses. Add lines 1 through 24e. 29 Joint costs. Complete this time only if the organization reported in column (B) joint costs from a combined educational compagn, and fundrawing solicitation Check here If the organization reported in column (B) joint costs from a combined educational compagn, and fundrawing solicitation Check here If the organization reported in column (B) joint costs from a combined educational compagn, and fundrawing solicitation Check here If the organization repo	•	30,713	30,713	-	
individuals See Part IV, lines 15 and 16	3 Grants and other assistance to foreign				
4 Benefits paid to or for members. 1 Compensation of current officers, directors, Irustees, and key employees. 2 Compensation not includes above, to disqualited persons (as defined under section 4958(K(3))) and persons described and section 4958(K(3)) and person described in section 4958(K(3)) and person described in section 4958(K(3)) and person described in section 4958(K(3)) and person described in section 4958(K(3)) and person described in section 4958(K(3)) and person described in 401K(s) and 403(s) employer contributions of the section 401K(s) and 403(
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation and included above, to disqualified persons (as defined under section 4958(f(1)) and persons described in accion l 4958(f(1)) and 493(f) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) 12 Accounting 12 C Accounting 13 C Accounting 14 C Accounting 15 Fees for services (non-employees) 16 Portions of the formal agentic sees 17 Investment management fees 18 Often (f fire 1) amount access (10% of line 25 solume (1)) and the fire of the fire o				•	
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9 Other employee benefits					
10 Payroll taxes	,				
11 Fees for services (non-employees)	9 Other employee benefits				
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Advertising and promotion					
13 Office expenses 321 321 321 321 321 321 321 322 3					-
14					
16 Occupancy 17 Travel		321			321
17 Travel 23,826 7,942 15,884 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 3,987 1,329 2,658 20 Interest 21 Payments to affiliates 59,197 59,197 21 Payments to affiliates 59,197 59,197 22 Depreciation, depletion, and amortization 312 312 23 Insurance 312 312 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) 2 Operating Expense 2,642 881 1,761 b	15 Royalties				
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for any federal, state, or local public officials 19 Conferences, conventions, and meetings	17 Travel	23,826	7,942	15,884	
19 Conferences, conventions, and meetings 3, 987 1, 329 2, 658 20 Interest	•				
Interest		2.007	1 200	0.650	
Payments to affiliates		3,98/	1,329	2,658	
Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a Operating Expense C d e All other expenses 25 Total functional expenses. Add lines 1 through 24e organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here infellowing SOP 98-2 (ASC 958-720) 312 312 312 312 312 312 312 31		E0 107	FO 107		
Insurance		59,19/	39,19/	-	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25. column (A) amount, list line 24e expenses on Schedule O) a Operating Expense		312		312	
above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a Operating Expense		712			
Inne 24e amount exceeds 10% of line 25. column (A) amount, list line 24e expenses on Schedule O)	·				
a Operating Expense 2,642 881 1,761 b					
b c d d d d d d d d d d d d d d d d d d	(A) amount, list line 24e expenses on Schedule O)				
c	a Operating Expense	2,642	881	1,761	
c	b				
e All other expenses 25 Total functional expenses. Add lines 1 through 24e 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 if following SOP 98-2 (ASC 958-720)					
e All other expenses 25 Total functional expenses. Add lines 1 through 24e 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 if following SOP 98-2 (ASC 958-720)	d				
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 if following SOP 98-2 (ASC 958-720)					
organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)		309,003	285,317	23,365	321
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	tollowing SOP 98-2 (ASC 958-720)				Form 990 (2018)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing		1	120,252
2		91,388		92,258
3	and the second s		3	
4			4	
5			-	
3	trustees, key employees, and highest compensated employees			
			5	
6	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		6	
\$ 7	organizations (see instructions) Complete Part II of Schedule L		7	
Assets	• • • • • • • • • • • • • • • • • • • •	·	8	
71	• • • • • • • • • • • • • • • • • • • •		9	
9	· · · · · · · · · · · · · · · · · · ·		9	
10	a Land, buildings, and equipment cost or			
	other basis Complete Part VI of Schedule D		10c	
11	b Less accumulated depreciation		11	
12	111111111111111111111111111111111111111		12	
13			13	
14			14	
15			15	
16		189,403		212,510
17			17	
18			18	
19			19	
20			20	
21			21	•
<u> </u>	trustees, key employees, highest compensated employees, and			•
Liabilities	disqualified persons Complete Part II of Schedule L		22	
່ ່ ່			23	
24			24	
25				
	parties, and other liabilities not included on lines 17-24) Complete Part X			
	of Schedule D		25	
26			26	
ses	Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34.			
Fund Balances 82 25 85 26			27	
E 28	Temporarily restricted net assets		28	<u> </u>
[29	,		29	
or Fu	Organizations that do not follow SFAS 117 (ASC 958), check here X and complete lines 30 through 34.			
			30	
Net Assets 33 32 32 32 32 32 32 32 32 32 32 32 32	Paid-in or capital surplus, or land, building, or equipment fund		31	
₹ 32		189,403	32	212,510
<u>گ</u> 33		189,403		212,510
34		189,403	34	212,510

Page **12**

01111 5	(2018)		_			90 1 45
Part				,		$\overline{\Box}$
	Check if Schedule O contains a response or note to any line in this Part XI					11
1	Total revenue (must equal Part VIII, column (A), line 12)	1			332,	
2	Total expenses (must equal Part IX, column (A), line 25)	2				003
3	Revenue less expenses Subtract line 2 from line 1	3			23,	107
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			189,	403
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			212,	510
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<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.	kplaın	ın			
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or			
	reviewed on a separate basis, consolidated basis, or both				'	
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audit					
	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 or	versi	aht			
	of the audit, review, or compilation of its financial statements and selection of an independent acc		-	2c		Χ
	If the organization changed either its oversight process or selection process during the tax year, e					
	Schedule O	,				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	ın			
	the Single Audit Act and OMB Circular A-133?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audit			3b		
				Form	990	(2018)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, ParTax) (see separate instructions), then Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization P.E.O. Sisterhood PA State Chapter Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instruction of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) 1 Enter the amount of any excise tax incurred by the organization under section 4955. 2 Enter the amount of any excise tax incurred by organization managers under section 4955. 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? 5 If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. 5 Employer identification in the Employer identification in the Section 501 (c) (d).	n number n. ns for
P.E.O. Sisterhood PA State Chapter 23-6287438 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instruction definition of "political campaign activities") Political campaign activity expenditures (see instructions). Volunteer hours for political campaign activities (see instructions). Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955. Enter the amount of any excise tax incurred by organization managers under section 4955. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities.	n. ns for
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instruction definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions). Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ 2 Enter the amount of any excise tax incurred by organization managers under section 4955. ▶ \$ 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	ns for
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instruction definition of "political campaign activities") Political campaign activity expenditures (see instructions)	ns for
Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instruction definition of "political campaign activities") Political campaign activity expenditures (see instructions) Volunteer hours for political campaign activities (see instructions). Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955. Enter the amount of any excise tax incurred by organization managers under section 4955. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities.	ns for
definition of "political campaign activities") Political campaign activity expenditures (see instructions) Volunteer hours for political campaign activities (see instructions). Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955. Enter the amount of any excise tax incurred by organization managers under section 4955. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities. **Section 501(c)(3).**	
Political campaign activity expenditures (see instructions) Volunteer hours for political campaign activities (see instructions). Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955. Enter the amount of any excise tax incurred by organization managers under section 4955. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities. **Section 501(c)(3).**	
Volunteer hours for political campaign activities (see instructions)	
Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955. 2 Enter the amount of any excise tax incurred by organization managers under section 4955. 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	
1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	
2 Enter the amount of any excise tax incurred by organization managers under section 4955 . 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4a Was a correction made? b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. > \$	
4a Was a correction made? b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. > \$	Yes No
b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	Yes No
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	
1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	
activities	
2 Enter the amount of the filing organization's funds contributed to other organizations for section	
527 exempt function activities	
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	
Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations organization made payments. For each organization listed, enter the amount paid from the filing organization's the amount of political contributions received that were promptly and directly delivered to a separate political as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide informations.	funds Also enter organization, such
	mount of political utions received and iptly and directly ered to a separate ial organization if one, enter -0-
filing organization's contribution funds if none, enter -0- projection deliving politic politic politic funds.	
filing organization's contribution funds if none, enter -0- projection deliving politic politic politic funds.	
filing organization's funds If none, enter -0- deliving politics fun	
filing organization's funds If none, enter -0- deliving politics fun	
filing organization's contribution for the funds of the filing organization's funds of the funds	
filing organization's funds If none, enter -0- delive politics (2)	
filing organization's funds If none, enter -0- deliving politic relations (2)	
filing organization's funds If none, enter -0- deliving politic relations (2)	
filing organization's funds If none, enter -0- delive politics (2)	
filing organization's funds If none, enter -0- deliving politic funds If none, enter -0- deliving enter -0- deliving enter -0- deliving enter -0- deliving e	
filing organization's funds If none, enter -0- deliving politic funds If none, enter -0- deliving enter -0- deliving enter -0- deliving enter -0- deliving e	

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

Schedule C (Form 990 or 990-EZ) 2018

P	art II-A Complete if the organizat section 501(h)).	ion is exen	npt under sectio	n 501(c)(3) and	filed Form 5768 (ele	ction under
Ā	Check ► if the filing organization be address, EIN, expenses,				ch affiliated group mem	ber's name,
В	Check ▶ if the filing organization cl	necked box A	and "limited contr	ol" provisions app	ly	
	Limits on Lob (The term "expenditures" n			.)	(a) Filing organization's totals	(b) Affiliated group totals
12	Total lobbying expenditures to influence				•	
	Total lobbying expenditures to influence		-	-		
	Total lobbying expenditures (add lines	-				
	Other exempt purpose expenditures .	-				
	Total exempt purpose expenditures (ad		•		•	
	Lobbying nontaxable amount Enter t				***	
	columns		J			÷
	If the amount on line 1e, column (a) or (b) is	: The lobbyir	ig nontaxable amount	is:		
	Not over \$500,000		amount on line 1e			·
	Over \$500,000 but not over \$1,000,000	\$100,000 pl	us 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 pl	us 10% of the excess	over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 pl	us 5% of the excess	over \$1,500,000		•
	Over \$17,000,000	\$1,000,000				
ç	Grassroots nontaxable amount (enter 2	5% of line 1f)			
ŀ	Subtract line 1g from line 1a If zero or	less, enter -0				
	Subtract line 1f from line 1c If zero or I					
J	If there is an amount other than zero	on either l	ine 1h or line 1i,	did the organizat	ion file Form 4720	
	reporting section 4911 tax for this year	<u> </u>	<u></u>			Yes No
			aging Period Unde			
	(Some organizations that made					nns below.
	Sec	the separa	te instructions for	lines 2a through	2f.)	C
	Lob	bying Exper	nditures During 4-Y	ear Averaging Per	riod	
	Calendar year (or fiscal year (a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
28	a Lobbying nontaxable amount					
t	Lobbying ceiling amount (150% of line 2a, column (e))					
(Total lobbying expenditures					
_	d Grassroots nontaxable amount					
•	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

- · · · · · · · · · · · · · · · · · · ·	(a	1)		(b)	
For each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed description of the lobbying activity	Yes	No	-	Āṃoụ	nt _
1 During the year, did the filing organization attempt to influence foreign, national, state, or local					
legislation, including any attempt to influence public opinion on a legislative matter or					
referendum, through the use of					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.					
c Media advertisements?				· · · · · · · · · · · · · · · · · · ·	
d Mailings to members, legislators, or the public?	1				
e Publications, or published or broadcast statements?	1				
f Grants to other organizations for lobbying purposes?	1				-
g Direct contact with legislators, their staffs, government officials, or a legislative body?	1				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	1				
i Other activities?					•
j Total Add lines 1c through 1i					
b If "Yes," enter the amount of any tax incurred under section 4912		Ì			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).		, or s	ection)	
301(0)(0).					Yes
1 Were substantially all (90% or more) dues received nondeductible by members?				1	Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2	Х
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from				3	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	ors	ection	<u> </u>	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"					3, is
					3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."	OR (b) Pa			3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members	OR (b) Pa	rt III-A		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members	OR(b) Pa	rt III-A		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members	OR (b) Pa	rt III-A		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	unts	b) Pa	rt III-A 1 2a 2b		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	unts	b) Pa	1 2a 2b 2c		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	OR (b) Pa	rt III-A 1 2a 2b		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year	OR (b) Pa	1 2a 2b 2c		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	unts unts es. n of thooby	b) Pa	1 2a 2b 2c		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dual if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible land political expenditure next year?	OR (b) Pa	1 2a 2b 2c 3		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year	OR (b) Pa	2a 2b 2c 3		3, is
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
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501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amo political expenses for which the section 527(f) tax was paid). a Current year	oR (b) Pa	2a 2b 2c 3 4 5	, line (

Schedule C (F	orm 990 or 990-EZ) 2018	 	Page 4
Part IV	Supplemental Information (continued)		
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SCHEDULE D (Form 990)

Department of the Treasury

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.

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization P.E.O. Sisterhood PA State Chapter 23-6287438 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) . . 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year 2a 2b 2 c Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register............... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items 1a If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Using the organization's acquisition, accession, and other records, check any of the following that are a significant collection items (check all that apply) a Public exhibition d Loan or exchange programs b Scholarly research e Other Preservation for future generations	
a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations	se in Part
b Scholarly research e Other c Preservation for future generations	se in Part
c Preservation for future generations	se in Part
	se in Part
	se in Part
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpo	
XIII	
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar	
assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes	No
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Fe 990, Part X, line 21	orm
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not	
included on Form 990, Part X?	No
b If "Yes," explain the arrangement in Part XIII and complete the following table	
Amount	
c Beginning balance	
d Additions during the year	
e Distributions during the year	
f Ending balance	T No
b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII	No.
Part V Endowment Funds.	<u>., †</u>
Complete if the organization answered "Yes" on Form 990, Part IV, line 10	
	years back
b Contributions	
c Net investment earnings, gains,	
and losses	
d Grants or scholarships	
e Other expenditures for facilities	
and programs	
f Administrative expenses	
g End of year balance	
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ %	
b Permanent endowment > %	
c Temporarily restricted endowment ▶ %	
The percentages on lines 2a, 2b, and 2c should equal 100%	
3a Are there endowment funds not in the possession of the organization that are held and administered for the	
organization by	Yes No
(i) unrelated organizations	
(ii) related organizations	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	
4 Describe in Part XIII the intended uses of the organization's endowment funds	
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line	
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (c) Accumulated (d) Book values (d) Boo	lue
1a Land	
b Buildings	
c Leasehold improvements	
d Equipment	
e Other	
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c) ▶	

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
1) Financial derivatives		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2) Closely-held equity interests		
3) Other(A)		
(A) (B)		
		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
otal (Column (b) must equal Form 990, Part X, col (B) line 12)		
), Part IV, line 11c See Form 990, Part X, line
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
otal (Column (b) must equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets.	ed "Yes" on Form 990), Part IV, line 11d See Form 990, Part X, line
Part IX Other Assets. Complete if the organization answer	ed "Yes" on Form 990 Description), Part IV, line 11d See Form 990, Part X, line (b) Book v
Part IX Other Assets. Complete if the organization answer	****	
Other Assets. Complete if the organization answer (a)	****	
Other Assets. Complete if the organization answer (a) (1) (2)	****	
Complete if the organization answer (a) (1) (2) (3)	****	
Complete if the organization answer (a) (1) (2) (3) (4)	****	
Other Assets. Complete if the organization answer (a) (1) (2) (3) (4) (5)	****	
Other Assets. Complete if the organization answer (a) (1) (2) (3) (4) (5)	****	
Other Assets. Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7)	***************************************	
Other Assets. Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7) (8)	***************************************	
Other Assets. Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7) (8) (9)	Description	(b) Book v
Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col (E) Part X Other Liabilities.	Description	(b) Book v
Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) otal. (Column (b) must equal Form 990, Part X, col (E) Part X Other Liabilities. Complete if the organization answer line 25	Description	(b) Book v
Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) fotal. (Column (b) must equal Form 990, Part X, col (E) Part X Other Liabilities. Complete if the organization answer line 25 (a) Description of liability	Description	(b) Book v
Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (E) Part X Other Liabilities. Complete if the organization answer line 25 (a) Description of liability (1) Federal income taxes	Description	(b) Book v
Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) fotal. (Column (b) must equal Form 990, Part X, col (E) Part X Other Liabilities. Complete if the organization answer line 25 (a) Description of liability (1) Federal income taxes (2)	Description	(b) Book v
Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. Complete if the organization answer line 25 (a) Description of liability (1) Federal income taxes (2) (3)	Description	(b) Book v
Complete if the organization answer (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (E) Part X Other Liabilities. Complete if the organization answer line 25 (a) Description of liability (1) Federal income taxes (2) (3) (4)	Description	(b) Book v
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P	an	۵	

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	n.	
1	Total revenue, gains, and other support per audited financial statements	1	332,110
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	1 1	
b	Donated services and use of facilities	1 1	
С	Recoveries of prior year grants.	1 1	
d	Other (Describe in Part XIII)	1 .	
е	Add lines 2a through 2d	2e	222 110
3	Subtract line 2e from line 1	3	332,110
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)		
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	332,110
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	309,003
1	Total expenses and losses per audited financial statements	' 	303,003
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	309,003
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]	
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	309,003
Part	XIII Supplemental Information.	•	,
2, Pari	t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inforr	nation	
	· · · · · · · · · · · · · · · · · · ·		
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Schedule D (F	orm 990) 2018	Page 5
Part YIII	Supplemental Information (continued)	
t art Am	- Cappionional morniage (continue)	· · · · · · · · · · · · · · · · · · ·
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SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

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

► Attach to Form 990.

2018	Open to Public
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OMB No 1545-0047

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

InSpect Employer identification number

23-6287438

Chapter	ints and Assistance
State	on Grant
PA	atio
Sisterhood	General Inform
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Partl

X Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

		, , , , , , , , , , , , , , , , , , ,					
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Cottey College, 1000 W Austin							
Nevada, MO 64772	440545271	501(c)(3)	37,407	0			Gen Supp/Schol
(2) P.E.O. Educational Loan Fund							
Des Moines, IA 50312	426078059	501(c)(3)	21,913	0			Educ Loans
(3) P.E.O. Int'l Peace Scholarship							
Des Moines, IA 50312	426078058	501(c)(3)	21,464	0			Scholarships
(4) P.E.O. Program for Contin Educ							
Des Moines, IA 50312	237405311	501(c)(3)	30,217	0			Educ Grants
(5) P.E.O. Scholar Awards							
Des Moines, IA 50312	421379026	501(c)(3)	21,999	0			Educ Awards
(6) P.E.O. STAR Scholarship							
Des Moines, IA 50312	300583651	501(c)(3)	20,781	0	•		Scholarships
(7) P.E.O. Foundation							
Des Moines, IA 50312	426094564	501(c)(3)	31,474	0			Schol/Grants
(8)							
(6)							
(10)						`	
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.	Jovernment o	rganizations list	ted in the line 1 tab	le			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 I (Form 990) (2018)

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

	Part III can be duplicated if additional space is needed	space is nee	ded			
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book. FMV, appraisal, other)	(f) Description of noncash assistance
1 Scho	1 Scholarships to Cottey College 26	26	26,371	0	N/A	N/A
2 Cott	2 Cottey College Recruitment	7	4,342	0	N/A	N/A
က						
4						
ທ						
9						
7						
Part IV	Part IV Supplemental Information. Provide the information	the informati	on required in P	art I, line 2, Part	III, column (b), and any c	on required in Part I, line 2, Part III, column (b), and any other additional information

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

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

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

3700 Grand Ave, Des Moines, IA 50312

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

Inspection Employer identification number Name of the organization 23-6287438 P.E.O. Sisterhood PA State Chapter Part VI, Lines 6-7b: The organization's members consist of the active, dues-paying members of P.E.O. chapters within the state. Delegates from each chapter attend annual state conventions where new officers are elected by the voting members present. In addition, certain proposed amendments to the bylaws are presented and voted upon. Part VI, Line 11b: copies of the final Form 990 were provided to each member of the executive board of Pennsylvania 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.