June

Department of the Treasury Internal Revenue Service

A For the 2018 calendar year, or tax year beginning

# **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.

July 1

2018, and ending 30 Open to Public Inspection

**20** 19

	<b>6</b> 55-4	C Name of organization			D Employer ide	ntification number							
-	Check if a	P.E.O. International	Peace Scholarship										
П	Addr			42-6	5078058								
		change Number and street (or P O box if mail	is not delivered to street address)	Room/suite	E Telephone nu	mber							
-	Initia	return 3700 Grand Ave			515	255-3153							
-	Final	city or town state or province country	v. and ZIP or foreign postal code	<del></del>	- 010								
-	termi Amer	nated	G Gross receipts	\$\$ 3,593,283									
_	Appli	F Name and address of principal officer	······································		H(a) Is this a gro								
L	pend	ng	aborro	$\alpha$	subordinates								
_	Tayou	Kathy Soppe, same as empt status X 501(c)(3) 501(c)		-	H(b) Are all subord	tach a list (see instructions)							
÷			<del></del>	or		,							
-	Websi		<del></del>	1	H(c) Group exem	<del>`</del>							
. ^		<del></del>	Association Other	L Year of	formation 1949 M	State of legal domicile IA							
	Part I	Summary											
	1	Briefly describe the organization's mission											
3	2 3	women students, with citizenship in a country other than the United States and											
	<u> </u>	Canada, to pursue gradua											
	2	Check this box ▶ if the organization	n discontinued its operations or dispos			S							
		Number of voting members of the governi	ng body (Part VI, line 1a)		EIVED	3 3							
9	4	Number of independent voting members of	of the governing body (Part VI, line 1b			4 3							
	5	Total number of individuals employed in c	alendar year 2018 (Part V, line 2a)	3 NO.V	1 8 2019 . 3	5 0							
	5 6 70	Total number of volunteers (estimate if nec	essary)	2		6 54							
•	7a	Total unrelated business revenue from Part	t VIII, column (C), line 12			7a							
		Net unrelated business taxable income fro	3	060	EN, UT	7b							
	_				Prior Year	Current Year							
	8 4	Contributions and grants (Part VIII, line 1h)			1,695,6	1,966,647							
	9	Program service revenue (Part VIII, line 2g)											
	10	Investment income (Part VIII, column (A), I			304,8	34 306,370							
0	11	Other revenue (Part VIII, column (A), lines											
	12	Total revenue - add lines 8 through 11 (mi			2,000,4	95 2,273,017							
	13	Grants and similar amounts paid (Part IX, o			1,779,2	<del></del>							
	14	Benefits paid to or for members (Part IX, co											
	4-	Salaries, other compensation, employee be			56,8	59,100							
	וֹט	Professional fundraising fees (Part IX, colu			3373								
	- I	Total fundraising expenses (Part IX, column			<u> </u>								
Ĺ	17	Other expenses (Part IX, column (A), lines	· · · · · · · · · · · · · · · · · · ·	<del></del>	41,2	76 41,245							
	18	Total expenses Add lines 13-17 (must equ			1,877,3								
		Revenue less expenses Subtract line 18 fr			123,1	<del></del>							
5	S S	revenue less expenses Submact line to in	Offiliate 12	· · · · · · · · · · · · · · · · · · ·	Beginning of Current								
ets	20	Total assets (Part X, line 16)			7,542,3	<del></del>							
4ss	21	Total liabilities (Part X, line 26)			7,342,3	198							
let	۲I	Net assets or fund balances Subtract line		• • • • • •	7,542,3	<del></del> _							
ž	art II	Signature Block	21 nom ane 20,	· · · <u>·</u> · · · ·	7,342,3	21 1,103,193							
		nalties of 'perjury, I declare that I have examined	this return including accompanying sched	tules and states	nents and to the hest of	f my knowledge and helief it is							
tr	ue, corre	ct, and complete Declaration of preparer (other t	han officer) is based on all information of wh	nich preparer ha	s any knowledge	my knowledge and belief, it is							
		SKATTLA &			uh	2/10							
Si	gn	Signature of officer			Date								
	ere	organistic of officer			5410								
•			ctor of Finance/Treasu	rer	<del></del>	<del></del>							
		Type or print name and title	Proporedo propetivo	Date	<del></del>	, PTIN							
Pa	id	Print/Týpe preparer's name	Preparer's signature	Vale	Check	J "							
	eparer				self-employ	ea							
	e Only	Firm's name			Firm's EIN	<del></del>							
		Firm's address			Phone no	<del></del>							
M	ay the	IRS discuss this return with the prepai		)	<u> </u>	Yes No							
E -	- Dan-					Earn 990 (2018)							



Form 990 (2018)

ABDETRO

### Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 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 X 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) Х 5 is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III . X 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 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes." complete Schedule D. Part II.......... 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X 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 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. . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," Х b Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more Х 11b 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 Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . . . . X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X . . . . . . 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Х b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. . . . . . . . . . . . . . Х 14a Did the organization maintain an office, employees, or agents outside of the United States?.......... Х 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 Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or Х Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Χ 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Χ 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Х Х b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . . . Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II . . . . . . . . . Χ

Part	Checklist of Required Schedules (continued)		V	No.
	Did the comments are at the CC 000 of the three descriptions to be for the contract and industry		Yes	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	X	<del></del>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		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			
		24a		X
		24b		<u></u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	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?			
00	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	]		
	current or former officers, directors, trustees, key employees, highest compensated employees, or			.,
27	disqualified persons? If "Yes," complete Schedule L, Part II	26		_X
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		v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	21		<u>X</u>
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
2	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		v
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	20a		<u>X</u> _
	Schedule L, Part IV	28b		х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		Δ
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		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		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	Х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u>X</u>
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		<u></u>
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	Х	
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		X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
Dawl	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	L
Part				$\Box$
	Check if Schedule O contains a response or note to any line in this Part V	•••	Yes	No No
1.	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		. 35	
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
L	reportable gaming (gambling) winnings to prize winners?	1c	x	
	reperieure genning (gennemg) minimige to prize miniero		990	

Part	V 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		_	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	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	
	If "Yes," enter the name of the foreign country   Cayman Islands			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			ı
	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
			-	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6b		ı
	gifts were not tax deductible?			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
		7a		х
	and services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		х
	required to file Form 8282?		<u>-</u>	
	If "Yes," indicate the number of Forms 8282 filed during the year	7e		X
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79 7h		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	<del>'''</del>		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
	sponsoring organization have excess business holdings at any time during the year?	-		
	Sponsoring organizations maintaining donor advised funds.	9a	-	·
	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?			
	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			İ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	z.		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			1
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )	42-		1
	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			1
	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	138		$\vdash$
	Note. See the instructions for additional information the organization must report on Schedule O			1
b	Enter the amount of reserves the organization is required to maintain by the states in which	ŀ	.	1
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	4.4-		<del>  ,,</del>
14 a	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>	<del></del>
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	ļ	X.
	If "Yes," see instructions and file Form 4720, Schedule N	4.		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	l 	X_
	If "Yes," complete Form 4720, Schedule O	L	000	
		rom	1 フゴリ	(2018

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O							
	Check if Schedule O contains a response or note to any line in this Part VI			X				
Sect	ion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year			i				
	If there are material differences in voting rights among members of the governing body, or j			<b>.</b> ,				
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			,				
b	Enter the number of voting members included in line 1a, above, who are independent			١ ،				
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?							
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	_	17					
	one or more members of the governing body?	7a	X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		v					
	stockholders, or persons other than the governing body?	7b	<u> </u>	<del> </del>				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during							
	the year by the following	8a	Х	' '				
a	The governing body?	8b	X	<b></b>				
ь	Each committee with authority to act on behalf of the governing body?	05						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x				
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue		)	·				
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,							
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	ļ				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			}				
	rise to conflicts?	12b	X	-				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-	v					
	describe in Schedule O how this was done	12c						
13	Did the organization have a written whistleblower policy?	13	<u>X</u>	<u> </u>				
14	Did the organization have a written document retention and destruction policy?	14	<u> </u>	<b> </b>				
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? The organization's CEO, Executive Director, or top management official . See Schedule O	15a						
a	Other officers or key employees of the organization	15b						
р	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	100						
16a			_	- Las				
IVa	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						
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 (1024 or 1024-A if applicable), 990, and 990-1	(Sec	tion 5	501(c)				
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply							
	Own website X Another's website X Upon request Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	y, and				

20

financial statements available to the public during the tax year

# 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

Check this box if neither the organization nor	any related	orga	nıza	tion	cor	npen	sate	ed any current offic	er, director, or trus	tee
(A) Name and Title	(B) Average hours per week (list any 'hours for related organizations below dotted line)	(do r box, office or direct	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		more than one Reportable Rej compensation comper rector/trustee)		(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations		
(1) Deborah H. Taylor, Chairman Board of Trustees	30	X		Х		:		0	0	0
(2) Barbara Olson Board of Trustees	25 0.8	x		х				0	0	0
(3) Jan Knuckey Board of Trustees	15	Х		x	-		-	0	0	0
(4) Jackie Matt Executive Director	38			х				0	0	0
(5) Kathy Soppe, Director of Finance/Treasurer	2			x				0	0	0
(6)	30	-	1	^						
(7)				_						
(8)										
(9)		1	Ī. <u>-</u>	_				-		
(10)										
(11)										
(12)										
(13)		-							-	
(14)									-	

Part VII Section A. Officers, Directors	s, Trustees, Key	/ Em	plo		s, a c)	nd H	igr	hest Compensate	ed Employ	ees (co	ontinued	"	
(A) Name and title	(B) Average hours per week (list any	Position (do not check more than box, unless person is bot officer and a director/tru					an tee)	(D)  Reportable compensation from	(E)  Reportable compensation from		am	(F) timated 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	pensation the anization in related in relate	n d
(15)						<u> </u>	_	<del> </del>					
16)							-						
17)												<u>-</u>	
18)							_						
19)							_						
20)							_						
							_			_			
21)									-			·	
22)		ļ 					ļ 			- <u></u>			
23)													
24)		<u></u>	ĺ		[ [						}		
25)													
1b Sub-total c Total from continuation sheets to Part d Total (add lines 1b and 1c)	t VII, Section A	 	 	 	· ·	 	<b>&gt; &gt;</b>						
2 Total number of individuals (including reportable compensation from the orga		o thos		sted 0	d at	oove)	wh	o received more the	han \$100,0	000 of			
3 Did the organization list any forme	r officer, direct	or, o	r tr	ust	ee,	key	em	ployee, or highes	st compen	sated		Yes	No
employee on line 1a? If "Yes," complete 4 For any individual listed on line 1a, i	s the sum of re	porta	ble	con	npe	nsatio	on a	and other comper	sation fron	n the	3		X
organization and related organizatio											4		X
5 Did any person listed on line 1a rece for services rendered to the organization											5		Х
Section B. Independent Contractors  1 Complete this table for your five higher	ot componented	ındon	ond	lont		stract		that received mor	e than \$10	0.000	of		
Complete this table for your five higher compensation from the organization R year	eport compensated	indep ion fo	r th	e ca	alen	dar y	ear	ending with or wit	thin the org	anızatı	on's tax		
(A) Name and busine	ess address							(B) Description of se	rvices	-	(C) Compens	ation	
N/A			_				F						
							+						
							$\perp$						
2 Total number of independent contrinctive received more than \$100,000 of compa						ted	to	those listed abo	ve) who	1	,	'-	ار کرد. در ا

Part VIII Statement of Revenue

		Check if Schedule O contains a respoi	nse or note to an	y line in this Part VII	J	<u></u>	<u></u> .
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns		1,966,647			
_ <u>a</u>	<u>h</u>	Total. Add lines 1a-1f	Business Code	1,900,047			<del> </del>
Program Service Revenue	2a b c d						
ō.	f g	All other program service revenue Total. Add lines 2a-2f				.,	<del></del>
	3 4 5	Investment income (including divider and other similar amounts)	nds, interest,  proceeds .	178,258			178,258
	6a b c	Gross rents					
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss)					
	d	Net gain or (loss)		128,112			128,112
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c)  See Part IV, line 18					
	1	Gross income from gaming activities See Part IV, line 19					
	b	Less direct expenses b					
	С	Net income or (loss) from gaming activities	<u> ▶ .</u>				<del></del>
	10a	Gross sales of inventory, less returns and allowances a					
	b c	Less cost of goods sold b  Net income or (loss) from sales of inventory.	<u>, , , ▶</u>				<del></del>
	}	Miscellaneous Revenue	Business Code				<del> </del>
	11a		-				+
	b					<del></del>	<del> </del>
	d	All other revenue			-		
	12	Total. Add lines 11a-11d		2,273,017			306,370

## Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX										
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to domestic organizations				•						
	and domestic governments. See Part IV, line 21										
2	Grants and other assistance to domestic										
	individuals See Part IV, line 22	1,822,800	1,822,800								
3	Grants and other assistance to foreign				. ,						
	organizations, foreign governments, and foreign				- ,						
	individuals See Part IV, lines 15 and 16	109,000	109,000								
4	Benefits paid to or for members				<del></del>						
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	46,469	27,004	14,271	5,194						
	Pension plan accruals and contributions (include										
	section 401(k) and 403(b) employer contributions)	2,790	1,621	857	312						
9	Other employee benefits	6,362	3,697	1,954	711						
10	Payroll taxes	3,479	2,022	1,068	389						
11	Fees for services (non-employees)										
á	Management										
	Degal		<u></u>								
(	Accounting	1,610		1,610							
C	Lobbying	•									
•	Professional fundraising services. See Part IV, line 17.										
	f Investment management fees	15,578		15,578							
ç	Other (if line 11g amount exceeds 10% of line 25, column										
	(A) amount, list line 11g expenses on Schedule O)										
12	Advertising and promotion			<u> </u>							
13		11,840	7,893	3,947	<del></del>						
14	Information technology										
15											
16	Occupancy	1,600	533	1,067							
17		9,428	9,428								
18											
	for any federal, state, or local public officials										
	Conferences, conventions, and meetings	<del></del>									
	Interest										
21	• • • • • • • • • • • • • • • • • • • •				<del>-</del>						
22	• • • • •										
	Insurance										
24	Other expenses Itemize expenses not covered	,			<i>'</i>						
	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 (A)	,									
		1,189			1,189						
	Promotional Materials	1,105									
t											
,	. 1				<del></del>						
	All other expenses				<del>-</del>						
	Total functional expenses Add lines 1 through 24e	2,032,145	1,983,998	40,352	7,795						
	Joint costs. Complete this line only if the	2,002,110		20,002	.,.,5						
	organization reported in column (B) joint costs										
	from a combined educational campaign and fundraising solicitation Check here	1	1		,						
	following SOP 98-2 (ASC 958-720)										

Part X Balance Sheet

rait				
	Check if Schedule O contains a response or note to any line in this Pa		· · · ·	
		(A) Beginning of year		(B) End of year
	Cash - non-interest-bearing	395,337	1	384,501
	Savings and temporary cash investments	2,244,078	2	2,435,145
T	B Pledges and grants receivable, net	6,886		6,766
- 1	Accounts receivable, net		4	
i	5 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 disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		6	· · · · · · · · · · · · · · · · · · ·
ţ.	organizations (see instructions) Complete Part II of Schedule L		7	-
SO .	Notes and loans receivable, net	······	8	
٠,١	Inventories for sale or use		9	1,132
	Prepaid expenses and deferred charges		9	1,132
10	a Land, buildings, and equipment cost or			
	other basis Complete Part VI of Schedule D		4.0	-
- I.	b Less accumulated depreciation	4 445 100	10c	4 505 536
11	, , , , , , , , , , , , , , , , , , , ,	4,445,100		4,505,536
12		450,920		450,311
13			13	·
14			14	
15		7 540 201	15	7 702 201
16	- · · · · · · · · · · · · · · · · · · ·	7,542,321	16	7,783,391
17			17	198
18	B Grants payable	-	18	
19			19	
20	· · · · · · · · · · · · · · · · · · ·	<del></del>	20	
21	· · · · · · · · · · · · · · · · · · ·		21	
န္မ 22	·		1	
薑	trustees, key employees, highest compensated employees, and			•
Liabilities	disqualified persons Complete Part II of Schedule L		22	
<u>ا ا</u> 23			23	
24			24	
25	6 Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X		. 1	
	of Schedule D	<u></u>	25	
26			26	198
ses	Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete lines 27 through 29, and lines 33 and 34.			
E 27	7 Unrestricted net assets		27	
굞 28	B Temporarily restricted net assets		28	
교 29	Permanently restricted net assets		29	
Net Assets or Fund Balances	Organizations that do not follow SFAS 117 (ASC 958), check here X and complete lines 30 through 34.			
<u>د</u> ع	Capital stock or trust principal, or current funds	5,435,840	30	5,621,430
sse 3			31	
Y 3		2,106,481		2,161,763
3 Se 3		7,542,321		7,783,193
2 3		7,542,321		7,783,391
	Total naminos and not assert the saidings, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	, , , , , , , , , , , , , , , , , , , ,		Form <b>990</b> (2018)

Page **12** 

OHILL 95	90 (2018)				, 0	<del>,</del>
Part				-		$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part XI		<u> , .</u>			$\perp \perp$
1	Total revenue (must equal Part VIII, column (A), line 12)	1			273,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		_		145
3	Revenue less expenses Subtract line 2 from line 1	3				872
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		7,5	42,	321
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		7,	783 <u>,</u>	193
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		٠.,		X
			_		Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual X Other Mod.					
	If the organization changed its method of accounting from a prior year or checked "Other," ex	xplaın	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	ed on	na	1		
	separate basis, consolidated basis, or both					
	Separate basis X 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			_		
	of the audit, review, or compilation of its financial statements and selection of an independent acc			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, e	xplaın	ın			
	Schedule O		]			
3 a	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?		٠٠	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo t	the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	aits		3b	000	(2018)
				r orm	33U	(ソロ18)

### **SCHEDULE A** (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047 -

Department of the Treasury Internal Revenue Service

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

2018
Open to Public
Inspection

Nam	me of the organization Employer identification number									
Р.	E.0	. International Pe	ace Scholars	hip			42-6078	8058		
	rt i	Reason for Public Cha			omplete	e this pa	rt ) See instructions			
		anization is not a private four	ndation because it	is (For lines 1 through	h 12, ch	eck only	one box )			
1		A church, convention of chu	irches, or associat	tion of churches descr	ibed in <b>s</b>	ection 1	70(b)(1)(A)(i). /			
2		A school described in section						)		
3		A hospital or a cooperative		•	•		• • • • • • • • • • • • • • • • • • • •			
4	$\Box$	A medical research organiz	•	_				(iii). Enter the		
		hospital's name, city, and st		,			( // // /			
5		An organization operated f		a college or universit	v owned	d or ope	rated by a governme	ental unit described in		
		section 170(b)(1)(A)(iv). (C		- · · · · · · · · · · · · · · · · · · ·	,		, ,			
6		A federal, state, or local go		rnmental unit describe	d in sect	ion 170(	b)(1)(A)(v).			
7	X An organization that normally receives a substantial part of its support from a governmental unit or from the general public									
•	ــــــا	described in section 170(b)	•	· · · · · · · · · · · · · · · · · · ·	<b>P P</b> • · · · · ·	-··· -· <b>3</b> -				
8		A community trust describe			Part II)					
9		An agricultural research org					in conjunction with a	land-grant college		
•		or university or a non-land-								
		university	g	,	,		,,,,	<b>.</b>		
10		An organization that norma	lly receives (1) ma	ore than 331/3 % of its	support	from co	ntributions membersh	nip fees, and gross		
. •	ш	receipts from activities rela-	ted to its exempt f	unctions - subject to o	certain e	xception	s, and (2) no more tha	n 331/3 % of its		
		support from gross investmacquired by the organizatio						businesses		
11		An organization organized a								
12	H	An organization organized a	•		-			carry out the purposes		
-	ш	of one or more publicly su								
		Check the box in lines 12a t								
а	Г	Type I. A supporting orga	•	• •			•	<del>-</del>		
	L	the supported organization								
		supporting organization								
b		Type II. A supporting org	•	·		with its	supported organizati	on(s), by having		
	_	control or management of								
		organization(s) You must				, p				
С		Type III functionally integ	•		ited in co	onnectio	n with, and functional	lly integrated with.		
·	_	its supported organization						, ,		
d		Type III non-functionally						ted organization(s)		
_		that is not functionally inte								
		requirement (see instruct								
е		Check this box if the orga	•	•				II, Type III		
	_	functionally integrated, or								
f	En	ter the number of supported								
g	Pro	ovide the following information	on about the suppo	orted organization(s)						
	(i) N	ame of supported organization	(II) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of		
				(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)		
					Yes	No				
(A) ——			_							
(B)										
<del>(</del>										
(C)										
<del></del>										
(D)										
					-					
(E)										
		<del></del>						-		
Tot	al									

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support									
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,588,884	1,923,925	1,744,894	1,695,661	1,966,647	8,920,011			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf									
3	The value of services or facilities furnished by a governmental unit to the organization without charge									
4	Total. Add lines 1 through 3	1,588,884	1,923,925	1,744,894	1,695,661	1,966,647	8,920,011			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount									
	shown on line 11, column (f)						956,392			
_6_							7,963,619			
	tion B. Total Support	<del></del> -		<del></del>	<del></del>		<del></del>			
Cale	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
7	Amounts from line 4	1,588,884	1,923,925	1,744,894	1,695,661	1,966,647	8,920,011			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	124,990	122,519	125,345	146,033	178,258	697,145			
9	Net income from unrelated business activities, whether or not the business is regularly carried on									
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	2,259					2,259 9,619,415			
11	Total support. Add lines 7 through 10			<u> </u>	<u></u>		9,619,415			
12	Gross receipts from related activities, etc. (s	see instructions).		<i></i>		12				
13	First five years. If the Form 990 is f organization, check this box and stop here	<u> </u>	<u> </u>	nd, third, fourth,	or fifth tax ye	ar as a section	501(c)(3) ▶			
	tion C. Computation of Public Sup					Г., І	00.7060.0			
14	Public support percentage for 2018 (li					1 1	82.7869%			
15	Public support percentage from 2017									
16а	331/3% support test - 2018. If the organization q	_					1 1			
h	331/3% support test - 2017. If the org						• • •			
D	this box and stop here. The organization						1 1			
17a	10%-facts-and-circumstances test - 2									
		10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported								
	organization			_		•	▶			
b	10%-facts-and-circumstances test - 2 15 is 10% or more, and if the orga	<b>2017</b> . If the org	ganization did n	ot check a box	on line 13, 16	a, 16b, or 17a,				
	Explain in Part VI how the organizati						•			
18	supported organization						▶ 🔲			
	instructions						. [-1			
						<del> </del>				

Part III Support Schedule for Organizations Described in Section 509(a)(2)

Support Schedule for Significations Described in Section 505(4)(2)	
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under	Part I
If the organization fails to qualify under the tests listed below, please complete Part II)	

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018 /	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise				•		
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities	`			<i>f</i>		
•	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5			/			
_	<u>-</u>		-				
, a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified		] ,	/			
	persons that exceed the greater of \$5,000		/				
	or 1% of the amount on line 13 for the year		/				<del> </del>
8 8	Add lines 7a and 7b		/				
٥	line 6)	- 		•		1	
Sec	tion B. Total Support						· · ·
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6,					, ,	
_	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		<b>f</b>				
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	7					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)					ļ	
13	Total support. (Add lines 9, 10c, 11,						
	and 12)		L			L	
14	First five years. If the Form 990 is f						
	organization, check this box and stop here			<del></del>	<u></u>		<b>▶</b>   _
	tion C. Computation of Public Sup					Г	
15	Public support percentage for 2018 (line 8					. 15	<u>%</u>
16	Public support percentage from 2017 Sche			<del> </del>	· · · · · · · · ·	16	<u>%_</u>
Sec	tion D. Computation of Investmen			<del></del>		F-12-11	
17	Investment income percentage for 2018 (III	·	· ·			17	<u>%</u>
18	Investment income percentage from 2017					18	<u>%</u>
19 a	331/3% support tests - 2018. If the or						
	13 is not more than 331/3%, check th						
þ	331/3% support tests - 2017. If the orga						. —
	line 18 is not more than 331/3 %, check			-			
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	, check this bo	x and see instru	ictions -

### **Supporting Organizations** Part IV

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

Section A. A	II Supporting	Organizations
--------------	---------------	---------------

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below			
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	 4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	 4c	- ~	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)			
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b 5c		
¢	Substitutions only. Was the substitution the result of an event beyond the organization's control?	30		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		ا لــــ ـــا
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b		]

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

Page 6

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

Schedule A (Form 990 or 990-EZ) 2018

Part	V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	ions (continued)				
Secti	on D - Distributions			Current Year			
1	Amounts paid to supported organizations to accomplish exempt purposes						
2	Amounts paid to perform activity that directly furthers exer	ed					
	organizations, in excess of income from activity						
3	Administrative expenses paid to accomplish exempt purpo	zations					
4	Amounts paid to acquire exempt-use assets						
5	Qualified set-aside amounts (prior IRS approval required)						
6	Other distributions (describe in Part VI) See instructions						
7	Total annual distributions. Add lines 1 through 6						
8	Distributions to attentive supported organizations to which	the organization is resp	onsive				
	(provide details in Part VI) See instructions						
9	Distributable amount for 2018 from Section C, line 6						
10	Line 8 amount divided by line 9 amount						
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018			
1	Distributable amount for 2018 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2018			, , , , , , , , , , , , , , , , , , ,			
	(reasonable cause required - explain in Part VI) See			į			
	instructions						
3	Excess distributions carryover, if any, to 2018	u	the .	(4 )			
а	From 2013	,					
b	From 2014						
С	From 2015	-					
d	From 2016						
е	From 2017						
f	Total of lines 3a through e			j			
g	Applied to underdistributions of prior years			Ì			
h	Applied to 2018 distributable amount						
i	Carryover from 2013 not applied (see instructions)			J			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f						
4	Distributions for 2018 from			1			
	Section D, line 7 \$						
a	Applied to underdistributions of prior years						
b	Applied to 2018 distributable amount						
С	Remainder Subtract lines 4a and 4b from 4						
5	Remaining underdistributions for years prior to 2018, if			1			
	any Subtract lines 3g and 4a from line 2 For result		•	1			
	greater than zero, explain in Part VI See instructions						
6	Remaining underdistributions for 2018 Subtract lines 3h						
	and 4b from line 1 For result greater than zero, explain in						
	Part VI. See instructions	1					
7	Excess distributions carryover to 2019. Add lines 3j						
	and 4c		· ·				
8	Breakdown of line 7	·					
a	Excess from 2014						
b	Excess from 2015						
С	Excess from 2016			-			
d		e(i tel) 4		•			
е		4.4-					

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)						
Part II, Line 10:							
Other I	ncome:	2014	2015	2016	2017	2018	
Currenc	y Exchange:	\$2,259	\$0	\$0	\$0	\$0	
	Total:	\$2,259	\$0	\$0	\$0	\$0	
	n =						
	<del></del>				<u>-</u>		
	•						
·		<del></del> , ,					
			•				
						•	
					1		

### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

**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
2018

Open to Public Inspection

Employer identification number Name of the organization P.E.O. International Peace Scholarship 42-6078058 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . . . . . 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) . . 3 Aggregate value at end of year. . . . . . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Yes 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 Conservation Easements. Part II 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 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year 2a 2b b Number of conservation easements on a certified historic structure included in (a) . . . . . 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 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 5 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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 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 Assets included in Form 990, Part X........... ▶ \$

Pa	rt III Organizations Maintaini	ng Collections of	Art, Historical Tr	easures, o	r Other	Similar Assets (d	continued)		
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its								
	collection items (check all that app	ly)							
а	Public exhibition	•	d Loan	or exchang	e prograi	ms			
b	b Scholarly research e Other								
С	Preservation for future gene	rations					***		
4	Provide a description of the organ		and explain how	they furthe	r the or	ganization's exemp	t purpose in	Part	
	XIII		and onpiant non			gameation of onemp			
5	During the year, did the organization	on solicit or receive d	lonations of art, his	torical treas	ures or a	other similar			
-	assets to be sold to raise funds rath					_	Yes	No	
Pa	rt IV Escrow and Custodial A	<del></del>	anto do part or trio	organizatio			1.00	10	
	Complete if the organiza 990, Part X, line 21		es" on Form 990,	Part IV, line	e 9, or r	eported an amoui	nt on Form		
1a	Is the organization an agent, truste	e, custodian or othe	er intermediary for	contribution	s or other	r assets not			
	included on Form 990, Part X?					_	Yes	No	
b	If "Yes," explain the arrangement i								
	, , ,		<b>9</b>			Amount			
С	Beginning balance			10	<del>                                     </del>				
d	Additions during the year					<del></del>			
e	Distributions during the year					· <del></del>			
f	Ending balance				_				
2a	Did the organization include an am					account liability?	Yes	No	
	If "Yes," explain the arrangement i							┤```	
	rt V Endowment Funds.							—	
	Complete if the organiza	ation answered "Ye	s" on Form 990.	Part IV. line	e 10				
	3	(a) Current year	(b) Prior year	(c) Two ye		(d) Three years back	(e) Four years	back	
4.	Decimand of uses belones	2,106,481	2,037,956		5,916		1,843,		
1a		2,100,401	2,031,330	1,01	3, 510	1, 525, 471		000	
b	Contributions	·		<del> </del>		<u></u>	30,	000	
С	Net investment earnings, gains,	115 065	125,897	1 11	5 512	101,449	9.0	507	
_	and losses	115,865	123,097		5,513	101,449		587	
	Grants or scholarships			ļ ···					
е	Other expenditures for facilities	52.061	EO C24	1	7 176	45 122	4.0	F 6 7	
	and programs	53,861	50,634		7,176 6,297			567	
f	Administrative expenses	6,722	6,738			5,872		982	
g	End of year balance	2,161,763	2,106,481		7,956		1,925,	4/1	
2	Provide the estimated percentage			, column (a)	) held as				
a	Board designated or quasi-endown		_%						
D	Permanent endowment ▶ 100.0								
С	Temporarily restricted endowment								
_	The percentages on lines 2a, 2b, a	•							
3 a	Are there endowment funds not in	the possession of th	ie organization tha	are held ai	nd admir	istered for the	Vaa	T N =	
	organization by						Yes	No	
	(i) unrelated organizations						3a(i)	X	
	(ii) related organizations						3a(ii) X	<del> </del>	
b	If "Yes" on line 3a(ii), are the relate	•	•			• • • • • • • • •	3b   X	<u></u>	
4	Describe in Part XIII the intended to		tion's endowment fu	inds					
Pa	rt VI Land, Buildings, and Equ Complete if the organize	Jipment. ation answered "Ye	es" on Form 990	Part IV In	e 11a 9	See Form 990 Pa	rt X line 10	1	
	Description of property	(a) Cost or		or other basis			) Book value		
	<del></del>	(invest		other)		eciation			
1 a	Land	<u></u>							
b	Buildings								
C	Leasehold improvements								
d	Equipment								
	Other								
Tota	I. Add lines 1a through 1e (Column	(d) must equal Form	990 Part X colun	n (B) line 1	0c.)				

Part VII	Investments - Other Securities.  Complete if the organization answered	"Vos" on Form 990	Port IV	ling 11h See Form 990	Dart Y line 12
			, Faitiv, i	(c) Method of valua	
	(a) Description of security or category (including name of security)	(b) Book value		Cost or end-of-year mar	
(1) Financia	al derivatives	450,311	Cost		
	-held equity interests				
			****		
(A)					
(B)				<del>.</del>	10
(C)			·	<del></del>	
- (D)					
(E)					
(F)					
(G)					· <del></del> ·· · · · · · · · · · · · · · · · · ·
(H)					
Total (Column	n (b) must equal Form 990, Part X, col (B) line 12 )	450,311			
Part VIII					
	Complete if the organization answered	"Yes" on Form 990	, Part IV,		·
	(a) Description of investment	(b) Book value		(c) Method of valua Cost or end-of-year mar	ation ket value
(1)		<u> </u>	<del></del>	- Cook of one of your man	
(2)					
(3)				· · · · · ·	
(4)					
(5)					
(6)					
(7)					
(8)				tu	
(9)					
	n (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX	Other Assets.				
	Complete if the organization answered	"Yes" on Form 990	, Part IV,	line 11d See Form 990	), Part X, line 15
		scription			(b) Book value
(1)					
(2)					
(3)				**	
(4)	<del>-</del> ·				
(5)					
(6)					
(7)	-				
(8)					
(9)					
Total. (Colu	umn (b) must equal Form 990, Part X, col (B) li	ne 15)		<u></u> ▶	
Part X	Other Liabilities.				
	Complete if the organization answered line 25	"Yes" on Form 990	, Part IV,	line 11e or 11f See Fo	rm 990, Part X,
1.	(a) Description of liability	(b) Book valu	e		
	ral income taxes	(b) Book valu	<del>-</del>		
(2)	ar moomo taxoo			•	
(3)					
(4)					
(5)					
(6)			$\overline{}$		
(7)			$\dashv$		
(8)					
(9)					
	nn (b) must equal Form 990, Part X, col (B) line 25)	<b>&gt;</b>	$\overline{}$		
· otal. (Coluli	in (b) musi equal i omi 330, rait A, coi (b) iiile 23)				

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Page	4

Part X	Reconciliation of Revenue per Audited Financial Statements With Re Complete if the organization answered "Yes" on Form 990, Part IV, line		
1	Total revenue, gains, and other support per audited financial statements		1
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains (losses) on investments		
	Donated services and use of facilities		
	Donated services and use of facilities		
C	Recoveries of prior year grants		
d (	Other (Describe in Part XIII )		
	-		3
	Subtract line <b>2e</b> from line <b>1</b>		
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a	Other (Describe in Part XIII )		
	Add lines 4a and 4b	-	4c
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Part X			n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line		
1	Total expenses and losses per audited financial statements		1
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	Donated services and use of facilities		
	Prior year adjustments		
	Other losses		
d	Other (Describe in Part XIII )		
	Add lines 2a through 2d		2e
	Subtract line 2e from line 1		3
	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	<i>.</i> <u>_</u>	4c
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5
Part X	III Supplemental Information.		
Provide	the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV	/, lines 1b and 2b, Parl	t V, line 4, Part X, line
	XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide		
Part	V, Line 4 Net income from the endowment fund of the	reporting or	ganızatıon is
used	to provide additional funds for the educational schola	rships as well	l as to
provi	de support toward the cost of administering the organi	zation.	
		<del> </del>	
		<u> </u>	
		<del>_</del>	
	<del></del>		
·			<del></del>
		. —-	
			-

Schedule D (Fo	orm 990) 2018	Page <b>5</b>
Part XIII	Supplemental Information (continued)	
		<del></del>
	•	
		<del></del>
<del></del>	The state of the s	
<del> </del>		<del></del>
		······································
_		

### SCHEDULE F (Form 990)

### Statement of Activities Outside the United States

OMB No 1545-0047

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

► Attach to Form 990.

Open to Public

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

	the organization				Employer identifica	ition number
	. International Peac				42-607805	
Part I	General Information of Form 990, Part IV, line 14b		Outside the	United States. Comple	ete if the organization a	nswered "Yes" on
as	or grantmakers. Does the organisistance, the grantees' eligibility ants or assistance?	y for the grant	s or assistance	e, and the selection criteria	used to award the	X Yes No
	or grantmakers. Describe in F itside the United States	Part V the org	anization's pro	ocedures for monitoring t	he use of its grants and	d other assistance
3 A	ctivities per Region (The follow	ring Part I, line	3 table can be	e duplicated if additional spa	ace is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) N	orth America	0	0	grantmaking		109,000
(2) E	urope			investments		93,000
<b>(3)</b> C	entral America & Caribb			investments		19,000
(4) E	. Asia & Pacific.			investments	(A	64,000
(5) N	orth America			investments		11,000
(6) M	iddle East & N. Africa			ınvestments	•	2,000
<b>(7</b> ) S	outh America			investments		4,000
(8) S	outh Asia			investments		4,000
(9) S	ub-Saharan Africa			ınvestments		2,000
(10) F	ussia			investments		1,000
(11)						
(12)	22					
(13)						
(14)					*****	
(15)						
(16)			******		= · · · = -7.00+1.5	
(17)						
3 a	Subtotal	0	0			309,000

sheets to Part I . . . . . .

309,000

Schedule F (Form 990) 2018

Page 2

Page 1

Part || Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Dort IV 199 15 for 990 and 1990 in 19

	(i) Method of valuation (book, FMV, appraisal, other)	
	(h) Description of noncash valuation assistance (book, FMV, appraisal, other	
needed	(g) Amount of noncash assistance	
onal space is	(f) Manner of cash disbursement	-
uplicated it addition	(e) Amount of cash grant	
art II can be d	(d) Purpose of grant	
ed more than \$5,000 F	(c) Region	
ecipient who receiv	(b) IRS code section and EIN (if applicable)	
Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated it additional space is needed	(a) Name of organization	
	-	

	(if applicable)	grant	cash grant	disbursement	assistance	assistance	(book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
(10)							
(11)							
(12)							•
(13)							
(14)							
(15)							
(16)							

ر. د

Schedule F (Form 990) 2018

Schedule F (Form 990) 2018

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed

Schedule F (Form 990) 2018 (h) Method of valuation (book, FMV, appraisal, other) N/A (g) Description of noncash assistance N/A : 0 (f) Amount of noncash assistance (e) Manner of cash disbursement 109,000 check (d) Amount of cash grant (c) Number of recipients σ North America (b) Region (1) Educational Awards/Grants (a) Type of grant or assistance (11) (17 (18) (2) 4 (2) (9) (7 8 (6) 9 (12) (13) (14) (15) (16) ව

Pa	ae	4

Part	IV Foreign Forms			
1	Was the organization a US transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a US Transferor of Property to a Foreign Corporation (see Instructions for Form 926)		Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)		Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of US Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) . Form. 547.1. not .required	X	Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)		Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of US Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)		Yes	X No

Schedule F (Form 990) 2018

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

SCHEDULE 1 (Form 990)

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

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

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

Open to Public

Department of the Treasury				Allacii lo roiiii 330.				Inspection
Internal Revenue Service		1 05 ▲	o www.irs.gov/	to www.irs.gov/Form990 for the latest information.	atest information	-		lispection
Name of the organization							Employer identification number	on number
P.E.O. International	Peace	Scholarship					42-6078058	
	General Information on Grants and Assistanc	Assistance	e					
1 Does the organiza	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	bstantiate th	e amount of the	grants or assistai	nce, the grantees'	' eligibility for the grant	s or assistance, and	[
the selection criter	the selection criteria used to award the grants or assistance?	or assistance	e2					X Yes No
2 Describe in Part IN	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ures for mon	toring the use	of grant funds in the	United States			
Part   Grants and	Grants and Other Assistance to Domestic Or	mestic Orç	ganizations an	d Domestic Gov	ernments. Com	ganizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990,	ation answered "\	es" on Form 990,
Part IV, line	Part IV, line 21, for any recipient that received		more than \$5,	,000 Part II can b	oe duplicated if a	more than \$5,000 Part II can be duplicated if additional space is needed	peped	
1 (a) Name and a	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)								•
167								-
(7)								
(3)								
(4)								
(5)						,		
(9)								
				:				
(7)							!	
(8)								
(6)								
(10)								
(11)								
(12)							:	
2 Enter total numbe	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	overnment o	organizations lis	ted in the line 1 tak	)			
	Enter total number of other organizations listed in the line 1 table	ed 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 duplicated if additional space is needed. Part III

	rait ill cail de duplicated il additional space is lie	عا عممرد اع الحد	caca.			
	(a) Type of grant or assistance	(b) Number of	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
	4 Pair suards for adi stridy in DS	172	1 822 800		Ø/N	a/N
200	מאמותם זכר כתו מרתה זו כם	7/1	7,022,000		N/N	N/B
2						
~						
4						
2						
9						
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 informat	ion required in P	art I, line 2, Part	II, column (b), and any o	other additional information

Pt. I, Line 2--Scholarship recipients are required to show proof of admission and enrollment in their

educational program, as well as proof of an address in the United States. Transcripts are required each

semester. These reports are acted upon as necessary.

		·	

Schedule 1 (Form 990) (2018)

### **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.

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Р.	E.O.	Inter	national	Peace	Scholarship

P.E.O. International Peace Scholarship	42-6078058
Part I, Line 6: The number of volunteers is estimated, based on	the number of state
chairmen and number of Board of Trustees.	
Part VI, Line 7a-7b: The president of the related "parent" organ	ization, International
Chapter of the P.E.O. Sisterhood, appoints the board of trustees	for the organization.
Some decisions of the board of trustees are subject to approval	by the executive board
of the parent organization.	
Part VI, Line 11: Copies of Form 990 were provided to each member	r of the board of
trustees and to the audit committee of the parent organization p	rior to filing. A
formal review process was conducted with the audit committee, wi	th opportunities for
questions from that committee and the board of trustees to be add	dressed before the
return was filed.	
Part VI, Line 12c: Conflict of Interest policies and signature pa	ages are distributed
yearly to each member of the board of trustees. Signature pages	are collected at the
office in Des Moines, IA and monitored for completion. Any confl	icts of interest that
arise pursuant to this process or otherwise throughout the year	are to be reported
immediately, and the remaining members take the appropriate action	on.
Part VI, Line 15a-15b: The organization's Executive Director is	employed by the
related "parent" organization, International Chapter of the P.E.	O. Sisterhood, and the
organization shares her services with International Chapter. The	International Chapter
explains on its Form 990 the process determining the Executive D	irector's

compensation. A similar arrangement exists for the Director of Finance/Treasurer.

Name of the organization	Employer identification number
P.E.O. International Peace Scholarship	42-6078058
Part VI, Line 19: Governing documents, conflict of interest police	les and financial
statements are available to members of the parent corporation onl	y. These items are not
available to the general public.	
Part VII, Line 1a: The Executive Director and Director of Finance	Treasurer of the
parent organization, International Chapter of the P.E.O. Sisterho	od, also serve in the
same capacity for the reporting organization. An estimate of aver	age hours worked each
week for reporting and related organizations has been included in	column (B). No wages
are paid or reimbursed for either officer from the reporting orga	nizatıon. All wages
and related benefits for the individuals are paid and reported by	the parent
organization.	
Part IV, Line 12a and Part XII, Line 2b: The organization's modif	led cash basis
financial statements were audited by an independent auditing firm	on a consolidated
basis with the other philanthropic funds of the P.E.O. Sisterhood	, excluding Cottey
College and P.E.O. Foundation. (Listed on Schedule R, Part II)	
•	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the

▶ Attach to Form 990.

٠	
•	
?	
_	
0	
•	
Ō	
7	
-	
=	
2	
•	
·	
×	
•	
'n.	
ń	
•	
o	
=	
=	
>	
_	
_	
=	
_	
2	
?	
,,	c
=	C
Ε	8
Ĕ	8
E	0
	-
	00
on Form	20 11.0
on Form	P. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
on rorm	00 1101
S. on Form	00 1100
res:: on rorm	00 min 1
Yes: on Form	00 00000
"Yes" on Form	00
d "Yes" on Form	00
ed "Yes" on Form	A 44 - 44 P. C.
red "Yes" on Form	000
ered "Yes" on Form	00
wered "Yes" on Form	20 111111111111111111111111111111111111
swered "Yes" on Form	00 min 1 44 Tanah 4
nswered "Yes" on Form	00
answered "Yes" on Form	00
answered "Yes" on Form	00 mind of the the M
on answered "Yes" on Form	00
ion answered "Yes" on Form	00
tion answered "Yes" on Form	00 1100 00 1000
ation answered "Yes" on Form	00 min 7 44 Handa M
ization answered "Yes" on Form	00 min 7 44 1 min 7
nization answered "Yes" on Form	00 11.07 44 14.444 4
anization answered "Yes" on Form	00
ganization answered "Yes" on Form	00 11111 44 111114 4
organization answered "Yes" on Form 990, Part IV, line 55, 54, 550, 56, 57.	00 mindle 44 Manage M

OMB No 1545-0047 Open to Public 2018

(f) Direct controlling entity Inspection Employer identification number Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year 42-6078058 (e) End-of-year assets (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 (c)
Legal domicile (state
or foreign country) ► Go to www.irs.gov/Form990 for instructions and the latest information. (b) Primary activity (a) Name, address, and EIN (f applicable) of disregarded entity International Peace Scholarship Name of the organization Department of the Treasury Internal Revenue Service P.E.O. Part II Partl (2) 3 3 4 9 Ξ

	יכ ומי אכמו					
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
						Yes No
(1) Int'l Chapter P.E.O. Sisterhood 42-0453829						
3700 Grand Ave, Des Moines, IA 50312	membershp org Iowa	Iowa	501(c)4	N/A	N/A	×
(2) P.E.O. Scholar Awards 42-1379026						
3700 Grand Ave, Des Moines, IA 50312	schol. fund	Iowa	501(c)3	7	See Pt VII	×
(3) P.E.O. STAR Scolarship Fund 30-0583651						
3700 Grand Ave, Des Moines, IA 50312	schol. fund	Іома	501(c)3	7	See Pt VII	×
(4) P.E.O. Prog for Continuing Educ. 23-7405311						
3700 Grand Ave, Des Moines, IA 50312	grant fund	Iowa	501(c)3	7	See Pt VII	×
(5) P.E.O. Foundation 42-6094564				-		
3700 Grand Ave, Des Moines, IA 50312	educ scholshp Iowa	Іома	501(c)3	7	See Pt VII	×
(6) Cottey College 44-0545271						
1000 West Austin, Nevada, MO 64772	college	Missourı	501(c)3	2	See Pt VII	×
(7) Cottey College Building Fund 42-6078016						
3700 Grand Ave, Des Moines, IA 50312	suppt college Iowa	Iowa	501(c)3	12-Type II	See Pt VII	×
					A Calabada	0 / /

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

Schedule R (Form 990) 2018

OMB No 1545-0047

SCHEDULE R (Form 990)

P.E.O. International Peace Scholarship

Part I

(2)

ව

(4)

3

9

E

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

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

2018	

Open to Public

Employer identification number

42-6078058

(f) Direct controlling entity (e) End-of-year assets (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 (c)
Legal domicile (state
or foreign country) (b) Primary activity (a)
Name, address, and EIN (ff applicable) of disregarded entity

Part II	Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year	. Complete if the orgathe tax year	anization answer	ed "Yes" on Fo	rm 990, Part IV,	line 34, because	t had	
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	2(b)(13) led ?
							Yes	No
(1) Cott	(1) Cottey College Endowment Fund 42-6078017							
370(	3700 Grand Ave, Des Moines, IA 50312	endow. Fund	Iowa	501(c)3	12-Type II	See Pt VII		×
(2) P.E.	(2) P.E.O. Educational Loan Fund 42-6078059							
370(	3700 Grand Ave, Des Moines, IA 50312	loan fund	Іома	501(c)3	7	See Pt VII		×
(3)								
(4)								
								!
(2)								
						•		
(9)								
(2)								

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

Schedule R (Form 990) 2018

Schedule R (Form 990) 2018

Part III be	Identification of Related Organizations Taxable as a Partnership. Complete if the organiza because it had one or more related organizations treated as a partnership during the tax year	ed Organizations more related orga	Taxable anizations		hip. Complete artnership du	if the organizering the tax ye	zation	answered "Ye	s" on For	<b>a Partnership.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 34, sated as a partnership during the tax year	line 34,		
Name, rela	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from sections 512 - 514)	th Share ed, income	(f) Share of total income	(g) Share of end-of- year assets	(h) Ole proportionate altocations?	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?	(k) Percentage ownership	) ntage ship
			country)		- 310 611011006	(1.7)			Yes No		Yes No		
(1)	N/A										.,		
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
Part IV	Identification of Related Organizations Taxable as Inc 34, because it had one or more related organiz	ed Organizations d one or more rela	Taxable ated orga		a Corporation or Trust. Complete if the organization ans ations treated as a corporation or trust during the tax year	Complete if that are a strong or trust	ne orga during	Inization answithe tax year	ered "Yes	a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, ations treated as a corporation or trust during the tax year	, Part IV		
	(a) Name, address, and EIN of related organization	of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Icale Direct controlling eign entity	) (C	(e) Type of entity (C corp, S corp or trust)	(f) Share of total income	(g) Share of end-of-year assets		(h) Percentage 51 ownership co	(I) Section 512(b)(13) controlled entity?
												۶	Yes No
(1)	N/A									,			
(2)													+
(3)													
(4)											ļ. <u>.</u>		<del> </del> -
													+
(5)				<del></del>									
(9)													
(2)											-	-	-
			ļ										_
				-	<u> </u>			-	! !	Sched	Schedule R (Form 990) 2018	nm 990	) 2018

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	lated organizations lister	d in Parts II-IV2	
a property of (1) represent (1) constitutes (1) revealting or (1) reported from a controlled entity	1		1a   ×
A Necessity of (1) interest, (ii) annumes, (iii) refames, or (iv) refament accommod crimity.			
			1c X
			1d ×
	· · · · · · · · · · · · · · · · · · ·		
e Loans or loan guarantees by related organization(s)			ļ.
			*
f Dividends from related organization(s)			1
g Sale of assets to related organization(s)			1
h Purchase of assets from related organization(s)			14 ×
i Exchange of assets with related organization(s)			1; ×
			1; ×
k Lease of facilities, equipment, or other assets from related organization(s)			X
1 Performance of services or membership or fundraising solicitations for related organization(s)			<b>=</b>
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)			1m ×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			
o Sharing of paid employees with related organization(s)			10 X
p Reimbursement paid to related organization(s) for expenses.			×
q Reimbursement paid by related organization(s) for expenses			19 ×
r Other transfer of cash or property to related organization(s)			1. ×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this	line,	including covered relationships and transaction thresholds	action thresholds
(a)	(b)	(c)	(d) Method of determinan
Name of related organization	type (a-s)		amount involved
(1) P.E.O. Foundation	O	431,048	Cash-FMV
	•	001	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(2) International Chapter P.E.U. Sisterhood	m, o	001,60	Casil-file
(2)			
(4)	_		
(5)			
(9)			
VOI		Sch	Schedule R (Form 990) 2018
ASC			

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

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

(1) (2) (3) (4) (6) (6) (7) (8) (10) (11)		, kes		Yes	02	Yes	9 2	
(2) (3) (4) (5) (6) (7) (8) (10)								
(5) (4) (5) (6) (7) (10) (11)								
(4) (5) (6) (7) (8) (10) (11)								
(4) (5) (6) (7) (8) (9) (10)								
(5) (6) (7) (8) (9) (10)							+	
(5) (7) (8) (9) (10)								
(10)				L				
(9)	-							
(10)							ļ	
(11)								
(11)								
(12)								
(13)					•			
(14)							1	
(15)								
(16)								

Part VII Provide additional information.  Provide additional information for responses to questions on Schedule R See instructions  Part II, Lines (2) - (7) pg. 1/2, Lines (1) - (2) pg. 2/2, col (f): The direct	
Part II, Lines (2) - (7) pg. 1/2, Lines (1) - (2) pg. 2/2, col (f): The direct	
controlling entity for referenced related organizations is The International Cha	pter
of the P.E.O. Sisterhood. The executive board of this organization either appoin	ts
trustees or governs directly for each of the aforementioned related organization	s.
·	
• •	
•	