2949310704907

(Rev January 2020)

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

<u>A</u>	For t	he 2019	calendar year, or tax year beginning April 1, 2019, and ending	Ma:	rch 31		, 20 20	
D	Charles of		C Name of organization		D Employer ider	ntification	number	
_	Check II	applicable	P.E.O. Şisterhood IN State Chapter					
		iress inge	Doing business as		35-607	4424		
	Nan	ne change	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telephone number			
烹	Inst	al return	3700 Grand Ave		515 255 3153			
ŧ		al return/	City or town, state or province, country, and ZIP or foreign postal code					
→	Ame	minated ended	Des Moines, IA 50312-2899		G Gross receipts	\$	462,848	
4		lication	F Name and address of principal officer		H(a) Is this a grou			
9		ding		1	subordinates' H(b) Are all subordi		\vdash	
\equiv		exempt sta	Karen Fritz - same as C above	4	• •		ee instructions)	
7		site:		/-		•	·	
			www.peointernational.org		H(c) Group exemp			
		of organ		f format	ion 1963 M s	State of le	gal domicile IA	
ENVELO	art I		mmary					
∑ ≧	1		describe the organization's mission or most significant activities $\begin{tabular}{c} \underline{\textbf{Women's}} \\ \hline \end{tabular}$					
ឃុទ្ធ	2		porting six philanthropic projects for women. These					
Ğ		<u>loar</u>	and award programs and a women's college owned by	, the	e orqaniza	ation	•	
97	2	Check	this box \blacktriangleright if the organization discontinued its operations or disposed of more than	an 25%	of its net assets			
ç	3	Numb	er of voting members of the governing body (Part VI, line 1a)			3	5	
o.	4	Numb	er of independent voting members of the governing body (Part VI, line 1b)			4	5	
Activities &	5	Total r	number of individuals employed in calendar year 2019 (Part V, line 2a),		<i></i> . 1	5	1	
:	6		number of volunteers (estimate if necessary)		· · · · · · · · · · · · · · · · · · ·	6	100	
٥	? 7a		inrelated business revenue from Part VIII, column (C), line 12			7a		
	1		related business taxable income from Form 990-T, line 39			7b		
_	 	J HCC UI	included basiliess taxable income from 1.5 in 555 1, inic 55 1, 1	<u> </u>	Prior Year		Current Year	
	. 8	Contri	butions and grants (Part VIII, line 1h)		486,8	16	454,645	
Revenue	9				400,0	-	434,043	
9	140		m service revenue (Part VIII, line 2g)		4 1	0.2	F 063	
ď			ment income (Part VIII, column (A), lines 3, 4, and 7d)		4,1	02	5,063	
	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				3,140	
_	12		evenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		490,9		462,848	
	13		and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	286,0	65	260,291	
	14		ts paid to or for members (Part IX, column (A), line 4)					
ď	15		es, other compensation, employee benefits (Part IX, column (A), lines 5–10)		4,2	69	6,447	
200	16 a	a Profes	sional fundraising fees (Part IX, column (A), line 11e)					
Fynenses	t t	o Total f	undraising expenses (Part IX, column (D), line 25) ▶ 2268 RECEIVED					
	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		171,8	28	215,348	
	18	Total e	expenses (*art IX, column (A), lines 11a-11d, 111-124e), line 25) ue less expenses Subtract line 18 from line 12		462,1	62	482,086	
	19	Reven	ue less expenses Subtract line 18 from line 12 AUG 1.8 2020		28,7	86	-19,238	
6				Begin	ning of Current Y		End of Year	
sets	20	Total a	issets (Part X, line 16)		414,6	52	395,414	
Ass	21	Total I	abilities (Part X, line 26)					
Net Assets or	22		sets or fund balances Subtract line 21 from line 20,		414,6	52	395,414	
	art (i		nature Block					
Ui	nder pe	enalties o	perjury. I declare that I have examined this return, including accompanying schedules and staten	nents, a	nd to the best of	my knowl	ledge and belief, it is	
tru	e, corr	ect, and	complete Declaration of preparer (other han officer) is based on all information of which preparer ha	s any kn	owledge			
			Dana Vankseln		8/5/2	0020		
Sig	gn	→ s	gnature of officer		Date	.020		
He	ere		Dana Van Daakal		Direc		ef Finance	
		7	Dana Van Roekel /pe or print name and title		DITEC	COL C	of Finance	
_		Ц	ype preparer's name Preparer's signature Date			, PTIN		
Pai	id	1	ypo proparot o namo			" [
Pre	parer			 1	self-employe	<u> </u>		
Us	e Only				Firm's EIN			
_	<u> </u>		address >		Phone no			
_		·	scuss this return with the preparer shown above? (see instructions)		· · · · · · · · · · · ·	<u> l</u>	Yes No	
Fo	Pape	erwork I	Reduction Act Notice, see the separate instructions.			0	Form 990 (2019)	
JŞA					_	T		
						-		

Statement of Program Service Accomplishments Check it Schedule Coctans a response or note to any line in this Part III	For	m 990 (2019)	Page 2
B Brefly describe the organization's mission P.E.O. is a philanthropic organization where women celebrate the advancement of women; educate women through scholarhsips, grants, awards, leans and stewardship of Cottey College; and motivate each other to achieve their highest aspirations. Delthe organization undertake any significant program services during the year which were not listed on the prior form 990 or 990-E2? If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services. "If "Yes," describe these new services on Schedule O Did the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenus, if any, for each program service reported Decorbe the organization's program service reported (Code) (Expenses \$ 403,264 including grants of \$ 250,291) (Revenue \$) Program services are accomplished by collecting and forwarding contributions to various P.E.O. projects and scholarships on both the state and national levels; no specific statistics are available. (Code) (Expenses \$ including grants of \$)(Revenue \$) (Code) (Expenses \$ including grants of \$)(Revenue \$) (Code) (Expenses \$ including grants of \$)(Revenue \$) (Code) (Expenses \$ including grants of \$)(Revenue \$)	_		
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le Total program service expenses ► 403, 264	40		
SA 500 SA	40		
	JSA	Form 99	0 (2019)

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Part	Checklist of Required Schedules		Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		168	NO
1	·	1		Х
•	complete Schedule A	2		X
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		- 21
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		_	
-	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues,	-		
·	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		;	
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_ X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a	Х	
_	Schedule D, Parts XI and XII	124	^	
D	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
42	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	1.44		- 21
	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			
. •	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
. •	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		_ X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A) line 12 If "Yes," complete Schedule I, Parts I and II	21	х	

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	1	l	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	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			.,
	through 24d and complete Schedule K If "No," go to line 25a	24a	[X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
	to defease any tax-exempt bonds?	24c 24d	<u> </u>	┼
		240		
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	250		,
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		X
D	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	230		 ^
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			 ^`
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee	1		ł
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_ X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
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,			,,
25-	or IV, and Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
D	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		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330		\vdash
JU	related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
٠,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	"		
	19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			\Box
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
SA E 1030	2 000	Form	990	(2019)

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		,	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1] .		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		_	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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		X
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		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	ļ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	Х	
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			l
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
-	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		, .	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8	-	
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter		Ì	
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)	Ì	l	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		- 1	
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O			
	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	l	l	
	Enter the amount of reserves on hand			
		14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see instructions and file Form 4720, Schedule N			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	l	Х
	If "Yes," complete Form 4720, Schedule O			

Pari	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O	See in	struc	
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>	<u></u>	X
<u>Sect</u>	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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 5] '		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			l
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3	<u>'</u>	Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Χ	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		[
а	The governing body?	8a	X_	
ь	Each committee with authority to act on behalf of the governing body?	8b	Х	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	Ļ	х
ecti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	Yes	No
		40-		NO
	Did the organization have local chapters, branches, or affiliates?	10a	X	<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	405	.,	ļ
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.	1 ta	^	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			i —
D	rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c		
	describe in Schedule O how this was done	13	^	Х
13	Did the organization have a written whistleblower policy?	14	х	_^
14 15	Did the organization have a written document retention and destruction policy?			
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1
а	The organization's CEO, Executive Director, or top management official None	15a		х
	Other officers or key employees of the organization	15b		Х
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
l6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		ĺ	
	with a taxable entity during the year?	16a		Х
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		
ecti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ Indiana			
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-1 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X. Upon request Other (explain on Schedule O)	(Sect	uon 5	01(c)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	f inter	est n	olicy

State the name, address, and telephone number of the person who possesses the organization's books and records ► Kathy A. Soppe, 3700 Grand Avenue, Des Moines, IA 50312 (515)255-3153

20

and 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. See instructions for the order in which to list the persons above

(A) Name and title	(B) Average hours per week (list any hours for related organizations below	box, office Individu	Pos do not check ox, unless pe fficer and a d		sition one employee (C) sition one than one employee (C) Former Highest compensated Key employee		an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
	dotted line)	ñ	tee			ısated					
(1) Karen Fritz	25										
President		х		x				0	0	0	
(2) Marti Ramsey	20										
Vice President		X		х				0	0	0	
(3) Julia Moll	25										
<u>Organizer</u>		X		Х				0	0	0	
(4) Carol Flora	15]									
Treasurer		X		Х				0	0	0	
(5) Beth Hensley Gunyon	25	j			İ			:			
<u>Secretary</u>		X		Х				0	0	0	
(6)	_										
(7)		 									
(8)	 -	<u> </u>									
(9)							_		<u>, </u>		
(10)						-	_			·	
(11)											
(12)									—		
(13)											
(14)				-			_				

Part VII Section A. Officers, Directors, Tru	stees, Ke	y Em	plo	yee	s, a	and H	ligh	nest Compensate	Compensated Employees (continued)				
(A) Name and title	(B) Average	box.	(C) Position (do not check more that box, unless person is bo officer and a director/tr				an	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estimated amour of other compensation		
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organiza (W-2/1099	tions	fre	om the	and
(15)													
(16)		-	_				-						
(17)													
(18)		_			_			<u>-</u>					
(19)							_			_			
(20)												·	
(21)		<u> </u>											
(22)							_						
(23)													
(24)						_							
(25)													
1b Subtotal		L	LЦ • •		L								
c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)													
Total number of individuals (including but no reportable compensation from the organization)	ot limited to						who	o received more th	nan \$100,0	000 of			
						_						Yes	No
3 Did the organization list any former of employee on line 1a? If "Yes," complete Sched											3		x
4 For any individual listed on line 1a, is the	sum of re	portal	ble	con	npe	nsatio	n a	and other compen	sation from	n the			
organization and related organizations gr										such	4	,	х
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mper	nsat	ion	fror	n any	ur ur	nrelated organizati	on or indi		5		х
Section B. Independent Contractors										_			
Complete this table for your five highe compensation from the organization Report													
(A) Name and business addre	ess							(B) Description of ser	vices	((C) Compens	ation	
None					Ť								
							<u> </u>			<u> </u>			
2 Total number of independent contractors received more than \$100,000 of compensation									/e) who				

Part VIII	Statement of Revenue
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-	•	Check if Schedule O	Jonathia a I			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts s	1a	Federated campaigns		1a					(1)
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	[1b	193,006				
S, G	С	Fundraising events	[1c				ું અને સિંદુ કે મેંથી પાસે કોઈ કે. માર્કેક કે અને કોઈ કે કે કે મેં કોઈ ક	
iifts ar /	ď	Related organizations . `.		1d_					
s, G mil	e	Government grants (contri	butions)	1e					
Si	f	All other contributions, gifts	- 1						A STATE OF THE STA
outi her		and similar amounts not include	ŕ	1f	261,639				
ξŏ	g	Noncash contributions inc	I						
Son		lines 1a-1f	_	1g \$					
	h	Total. Add lines 1a-1f	<u> </u>	• • •		454,645		The Martin of the Control of the Con	Carry G G Rech
a)					Business Code	19 grante de fai le de la	The state of the state of	Carlotte Carlotte Carlotte	المُرَاثِينَ وَيُرَا الْمُعَالِمُ مُنْ الْمُعَالِمُ مُنْ الْمُعَالِمُ مُنْ الْمُعَالِمُ مُنْ الْمُعَالِمُ الْم
vic	∙2a					,			
Ser	b					,			
Program Service Revenue	С								
gra Re	d								
٥r٥	е								
	f	All other program service re Total. Add lines 2a-2f				,		Control of the second	ر المراج الم
	9	Investment income (incl							
	3	other similar amounts)	•		•	5,063			5,063
	4	Income from investment of			_	3,000			- 1
,	5	Royalties	-						
		, ,	(ı) Rea		(ii) Personal	المنظمة	A THE STATE OF THE	the state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	6a	Gross rents 6a	1		¢				
	b	Less rental expenses 6b							
	c	Rental income or (loss) 6c	•					Can also and a second of the control	- 141 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	d	Net rental income or (loss)							
	7a	Gross amount from	(ı) Secur		(II) Other				- 15 m
		sales of assets	•						
		other than inventory 7a							r die land of the hort
e	b	Less cost or other basis							
enr		and sales expenses 7b)						
Révenue	С	Gain or (loss) 7c	:			De Grander E. F. L. E. L.		<u>ुन्ति</u> (च्या विकास के कि विकास	
	d	Net gain or (loss)			<u></u> .▶				
Othe	8a	Gross income from	fundraising						ي المراكب المر المراكب المراكب المراك
0		events (not including \$							
		of contributions reporte	ed on line	,					
		1c) See Part IV, line 18		8a					
	b	Less direct expenses		<u>8b</u>		hallalanen		<u> </u>	10 11 1 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	С	Net income or (loss) from	fundraising e	vents.	<u> </u>	MA I CALLAND TO DESCRIPTION	i Tombo Tittle de M. A. Thi	, - i, 20 heeste, + k k - listen	2*************************************
	9a	Gross income from				40 m			
· .	•	activities See Part IV, line	1	$\overline{}$					
	b	Less direct expenses		[9b]		The same of the first transfer of the contraction o	The state of the s	ક્ષ્યું તાલા માટે કે માટે કુલ માટે મુંદી	i programa de la composición del la composición del composición de la composición de la composición del composición del composición de la composición del la composición del composición d
	C	Net income or (loss) from	•	vities.		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	The second secon		Landing Control of
,	10a	Gross sales of inver	-	10-	3,140				han in the second
	٠.	returns and allowances .		10a 10b	3,140				GATHERY CANADAN
	p	Less cost of goods sold Net income or (loss) from s				3,140	3,140	<u>(편) 도구화의 "각조 (제품</u>	was the first time
	_	moone or (1000) nome	OF 11 VOI	·····	Business Code		5, 140	तुर्वे तुं कृति चार्वे स्वयं हार्डिट	
Miscellaneous Revenue		•		}	,	Per Contrade 15 Co	to what the de se collaborate it se	T AMOUNT TO A TRAINER	A CARLE TO
i e	11a	,		·					
ē a ĭ e	0			—		,		· <u> </u>	
ايّوق	H C	All other revenue			· · · · · · · · · · · · · · · · · · ·		-		
Σ	۵	Total. Add lines 11a-11d		•			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		版·台灣、· · · · · · · · · · · · · · · · · · ·
	12	Total revenue. See instruct				462,848		- 12 () - 10 () 23 () - 12 () 12	5,063
JSA	1 2 000			<u>-</u>			1 - · ·		Form 990 (2019)

Part IX Statement of Functional Expenses

	tion 501(c)(3) and 501(c)(4) organizations mus	st complete all columns			
	Check if Schedule O contains a resp			<u> </u>	
	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	260,291	260,291		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
	Benefits paid to or for members				
6	trustees, and key employees				
	Other salaries and wages	5,780	1,927	3,853	
	section 401(k) and 403(b) employer contributions) Other employee benefits	667	222	445	
11	Payroll taxes	007		113	
C	Legal	5,546		5,546	
е	Professional fundraising services See Part IV, line 17. Investment management fees	776		776	
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)		-		
13	Office expenses	1,911			1,911
16	Royalties	60 156	22 710	45 427	
	Travel	68,156	22,719	45,437	
19 20	Conferences, conventions, and meetings	26,152	8,598	17,197	357
22	Payments to affiliates	108,085	108,085	450	
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	458		458	
a b	Operating Expenses	4,264	1,422	2,842	
c d e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here If following SOP 98-2 (ASC 958-720)	482,086	403,264	76,554	2,268

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	ort X		<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	239,914	1	217,599
	2	Savings and temporary cash investments	860	2	41,535
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	<u> </u>	4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
	ł	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ď	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or other	· · · · · · · · · · · · · · · · · · ·		
		basis Complete Part VI of Schedule D 10a			
	ь	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	173,878	11	136,280
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11,		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	414,652	16	395,414
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%	#1m. #		
abi		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	·	24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
ces		Organizations that follow FASB ASC 958, check here ► and complete lines 27, 28, 32, and 33.			
檀	27	Net assets without donor restrictions		27	
Ä	28	Net assets with donor restrictions,		28	
or Fund Balances		Organizations that do not follow FASB ASC 958, check here ► X and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
Assets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
188	31	Retained earnings, endowment, accumulated income, or other funds	414,652		395,414
Net /	32	Total net assets or fund balances	414,652		395,414
ž	33	Total liabilities and net assets/fund balances	414,652		395,414
_			111,002		50m 990 (2010)

Page **12** Form 990 (2019) **Reconciliation of Net Assets** Part XI Check if Schedule O contains a response or note to any line in this Part XI 1 462,848 2 482,086 3 -19,238 Revenue less expenses Subtract line 2 from line 1.......... 3 4 414,652 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 5 6 6 7 8 9 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 10 395,414 Financial Statements and Reporting Part XII Yes No Accounting method used to prepare the Form 990 | X | Cash | Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant?..... 2a Х If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis 2b Х If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X | Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of

the audit, review, or compilation of its financial statements and selection of an independent accountant?.....

If the organization changed either its oversight process or selection process during the tax year, explain on

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

required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.

2c

3a

3b

Form **990** (2019)

Х

Х

Schedule O

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

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

) (see separate instructions), the		,, , , , , , , , , , , , , , , , , , ,	,	, ,		
_	Section 501(c)(4), (5), or (6) org	anizations Complete Part III					
	ne of organization			' '	entification number		
P.	.E.O. Sisterhood IN	State Chapter	504(a) a	35-6074			
		organization is exempt und					
1	•	organization's direct and indirect	ct political campaign a	activities in Part IV (see ii	nstructions for		
	definition of "political campa						
2							
3							
_		organization is exempt unde					
1		cise tax incurred by the organiza					
2		cise tax incurred by organization					
3		a section 4955 tax, did it file For					
					Yes No		
	If "Yes," describe in Part IV	organization is exempt und	or coction E01/c) o	veent section 501/c)/2	<u> </u>		
					<u>, , , , , , , , , , , , , , , , , , , </u>		
1		xpended by the filing organization					
_							
2		ng organization's funds contribut					
		es					
3	·	enditures Add lines 1 and 2 E		•			
4		e Form 1120-POL for this year?			Yes No		
5	Enter the names addresses	and employer identification nui	mber (FIN) of all secti	on 527 political organiz	ations to which the filing		
•		ts For each organization listed,					
		tributions received that were pr					
	as a separate segregated fur	nd or a political action committee	e (PAC) If additional s	pace is needed, provide i	nformation in Part IV		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political		
				filing organization's	contributions received and		
				funds If none, enter -0-	promptly and directly delivered to a separate		
					political organization If		
					none, enter -0-		
(1)							
`''							
(2)							
\ - ,			_				
(3)							
,-,							
(4)							
,							
(5)		<u> </u>	******	-			
,			7				
(6)			 	 			
			_				

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

Schedule C (Form 990 or 990-EZ) 2019

Sch	redule C (Form 990 or 990-EZ) 2019						Page 2
Pa	art II-A Complete if the org section 501(h)).	anizati	on is exe	mpt under section	on 501(c)(3) and	filed Form 5768 (ele	ection under
A	Check ▶ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)						
В	Check ▶ ☐ If the filing organization	ation ch	ecked box	A and "limited conti	rol" provisions app	oly	
	Limits of term "expenditu		ying Expen		i.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to in	fluence	public opir	ion (grassroots lob	bying)		
t	Total lobbying expenditures to in	fluence	a legislativ	e body (direct lobb	ying) [
C	: Total lobbying expenditures (add	l lines 1	a and 1b) .		[
C	Other exempt purpose expenditu	ıres			[
e	Total exempt purpose expenditu	res (add	d lines 1c ai	nd 1d)	[
f	Lobbying nontaxable amount E	Enter th	e amount	from the following	table in both		
	columns						
	If the amount on line 1e, column (a)	or (b) is:	The lobbyi	ng nontaxable amoun	t is:		
	Not over \$500,000		20% of the	amount on line 1e			
	Over \$500,000 but not over \$1,000,	000	\$100,000 p	lus 15% of the exces	s over \$500,000	í	1
	Over \$1,000,000 but not over \$1,50	0,000	\$175,000 p	lus 10% of the exces	s over \$1,000,000		
	Over \$1,500,000 but not over \$17,0	00,000	\$225,000 p	lus 5% of the excess	over \$1,500,000		•
	Over \$17,000,000		\$1,000,000)		k.	
g	Grassroots nontaxable amount (enter 25	% of line 1f)			
h	Subtract line 1g from line 1a If z	ero or le	ss, enter -C)	[
i	Subtract line 1f from line 1c If ze	ero or le	ss, enter -0-	<u>.</u>	[
	If there is an amount other that					tion file Form 4720	
	reporting section 4911 tax for th	s year?	. <u></u>	. <u></u> <u></u> .	<u> </u>	<u></u> . <u></u> .	Yes No
				raging Period Unde			
	(Some organizations that			01(h) election do no te instructions for			nns below.
					- <u>-</u>	_ 	
		Lobb	ying Expe	nditures During 4-1	ear Averaging Per	riod	<u> </u>
	Calendar year (or fiscal year beginning in)	(a)	2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a	Lobbying nontaxable amount	_					
b	Lobbying ceiling amount (150% of line 2a, column (e))		•			,	
С	Total lobbying expenditures						
d	Grassroots nontaxable amount						
е	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2019

(election under section 501(h)).	(a)		(b)	
For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No		Amo	unt	
During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	-	-				
a Volunteers?b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	}					
c Media advertisements?						
d Mailings to members, legislators, or the public?	<u> </u>					
e Publications, or published or broadcast statements?						
f Grants to other organizations for lobbying purposes?	1	 				
g Direct contact with legislators, their staffs, government officials, or a legislative body?	-					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?i Other activities?						
j Total Add lines 1c through 1i	1					
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b If "Yes," enter the amount of any tax incurred under section 4912						
 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? 						
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ectio	n		
					Yes	1
Were substantially all (90% or more) dues received nondeductible by members?				1_	Х	L
. Bid the digamental make only in heade leadying expenditures of \$2,000 critical				_2	Х	┸
Did the organization agree to carry over lobbying and political campaign activity expenditures fro	m the	Drior	vear?	3		
				1		_
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."	(c)(5)	, or s	ection		3, is	<u> </u>
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes."	(c)(5) OR (I	o, or s o) Pa	ection		3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members	(c)(5) OR (I	o, or s	ection rt III-A		3, is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members	(c)(5) OR (I 	o) Par	ection rt III-A		3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members	(c)(5) OR (I unts	o, or so) Par	ection rt III-A		3, is	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members	(c)(5) OR (I unts	o, or so) Par	ection rt III-A		3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members	(c)(5) OR (I 	o, or so) Par	t III-A		3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year	(c)(5) OR (I	o, or s	t III-A 1 2a 2b 2c		3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid). a Current year	(c)(5) OR (I	o, or so	1 2a 2b 2c 3		3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible ic and political expenditure next year?	(c)(5) OR (I	o, or so) Par	t III-A 1 2a 2b 2c 3		3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid). a Current year. b Carryover from last year. c Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible locations.	(c)(5) OR (I	o, or so) Par	1 2a 2b 2c 3		3, is	
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year	(c)(5) OR (I unts es of the	of of one	1 2a 2b 2c 3	, line		
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year	(c)(5) OR (I unts es of the	of of one	1 2a 2b 2c 3	, line		
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year. Total. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due of the foliation of the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	(c)(5) OR (I unts es of the	of of one	1 2a 2b 2c 3	, line		
Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year	(c)(5) OR (I unts es of the	of of one	1 2a 2b 2c 3	, line		

Schedule C (F	orm 990 or 990-EZ) 2019	Page 4
Part IV	Supplemental Information (continued)	
		
		<u> </u>
		
		

SCHEDULE D (Form 990)

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

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

▶ Attach to Form 990.

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Inspection

Nam	of the organization		1	Employer Identification number	
	.O. Sisterhood IN State Chapter			35-6074424	
Pa				counts.	
	Complete if the organization answered "Ye	es" on Form 990, Part IV, line	<u> </u>		
	<u> </u>	(a) Donor advised funds		(b) Funds and other accounts	
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor ad	visors in writing that the asset	ts held in	donor advised	
•	funds are the organization's property, subject to the organization				
6					
•	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				
	conferring impermissible private benefit?		•	. , , , , , , , , , , , , , , , , , , ,	
Ð.	rt II Conservation Easements.				
	Complete if the organization answered "Ye	es" on Form 990 Part IV line	7		
1	Purpose(s) of conservation easements held by the org		<u>, , </u>		
•			runtion of c	historically important land area	
	Preservation of land for public use (for example, red	1 1		historically important land area	
	Protection of natural habitat	Piesei	ivation of a	certified historic structure	
_	Preservation of open space			form of a consequence	
2	Complete lines 2a through 2d if the organization held	a qualified conservation contrib	ution in the	Held at the End of the Tax Year	
	easement on the last day of the tax year		-		
а	Total number of conservation easements				
b	Total acreage restricted by conservation easements .				
C	Number of conservation easements on a certified hist				
d	Number of conservation easements included in (c) ad	·	I		
	historic structure listed in the National Register				
3	Number of conservation easements modified, transfer	erred, released, extinguished, o	or terminat	ed by the organization during the	
	tax year 🕨				
4	Number of states where property subject to conservat				
5	Does the organization have a written policy regard	-		- 1 1 1 1	
	violations, and enforcement of the conservation easem	nents it holds?		Yes L No	
6	Staff and volunteer hours devoted to monitoring, inspecting	ng, handling of violations, and en	iforcing con	servation easements during the year	
	>				
7	Amount of expenses incurred in monitoring, inspecting,	, handling of violations, and enfo	rcing cons	ervation easements during the year	
	▶ \$				
8	Does each conservation easement reported on line 2(d)	above satisfy the requirements of	of section 1	70(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes L No	
9	In Part XIII, describe how the organization reports con	servation easements in its revei	nue and ex	pense statement and	
	balance sheet, and include, if applicable, the text of th	e footnote to the organization's	financial s	tatements that describes the	
	organization's accounting for conservation easements				
Pa	t III Organizations Maintaining Collections of			milar Assets.	
	Complete if the organization answered "Ye	es" on Form 990, Part IV, line	8		
1a	If the organization elected, as permitted under FASB	ASC 958, not to report in its i	revenue st	atement and balance sheet works	
	of art, historical treasures, or other similar assets h service, provide in Part XIII the text of the footnote to it	ield for public exhibition, educ	cation, or	research in furtherance of public	
h					
b	If the organization elected, as permitted under FASB art, historical treasures, or other similar assets held for				
	provide the following amounts relating to these items	or public exhibition, education,	J. TOGGAIC	rartificiance of public service,	
	(i) Revenue included on Form 990, Part VIII, line 1			> \$	
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, h				
-	following amounts required to be reported under FASB			iniariolal gain, provide the	
а	Revenue included on Form 990, Part VIII, line 1			. > \$	
<u>b</u>	Assets included in Form 990, Part X				

Pa	rt III Organizations Maintain	ing Collections of	f Art, Histo	rical Tre	asure	s, or Othe	r Similar Ass	ets (c	ontınued)
3										
	collection items (check all that app	oly)								
а	Public exhibition	•	d [Loan	or exch	ange progr	am			
b	Scholarly research		e -	Other		• • •				
C	Preservation for future gene	rations								
4										
•	XIII									
5										
3	assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No									
D ₂			tailleu as pa	it of the t	organiza	ation's con	30000		165	140
C.	rt.IV Escrow and Custodial A Complete if the organiza 990, Part X, line 21		es" on Forr	n 990, F	Part IV,	line 9, or	reported an a	moun	t on Forr	n
1a	Is the organization an agent, truste	ee, custodian or oth	er intermed	ary for c	ontribut	tions or oth	er assets not			
	included on Form 990, Part X?							Г	Yes	No
b	If "Yes," explain the arrangement i	n Part XIII and com	plete the foll	lowing tak	ole			_		
			•	•			Am	ount		
С	Beginning balance					1c	·			
d	Additions during the year									
e	Distributions during the year									
f	Ending balance									
2 a	Did the organization include an am						I account liability	12	Yes	No
	If "Yes," explain the arrangement i						-			⊢ '''
	rt V Endowment Funds.	THE GREAT CHOCK I	1010 11 1110 02	p.aa		<u> </u>		• • • •	<u> </u>	
ıα	Complete if the organiza	ation answered "Y	es" on Forr	n 990. F	Part IV	line 10				
		(a) Current year	(b) Prior			o years back	(d) Three years	back	(e) Four ye	ars back
	Decree of constant	(a) content year	(5),	,	(-,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(4) 111100)0410	-	(0) 1 04.70	
1a	Beginning of year balance		 	-	 		 		<u>.</u>	
b	Contributions						+		·	
С	Net investment earnings, gains,							į		
	and losses	<u> </u>	-		ļ -					
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses				ļ					
g	End of year balance		<u> </u>							
2	Provide the estimated percentage	of the current year	end balance	e (line 1g,	column	ı (a)) held a	S			
	Board designated or quasi-endown	nent ▶	%							
b	Permanent endowment	%								
С	Term endowment ▶	.%								
	The percentages on lines 2a, 2b, a	· ·								
3 a	Are there endowment funds not in	the possession of t	he organiza	tion that	are held	d and adm	inistered for the			
	organization by								Ye	s No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	ed as require	d on Sch	edule R	?			3b	
4	Describe in Part XIII the intended i		ation's endov	vment fur	nds					
Pa	rt VI Land, Buildings, and Equ	uipment.	/aall an Fa		Dor# 1\ 1	lina 44=	See Fe 004			
	Complete if the organization of property		r other basis	(b) Cost o					Book value	
			stment)		ther)		ccumulated preciation	(a) ——		
1 a	Land									
b	Buildings	[_	
С	Leasehold improvements									
d	Equipment									
е	Other		"							
	I. Add lines 1a through 1e (Column		m 990, Part 2	X, columr	n (B), lın	e 10c)	▶			

Part VII	Investments - Other Securities. Complete if the organization answered	l "Ves" on Form 990	Part IV line 11h See Form 990	Part X line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year mark	
	al derivatives			
(2) Closely	held equity interests			_
(3) Other_		<u> </u>		
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				<u> </u>
	(b) must equal Form 990, Part X, col (B) line 12) .			
Part VIII	Investments - Program Related.	Vaa on Farm 000	Dort IV line 11e See Form 000	Dark V. Ivana 42
	Complete if the organization answered			·
	(a) Description of investment	(b) Book value	(c) Method of valuati Cost or end-of-year marke	
_(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				···
(9)	(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
(1)	(4) 55			(4) = 0 (1 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4 (4
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) li	ne 15)		
Part X	Other Liabilities. Complete if the organization answered line 25	"Yes" on Form 990	, Part IV, line 11e or 11f See Form	n 990, Part X,
1.	(a) Descrip	tion of liability		(b) Book value
	al income taxes			
(2)			·	
(3)	<u> </u>			
(4)				
(5)				
(6)				
(7)				_
(8)		 _		
(9)	n (h) must squal Form 000. Post V and (D) (m) of the	· · · · · · · · · · · · · · · · · · ·		
	n (b) must equal Form 990, Part X, col (B) line 25)			-1
	r uncertain tax positions. In Part XIII, provide the sliability for uncertain tax positions under FASB A			
JSA 9E1270 1 000		I check field if		nedule D (Form 990) 2019

Pac	ıe	4

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	rn.	
1 2	Total revenue, gains, and other support per audited financial statements	1	462,848
- a	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities]	•
c	Recoveries of prior year grants] [
d	Other (Describe in Part XIII)	_	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	462,848
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	-	
b	Other (Describe in Part XIII)	-	
	Add lines 4a and 4b		1.50 0.10
5 Port	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		462,848
Part	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a		
1	Total expenses and losses per audited financial statements	1	482,086
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	4	
b	Prior year adjustments	-	
С	Other losses	-	
d	Other (Describe in Part XIII)	┤ 。	
	Add lines 2a through 2d	2e 3	482,086
3	Subtract line 2e from line 1	-	402,000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b4a	{ }	
	Other (Describe in Part XIII)	1	
	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		482,086
Part 2	Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,	-	
2, Part	XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform.	mation	
		-	
		-	
		_	
		_	

Schedule D (Fo	orm 990) 2019	Page 5
Part XIII	Supplemental Information (continued)	
-		
		
		
		
		
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SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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.

2019	Open to Public Inspection
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OMB No 1545-0047

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

Employer Identification number	35-6074424

State Chapter	on on Grants and Assistance
.O. Sisterhood IN	General Information
다 된	Part

X Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Cottey College, 1000 W Austin							
Nevada, MO 64772	440545271	501(c)(3)	62,795	0			Gen Supp/Schol
(2) P.E.O. Educational Loan Fund							
Des Moines, IA 50312	426078059	501(c)(3)	31,055	0			Educ Loans
(3) P.E.O. Int'l Peace Scholarship							
Des Moines, IA 50312	426078058	501(c)(3)	33,098	0			Scholarships
(4) P.E.O. Program for Contin Educ							
Des Moines, IA 50312	237405311	501(c)(3)	38,892	0			Educ Grants
(5) P.E.O. Scholar Awards							
Des Moines, IA 50312	421379026	501(c)(3)	32,727	0			Educ Awards
(6) P.E.O. STAR Scholarship							
Des Moines, IA 50312	300583651	501(c)(3)	41,530	0			Scholarships
(7) P.E.O. Foundation							
Des Moines, IA 50312	426094564	501(c)(3)	20,194	0			Schol/Grants
(8)							
							:
(6)		~					
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	government o	organizations lis	ted in the line 1 tab	je		•	7

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

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

Schedule I (Form 990) (2019)

Schedule I (I	Schedule I (Form 990) (2019)					
Part III	Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed	mestic Individ	duals. Complete ded	e if the organizat	ion answered "Yes" on F	orm 990, Part IV, line 22
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistan
-						

7						
ო						:
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 F	Part I, line 2, Part	III, column (b), and any o	other additional information

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

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

P.E.O. Sisterhood. Reports of these organizations are available to all members of P.E.O.

Part II, Line 1(a) -- With the exception of Cottey College, all other organizations share a mailing address of

3700 Grand Ave, Des Moines, IA 50312

SCHEDULE O (Form 990 or 990-EZ)

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

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

P.E.O. Sisterhood IN State Chapter	35-6074424	
Part VI, Lines 6-7b: The organization's members consist of the ac	ctive, dues-paying	
members of P.E.O. chapters within the state. Delegates from each		
annual state conventions where new officers are elected by the vo		
In addition, certain proposed amendments to the bylaws are preser		
Part VI, Line 11b: copies of the final Form 990 were provided to	each member of the	
executive board of Indiana State Chapter prior to filing. Board	members are asked to	
review the return and respond with any questions, though no forma	al review process is	
currently in place.		
Part VI, Line 12c: Conflict of Interest policies and signature pa	iges are distributed	
each year to all executive board members and to any committee members having influence		
over financial transactions. Signature pages are collected by th	e state president and	
monitored for completion. Any conflicts of interest that arise are to be reported		
immediately to the affected committee/board, and the remaining me	embers vote on the	
appropriate action.		
Part VI, Line 19: Governing documents, conflicts of interest poli	cy and financial	
statements are available to members upon request. These items ar	e not made available	
to the general public.		
Part XII, Line 2b: The organization's financial statements were a	udited by an	
independent accountant on a cash basis.		

Name of the organization	Employer identification number
P.E.O. Sisterhood IN State Chapter	35-6074424
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