-om 990

(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.

20**19** 

Open to Public Inspection

\ F	or th	e 2019 calendar year, or tax year beginning April 1, 2019	, and ending		ch 31		, <b>20</b> 20	
		C Name of organization			D Employer iden	itification n	umber	
5 C	heck if a	P.E.QSisterhood AR State Chapter						
	Addre	Doing business as			71-605	5533		
	1	Number and street (or P O box if mail is not delivered to street address)	Room/suite		E Telephone nur	nber		
	Initial	return 3700 Grand Ave		l	515 25	5 3153		
	Final	return/ City or town, state or province, country, and ZIP or foreign postal code	·				·	
_	Lermi Amer	nated Des Moines, IA 50312-2899			G Gross receipts	\$	538	,907
	returi Appli	cation F Name and address of principal officer	·		H(a) Is this a grou		Yes	X No
L	_ pendi	ing			subordinates? <b>H(b)</b> Are all aubordi		Yes	No
	Tau au	Marla Hunt - same as C above	or 527		• •	ach a list (sei		
		tempt status   501(c)(3)   X   501(c) ( 4 ) ◀ (Insert no )   4947(a)(1)	101   1327	<del>/ ;  </del>	H(c) Group exemp	-		
		of grounization   Corporation   Trust X Association   Other	Verset		on 1933 M s			
_	_		L rear of	iomatic	1933	state or lega	ai domicite	TH
٤٤	irt l	Summary			•			
	1	Briefly describe the organization's mission or most significant activities Women						
Governance		supporting six philanthropic projects for wome						
nar		loan and award programs and a women's college					_	
ve	2	Check this box  If the organization discontinued its operations or dispos	sed of more tha	ın 25% (	of its net assets	3		
ၓ	3	Number of voting members of the governing body (Part VI, line 1a)				3		5
≪ ∽	4	Number of independent voting members of the governing body (Part VI, line 1b)				4		5
Activities	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)				5		0
ţį	6	Total number of volunteers (estimate if necessary)	<b></b>			6		100
Ac	7a	Total unrelated business revenue from Part VIII, column (C), line 12				7a		
		Net unrelated business taxable income from Form 990-T, line 39			i i	7b		
$\neg$					Prior Year		Current Y	ear
	8	Contributions and grants (Part VIII, line 1h)			507,7	37	537	,951
Revenue	9	Program service revenue (Part VIII, line 2g)						
, e	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			7	03	•	956
2	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)						
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12).			508,4	40	538	,907
					304,2			,123
ŀ	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)			304,2	<del></del>	J2 1	1123
ļ	14	•				+		
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10),				_		
eü		Professional fundraising fees (Part IX, column (A), line 11e)				<del></del>		
Expenses		Total fundraising expenses (Part IX, column (D), line 25) ▶ 3465RECEIV				-		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	လ္က	<u> </u>	200,4			<u>, 648</u>
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)  Revenue less expenses Subtract line 18 from line 12	020 :   이	<b></b>	504,6	T T		<u>,771</u>
	19	Revenue less expenses Subtract line 18 from line 12			3,7			<u>,864</u>
S of		1	≅	Beginn	ing of Current Y		End of Yea	
alaı	20	Total assets (Part X, line 16)	·U·T···∤∣	<u> </u>	211,8	21	208	<u>, 957</u>
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)						
	22	Net assets or fund balances Subtract line 21 from line 20		l	211,8	21	208	<u>, 957</u>
	rt II	Signature Block						
Und	ler per	nalties of perjury, I declare that I have examined this return, including accompanying schedect, and complete. Declaration of preparer (other than officer) is based on all information of wh	dules and statem	nents, an s anv kno	nd to the best of owledge	my knowle	dge and b	elief, it is
	1	0 1 0 1	<del> </del>					
»:	_	Dana Vannoen	<u> </u>		8/5/2	2020		<del></del>
Sig	- 1	Signature of officer			Date			
ler	۱	Dana Van Roekel			Direc	ctor o	f Fina	nce
		Type or print name and title			·			
		Print/Type preparer's name Preparer's signature	Date		Check	ıf PTIN		
aid					self-employe	ed		
•	oarer Only	Firm's name			Firm's EIN			
, 3 <del>C</del>	Jilly	Firm's address ▶			Phone no			
Лау	the	IRS discuss this return with the preparer shown above? (see instructions	)		<u></u> .		Yes	No

Forn	n 990 (20	19)			Page 2
Pa	art III	Statement of Program Service	Accomplishments		
		Check if Schedule O contains a	response or note to any line in this Pa	art <u>III </u>	
1	Briefly	describe the organization's mission		<u> </u>	<del></del>
	P.E.C	). is a philanthropic o	organization where women	celebrate the advancement o	f
				, awards, loans and stewards	
				eve their highest aspiration	
	prior Fo		ricant program services during the y		s X No
3	Did the	organization cease conducting	or make significant changes in	how it conducts, any program	s X No
	If "Yes,"	describe these changes on Sched	ule O		
	expense		4) organizations are required to re	its three largest program services, as meport the amount of grants and allocations	
				324,123)(Revenue\$ d forwarding contributions t	
				he state and national levels	
		fic statistics are ava		ne State and National levels	, 110
	<u>speci</u>	ile statisties are ava	TIADIC.		
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					<del>-</del>
				····	
		· · · · · · · · · · · · · · · · · · ·			
				<del></del>	*****
					·
	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
					<del></del> •
		-			
_					
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)

464,409



Par	t IV Checklist of Required Schedules		-	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_		
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	_		
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	_	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	5	v	
c	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		X	
6	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? <i>If "Yes," complete Schedule D, Part II</i>	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			1
Ü	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	<u> </u>		
•	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	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		Х
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	1		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	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	446		
	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	420	17	
	Schedule D, Parts XI and XII	12a	_X	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If	12b		Х
42	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 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,			_^
	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		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		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		Х
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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 1? If "Yes," complete Schedule I, Parts I and II	21	X	

Part	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			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
04-	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			<u> </u>
24 a				
	\$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	1		
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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
L	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			<u> </u>
D			1	
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			١.,
	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			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
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			
	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		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
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			Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
30	conservation contributions? If "Yes," complete Schedule M	30		х
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
31		31		^
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	۱		
	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,			
	or IV, and Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	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		
26		555		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O	38	Χ	
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			$\Box$
			Yes	No
1 2	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		,	
JSA	reportable gaming (gambling) winnings to prize winners?	1c		<u> </u>
JSA 9F 1030	2 000	Form	コゴリ	(2019)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
J	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3 -	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	<u> </u>		
4 a		4a		х
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			- 21
D	If "Yes," enter the name of the foreign country   Consider the name of the name of the foreign country   Consider the name of the			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	5a		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		.,	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	۱.,	,,	
	gifts were not tax deductible?	6b	Х	
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	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			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f_		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	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			
11	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders			
_	Gross income from other sources (Do not net amounts due or paid to other sources	1		
U	against amounts due or received from them )			
12 -	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	· · · · · · · · · · · · · · · · · · ·	1.50		
L	Note: See the instructions for additional information the organization must report on Schedule O			
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	4.6-		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
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		_X_
	If "Yes," see instructions and file Form 4720, Schedule N			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16_		<u> X</u>
	If "Yes," complete Form 4720, Schedule O	L !	000	
		Form	990	(2019

Part VI

	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O			tions				
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	· · ·	X				
Sect	ion A. Governing Body and Management			1				
			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			1				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with							
	any other officer, director, trustee, or key employee?							
3	Did the organization delegate control over management duties customarily performed by or under the direct							
•	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		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_					
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					
ь	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	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	Χ					
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		Х				
Sect	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	)					
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a	X					
b								
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х					
11a		11a	X					
b								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х					
	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,"							
_	describe in Schedule O how this was done	12c	_X					
13	Did the organization have a written whistleblower policy?	13		Х				
14	Did the organization have a written document retention and destruction policy?	14	Х					
15	Did the process for determining compensation of the following persons include a review and approval by							
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official None	15a		_ X				
b	Other officers or key employees of the organization	15b		X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement							
	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						
Secti	on 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-T	(Sec	tion 5	01(c)				
	(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)							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o	finter	est p	olicy,				
	and financial statements available to the public during the tax year							
20	State the name, address, and telephone number of the person who possesses the organization's books and record	s ▶						
	Kathy A. Soppe, 3700 Grand Avenue, Des Moines, IA 50312 (515)255-3153							

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

Dana	,
raye	

Part VII	Compensation	n of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
	Independent (	Contr	actors								

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- 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.

X Check this box if neither the organization ne	or any related	orga	niza	ation	ı co	mpen	sate	ed any current offic	er, director, or tru	stee.
(A) Name and trtle	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or direct	unle er an	Pos heck ss pe	erson direct	e than control is both tor/trus. Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Marla Hunt	10									
President	İ	Х		Х				0	0	0
(2) Jessica Milam	5									
Vice President		X		Х				0	0	0
(3) Maysel Teeter	5									
Organizer		X		Х				0	0	0
(4) Stephanie Gunderman	5									
Treasurer		Х		Х				0	0	0
(5) Karen Dooley	5									
Secretary		X	<u> </u>	Х				0	0	0
(6)										
(7)										
(8)										
(9)										
(10)								,		
(11)										
(12)			ļ							
(13)										
(14)										

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	yee	s, a	ınd H	ligh	est Compensate	d Employ	ees (co	ontinue	d)	
(A) Name and title	(B) Average hours per week	box, office	(C) Position (do not check more than obox, unless person is both officer and a director/trust				an tee)	(D)  Reportable  compensation  from the	(E)  Reportable  compensation  from related		(F) Estimated amount of other compensation		
	(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		fre	om the	and
(15)				-									
(16)													
(17)													
(18)													
(19)									:				
(20)													
(21)													
(22)							-					_	
(23)												-	
(24)													
(25)							-				<del></del>		
1b Subtotal	Section A ot limited to		e li	sted			► ► who	o received more th	nan \$100,0	000 of			
reportable compensation from the organization	on ▶		- (	0								Yes	No
3 Did the organization list any former of employee on line 1a? If "Yes," complete Schei						-		-			3		Х
4 For any individual listed on line 1a, is the organization and related organizations g	sum of re	portal	ble	con	npei	nsatio	n a	and other compen	sation fron	n the			
<ul> <li>Individual</li></ul>	 r accrue co	 omper	nsat		 fror	n any	 y ur		 on or indi	 vidual	5		X X
Section B. Independent Contractors													
Complete this table for your five higher compensation from the organization Report													
(A) Name and business addr	ess							(B) Description of sen	vices	(	(C) Compens	ation	
None													
			_			_							
2 Total number of independent contractors		_							ve) who				

## Part VIII Statement of Revenue

		Check if Schedule O contains a respons	se or note to ar	y line in this Part \	/III	<u> </u>	
				(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				-	
Contributions. Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	211,421		:		
ΘĔ	С	Fundraising events 1c					
it it	d	Related organizations 1d					
დ <u>:</u>	e	Government grants (contributions) 1e			1 1	14 19 1 41	
Sign	f	All other contributions, gifts, grants,		I TOOLOGICAL TO THE TOTAL TO THE TOTAL TOT			
ie Eti		and similar amounts not included above . 1f	326,530				
풀	g	Noncash contributions included in					
<u>6</u> E		lines 1a-1f <u>1g</u>  \$		_ = N			
<u>—</u>	h	Total. Add lines 1a-1f		537,951			
d)		-	Business Code			· · · · · · · · · · · · · · · · · · ·	
<u>Š</u>	2a						
Ser	b						
E P	С						
Read	d					-	
Program Service Revenue	e f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	3	Investment income (including dividends,					
		other similar amounts)		956			956
	4	Income from investment of tax-exempt bond	proceeds . 🕨				
	5	Royalties					
		(ı) Real	(II) Personal				
	6a	Gross rents 6a					
	b	Less rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)	(ii) Other				
	7 a	Sisse diligani, ilani	(ii) Other				
		sales of assets other than inventory 7a					
a	ь	Less cost or other basis	=				
Revenue	~	and sales expenses 7b					
eve	С	Gain or (loss) 7c					
	d	Net gain or (loss)					
Other	8a	Gross income from fundraising					
0		events (not including \$					
		of contributions reported on line				•	
		1c) See Part IV, line 18 8a		*	, ,		,
	b	Less direct expenses					
	С	Net income or (loss) from fundraising events.				<del></del>	
	9,3	Gross income from gaming		, , , , , , , , , , , , , , , , , , ,	494 195 1 51 135 1 C 7	the thirt	
		activities. See Part IV, line 19 9a		. '' '		N.	
		Less direct expenses	<b>—</b>			<u> </u>	
	102	Net income or (loss) from gaming activities.  Gross sales of inventory, less		त्रकृषको स्थापक स्थापन विश्वतीतिक स्थापन स्थापन स्थापन	-		
·	10a	Gross sales of inventory, less returns and allowances , , , , , , , 10a		h ya maga haji sana <u>tah</u> asaa	nama na cama da mana mana da cama mana.	energen that propagation	10.0
	<b>b</b>	Less cost of goods sold		1 1 1000 1 100 1 101 100 7 1	* , M	A some and areas	
	c	Net income or (loss) from sales of inventory,	<u>.</u> . <b>&gt;</b>				
<u>s</u>			Business Code				
eor re	11a						
lan	b						
Miscellaneous Revenue	С					<del></del>	
Σis	d	All other revenue					
	e	Total. Add lines 11a-11d		500 005		<del></del>	05.5
	12	Total revenue. See instructions	<u> ▶</u>	538,907			956

## Part IX Statement of Functional Expenses

Check if Schedule O contains a response or note to any line in this Part IX  Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.  1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	(D) Fundraising expenses
and domestic governments See Part IV, line 21	
2 Grants and other assistance to domestic individuals See Part IV, line 22	<del></del>
individuals See Part IV, line 22	
organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.  4 Benefits paid to or for members	
individuals See Part IV, lines 15 and 16.  4 Benefits paid to or for members	
4 Benefits paid to or for members	
5 Compensation of current officers, directors, trustees, and key employees	
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)	
persons described in section 4958(c)(3)(B)	
7 Other salaries and wages	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits	·
section 401(k) and 403(b) employer contributions)  9 Other employee benefits	
<b>,</b> <del> </del>	
11 Fees for services (nonemployees)	
a Management	
b Legal	
c Accounting	
d Lobbying	
e Professional fundraising services See Part IV, line 17,	
f Investment management fees	
9 Other (If line 11g amount exceeds 10% of line 25, column	
(A) amount, list line 11g expenses on Schedule O)	<del></del>
12 Advertising and promotion	<del></del>
13 Office expenses	2 005
14 Information technology	2,905
15 Royalties	
16 Occupancy       75,384       25,128       50,256	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	
19 Conferences, conventions, and meetings	560
20 Interest	
21 Payments to affiliates	
22 Depreciation, depletion, and amortization	
<b>23</b> Insurance	
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)	
a Operating Expenses 3,532 1,177 2,355	
b	
c	
d	
e All other expenses	
25 Total functional expenses. Add lines 1 through 24e 541,771 464,409 73,897	3,465
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	

Part X Balance Sheet

_	_	Check if Schedule O contains a response or note to any line in this Pa	art X	<u>.</u>	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	211,821	2	208,957
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	·····	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	· <del></del>	5	
	6	Loans and other receivables from other disqualified persons (as defined			-
		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	
×	9	Prepaid expenses and deferred charges		9	. <del></del> , ,
	10 a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation		10c	
	11	Investments - publicly traded securities		_11	
	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	<del></del>	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	211,821	16	208,957
	17	Accounts payable and accrued expenses		_17	
	18	Grants payable		18	<del></del>
	19	Deferred revenue,		_19	
	20	Tax-exempt bond liabilities		_20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabil ties		trustee, key employee, creator or founder, substantial contributor, or 35%	1 11		to be design to the
jap		controlled entity or family member of any of these persons		22	· -
_	23	Secured mortgages and notes payable to unrelated third parties		23	· · <del>- · · · · · · · · · · · · · · · · ·</del>
	24	Unsecured notes and loans payable to unrelated third parties	<del></del>	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			
	0.0	of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	<u> </u>	_26	<u> </u>
ses		Organizations that follow FASB ASC 958, check here ► and complete lines 27, 28, 32, and 33.			
aŭ	27	Net assets without donor restrictions		27	
Ba	28	Net assets with donor restrictions		28	
Б	20	Organizations that do not follow FASB ASC 958, check here ► X		_20	<del></del>
<b>Assets or Fund Balances</b>		and complete lines 29 through 33.			
Ş	29	Capital stock or trust principal, or current funds		29	
se	30	Paid-in or capital surplus, or land, building, or equipment fund		_30	
As		Retained earnings, endowment, accumulated income, or other funds	211,821	31	208,957
Net	32	Total net assets or fund balances	211,821		208,957
<u>-</u>	33	Total liabilities and net assets/fund balances	211,821	33	208, 957

Page **12** 

01111 0	(2010)				3
art					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		538,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>541,</u>	
3	Revenue less expenses Subtract line 2 from line 1	3	_	<u>-2,</u>	864
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		211,	821
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 on Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		208,	957
art	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_  .		}
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın	ın		
	Schedule O				ļ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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	<u></u>
-	If "Yes," check a box below to indicate whether the financial statements for the year were audite			}	
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis		ľ		
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	sight	of	1	
·	the audit, review, or compilation of its financial statements and selection of an independent accountar		1 -	<u> </u>	X
	If the organization changed either its oversight process or selection process during the tax year, ex			1	
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fort	h in th	ne		
Ju	Single Audit Act and OMB Circular A-133?		3a	1	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	ergo tl	ne [		
~	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	dits .	3b		<u> </u>
			Form	990	(2019)

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

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► Complete if the organization is described below.

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

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

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- 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), ther								
	Section 501(c)(4), (5), or (6) organizations								
	e of organization			' -					
	P.E.O. Sisterhood AR State Chapter 71-6055533  art I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.								
-									
1	•	organization's direct and indirect	t political campaign a	activities in Part IV (see ii	istructions for				
_	definition of "political campa			▶ 6					
		xpenditures (see instructions)							
3		campaign activities (see instructorganization is exempt unde							
		cise tax incurred by the organiza			<del></del>				
1		cise tax incurred by the organization							
2	•	a section 4955 tax, did it file For	_						
3	•								
	If "Yes," describe in Part IV				165140				
	t I-C Complete if the c	organization is exempt unde	er section 501(c), e	except section 501(c)(3	3)_				
		xpended by the filing organizati			····				
1									
•		g organization's funds contribute			<del></del>				
2		es							
3		enditures Add lines 1 and 2 E							
J									
4		Form 1120-POL for this year?			Yes No				
5	Enter the names, addresses	and employer identification nur	nber (EIN) of all sect	ion 527 political organiz	ations to which the filing				
	organization made payment	s For each organization listed,	enter the amount pa	id from the filing organiz	zation's funds. Also enter				
		ributions received that were prond or a political action committee							
		·			1				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political 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)			$\dashv$						
(5)			_						
(6)			$\dashv$						

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

Schedule C (Form 990 or 990-EZ) 2019

2011	edule C (FORM 990 of 990-EZ) 2019						Page ∠
Pa	ort II-A Complete if the orga section 501(h)).	nizati	on is exer	npt under sectio	n 501(c)(3) and	filed Form 5768 (ele	
A	Check ▶ if the filing organizate address, EIN, experi					ach affiliated group mem	ber's name,
В	Check ▶ if the filing organization	tion ch	ecked box	A and "limited contr	ol" provisions app	oly	
			ying Expen			(a) Filing	(b) Affiliated
	(The term "expenditur	es" me	eans amou	nts paid or incurred	1.)	organization's totals	group totals
1a	Total lobbying expenditures to infl	luence	public opin	ion (grassroots lobb	oying)		
b	Total lobbying expenditures to infi	luence	a legislativ	e body (direct lobby	ring)		
С	Total lobbying expenditures (add	lines 1	a and 1b) .				
	Other exempt purpose expenditur						
	Total exempt purpose expenditure						
f	Lobbying nontaxable amount E	nter th	e amount	from the following	table in both		
	columns						
	If the amount on line 1e, column (a) o	or (b) is:			is:		
	Not over \$500,000			amount on line 1e			
	Over \$500,000 but not over \$1,000,0			lus 15% of the excess			
	Over \$1,000,000 but not over \$1,500			lus 10% of the excess			
	Over \$1,500,000 but not over \$17,00	0,000		lus 5% of the excess	over \$1,500,000		
	Over \$17,000,000		\$1,000,000				
_	Grassroots nontaxable amount (e				_		
	Subtract line 1g from line 1a If ze						<del></del>
	Subtract line 1f from line 1c If ze	ro or le:	ss, enter -U-			han file Farm 4700	
J	If there is an amount other than						□v □N-
	reporting section 4911 tax for this			raging Period Unde		· · · · · · · · · · · · · · · · · · ·	Yes No
	(Some organizations that r			• •	• •	ate all of the five colum	ne helow
	(Some organizations that i			te instructions for			ins below.
_		Lobb	ying Expe	nditures During 4-Y	ear Averaging Pe	riod	
	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						
e	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Pa	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	For	m 576	8	-	
Eor	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a	)		(b)		
		Yes	No		Amo	ınt	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local						
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of						
а	Volunteers?			ł			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
С	Media advertisements?						
d	Mailings to members, legislators, or the public?						
е	Publications, or published or broadcast statements?			<u> </u>			
f	Grants to other organizations for lobbying purposes?			<u> </u>			
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			<del></del>			
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			ł			
þ	If "Yes," enter the amount of any tax incurred under section 4912			<del></del>			
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					_	
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	)(5),	or s	ection	)		
	501(c)(6).						_
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1	X	<u> </u>
2	Did the organization make only in house lobbying expenditures of \$2,000 or loos				2	Χ	ļ
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from				3		Х
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)						
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes."	R (b	) Pai	t III-A,	line 3	5, IS	_
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amoun	ts c	of				
	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
С	Total			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		٠. ١	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	of th	e				
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lob	byın	g	.			
	and political expenditure next year?			4			
5	Taxable amount of lobbying and political expenditures (see instructions)	<u></u>	<u>.</u>	5			
	t IV Supplemental Information						
	ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated	grou	p list	), Part	II-A, lır	ies 1	and
2 (s	e instructions), and Part II-B, line 1 Also, complete this part for any additional information						
	<del></del>		_				

Schedule	a C (Form 990 or 990-EZ) 2019	Page 4
Part	V Supplemental Information (continued)	
		_
		<del></del>
		<del></del>

## **SCHEDULE D** (Form 990)

Supplemental Financial Statements

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

► 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 Name of the organization

Inspection

	o or the organization	Employer identification fightper
	E.O. Sisterhood AR State Chapter	71-6055533
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	ccounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in	donor advised
	funds are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fund	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any	other purpose
	conferring impermissible private benefit?	Yes No_
Pa	art II Conservation Easements.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
		a historically important land area
		a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the	
	easement on the last day of the tax year	Held at the End of the Tax Year
а		a
b	Total delegge restricted 2, conservation decomposite ( , , , , , , , , , , , , , , , , , ,	<u>b</u>
С	Training of control of a contro	С
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
		<u>d  </u>
3	Number of conservation easements modified, transferred, released, extinguished, or termina	ted by the organization during the
	tax year	
4	Number of states where property subject to conservation easement is located >	
5	Does the organization have a written policy regarding the periodic monitoring, inspection	
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing con	nservation easements during the year
-	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing cons	correction agreements during the year
7		servationeasements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	170(b)(4)(B)(i)
0	and section 170(h)(4)(R)(u)2	Voc No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and ex	
3	balance sheet, and include, if applicable, the text of the footnote to the organization's financial	
	organization's accounting for conservation easements	
Pa	organizations Maintaining Collections of Art, Historical Treasures, or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue s	tatement 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 thes	
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue state art, historical treasures, or other similar assets held for public exhibition, education, or resear	
	provide the following amounts relating to these items	on in furtherance of public service,
	(i) Revenue included on Form 990, Part VIII, line 1	<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar ass	
_	following amounts required to be reported under FASB ASC 958 relating to these items	3 m, F = 111 m
а	Revenue included on Form 990, Part VIII, line 1	<b>&gt;</b> \$
b	Assets included in Form 990, Part X	<b>&gt;</b> \$

Pa	rt    Organizations Maintain												
3	Using the organization's acquisition	on, acces	sion, and	other reco	rds, chec	k any c	of the	follov	ving that	make sigi	nificant u	se of	fits
	collection items (check all that app	ly)								·			
а	Public exhibition			d [	Loan	or exch	ange	progra	m				
b	Scholarly research			e									
С	Preservation for future gene	rations		L						-	<del></del>		—
4	Provide a description of the organ		collections	s and expl	ain how	they fu	rther	the or	ganization	n's exemn	t nurnose	ו מו ב	Part
•	XIII		001100110111	o and oxp.					944	.o oxomp	, pu.posc	, ,,,	· arc
5	During the year, did the organization	n soliciti	or receive	donations d	of art hiet	orical tr	reacii	ree or	other sim	ılar			
•	assets to be sold to raise funds rath									_	Yes		No
Da	rt IV Escrow and Custodial A			airied as pe	art or the	organiz	ation	3 COIIE	CHOIT	• • • • •	163		140
_ r a	Complete if the organization of the complete if the organization of the complete in the comple			es" on For	m 990, F	Part IV,	line	9, or r	eported a	an amou	nt on For	m	
			dian ar ath		lioni for a	o ntribi	<u>.</u>	ar atha			<del></del>		
ıa	Is the organization an agent, truste												١
•	included on Form 990, Part X?	 - D VII								L	Yes	Ш	No
b	If "Yes," explain the arrangement i	n Part XII	ii and com	piete the to	llowing tai	bie				A			
										Amount			
C	Beginning balance						$\overline{}$				<del></del>		
d	Additions during the year												
е	Distributions during the year												
f	Ending balance							L <u></u>	<del></del>			7	<del></del> -
2a	Did the organization include an am										Yes		No
	If "Yes," explain the arrangement i	n Part XII	II Check h	ere if the e	xplanation	has be	en pr	ovided	on Part XI	<del>II <u>, .</u></del>	<u></u>	<u> </u>	Щ_
Pa	rt V Endowment Funds.		1.45.7		000 [	54 N 4		40					
	Complete if the organiza												
		(a) Cui	rrent year	(b) Prio	r year	(c) Tw	o year	s back	(d) Three	years back	(e) Four y	ears b	ack
1 a	Beginning of year balance		·										
b	Contributions												
С	Net investment earnings, gains,												
	and losses						_						
d	Grants or scholarships					<b> </b>							
е	Other expenditures for facilities												
	and programs												
f	Administrative expenses												
g	End of year balance												
2	Provide the estimated percentage	of the cu	rrent year	end balanc	e (line 1g,	column	ı (a))	held as	i				
а	Board designated or quasi-endown		<u> </u>	_%	_								
b	Permanent endowment ▶	%											
С	Term endowment ▶	%											
	The percentages on lines 2a, 2b, a	and 2c sh	ould equal	100%									
3a	Are there endowment funds not in	the posse	ession of tl	he organiza	ition that	are hel	d and	d admir	nistered fo	r the	_		
	organization by										Y	es	No
	(i) Unrelated organizations										3a(i)		
	(ii) Related organizations										3a(ii)		
b	If "Yes" on line 3a(ii), are the relate	ed organi	zations liste	ed as require	ed on Sch	edule R	?				3b		
4	Describe in Part XIII the intended u			tion's endo	wment fui	nds							
Pa	rt VI Land, Buildings, and Equ	ıipment.			000	n 1 N (		44		000 0		40	
	Complete if the organization of property	ation ans											
	Description of property	1		r other basis itment)	(b) Cost (	or other ba ther)	asis		cumulated eciation	(0	) Book valu	B	
1 a	Land												
b	Buildings	1											
С	Leasehold improvements	r	<del> </del>						1 <u></u>				
d	Equipment	t								T			
	Other	ì	·										
	I. Add lines 1a through 1e (Column		equal Forr	n 990, Part	X, columi	n (B), lırı	ne 10	c)					
_													

			, Part IV, line 11b See Form 990, Part X, line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financia	al derivatives		
	held equity interests		
Other			
(A)			
(B)			
(C)	<del></del>		
(D)		<u> </u>	
(E)			
(F)			
(G)			<u> </u>
(H)			<del></del>
	(b) must equal Form 990, Part X, col. (D) line 12.)		<u></u>
rt VIII		L"Voo" on Form 000	Part IV line 11e See Form 000 Part V line 13
			, Part IV, line 11c See Form 990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		<u>.                                      </u>	Cook of old of your market value
		***************************************	
	-	<del> </del>	
<del></del> .			
L (Column	(b) must equal Form 990, Part X, col (B) line 13) .		
art IX	Other Assets.		<u> </u>
		"Yes" on Form 990	, Part IV, line 11d See Form 990, Part X, line 15
		scription	(b) Book valu
)		<u> </u>	
		<del></del>	
		· <del></del>	
al. (Colu	mn (b) must equal Form 990, Part X, col (B) li	ne 15)	
rt X	Other Liabilities.		
	Complete if the organization answered line 25	"Yes" on Form 990	, Part IV, line 11e or 11f See Form 990, Part X,
	(a) Descrip	tion of liability	(b) Book valu
Federa	al income taxes		
	· · · · · · · · · · · · · · · · · · ·		
			<del></del>
I. (Columi	n (b) must equal Form 990, Part X, col (B) line 25)		

Part 2	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	n.	
1	Total revenue, gains, and other support per audited financial statements	1	538,907
	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		
	Recoveries of prior year grants		
	Other (Describe in Part XIII )		
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	538,907
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
	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	538,907
Part 2	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	rn.	
1	Total expenses and losses per audited financial statements	1	541,771
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII )		
е	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	541,771
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )		
С	Add lines 4a and 4b	4c	
_ 5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	541,771
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, F XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
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Schedule D (F	orm 990) 2019	Page <b>5</b>
Part XIII	orm 990) 2019 Supplemental Information (continued)	
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SCHEDULE (Form 990) Department of the Treasury

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	2019	Open to Public
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Employer identification number

71-6055533

Internal Revenue Service  Name of the organization  P.E.O. Sisterhood AR State Chapter  Part General Information on Grants and Assistance  1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility and the grantees' eligibility and the grants or assistance, the grantees' eligibility and the grants or assistance and the grantees' eligibility and the grantees' eligibility and the grant
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Š Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, X ty for the grants or assistance, and Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States the selection criteria used to award the grants or assistance? . . 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)	64,245	0			Gen Supp/Schol
(2) P.E.O. Educational Loan Fund							
Des Moines, IA 50312	426078059	501 (c) (3)	24,463	0			Educ Loans
(3) P.E.O. Int'l Peace Scholarship							
Des Moines, IA 50312	426078058	501(c)(3)	36,961	0			Scholarships
(4) P.E.O. Program for Contin Educ							
Des Moines, IA 50312	237405311	501(c)(3)	50,789	0			Educ Grants
(5) P.E.O. Scholar Awards							
Des Moines, IA 50312	421379026	501(c)(3)	35,338	0			Educ Awards
(6) P.E.O. STAR Scholarship							
Des Moines, IA 50312	300583651	501(c)(3)	42,335	0			Scholarships
(7) P.E.O. Foundation	:						
Des Moines, IA 50312	426094564	501(c)(3)	39,432	0			Schol/Grants
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government org	government (	organizations lis	janizations listed in the line 1 table.	ole		<b>▲</b> :: :: :: ::	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)

9E1288 1 000

Schedule I (I	Schedule I (Form 990) (2019)
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

	r alt ill call be duplicated il additional space is needed	عامرد اع الحدا	יבת			
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Scho	1 Scholarships to Cottev College	7	30,560	0	0 N/A	N/A
2						
en en						
4						
- 2						
မှ						
^						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	the informati	on required in P	art I, line 2, Part	II, 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.

2019
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Employer identification number

71-6055533 P.E.O. Sisterhood AR State Chapter Part VI, Lines 6-7b: The organization's members consist of the active, dues-paying members of P.E.O. chapters within the state. Delegates from each chapter attend annual state conventions where new officers are elected by the voting members present. In addition, certain proposed amendments to the bylaws are presented and voted upon. Part VI, Line 11b: copies of the final Form 990 were provided to each member of the executive board of Arkansas State Chapter prior to filing. Board members are asked to review the return and respond with any questions, though no formal review process is currently in place. Part VI. Line 12c: Conflict of Interest policies and signature pages are distributed each year to all executive board members and to any committee members having influence over financial transactions. Signature pages are collected by the state president and monitored for completion. Any conflicts of interest that arise are to be reported immediately to the affected committee/board, and the remaining members vote on the appropriate action. Part VI, Line 19: Governing documents, conflicts of interest policy and financial statements are available to members upon request. These items are not made available to the general public. Part XII, Line 2b: The organization's financial statements were audited by an independent accountant on a cash basis.

Schedule O (Form 990 or 990-EZ) (2019)		Page 4
Name of the organization	Employer identification number	
P.E.O. Sisterhood AR State Chapter	71-6055533	
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