(Rev January 2020)

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax 29493 18404314

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

	A For the	2019 calendar year, or tax year beginning April 1 , 2019, a	ind ending [March 31	, 20 20
		C Name of organization		D Employer Identificat	
	B Check if a				
	Addre	Doing husiness as		59-620144	1
N	chang		Room/suite	E Telephone number	
U_{λ}	, Initial			E16 266 2	152
	Final			515 255 33	133
	termu Amen	ated	,	G Gross receipts \$	1 015 202
સં	return Applic		- [,-	H(a) Is this a group return	1,015,283
	pendi	9	14	subordinates?	
MAR	I Tay av	Fran Hunt - same as C above	-1 126-	H(b) Are all subordinates and	uded? Yes No it (see instructions)
		empt status 501(c)(3) X 501(c)(4) (insert no) 4947(a)(1) o	- J Chaki		•
,		www.pooriicoriidcrondrorg	11. 11	H(c) Group exemption nu	
WELOPE MARON DA	N Form	f organization Corporation Trust X Association Other ▶	L Year of for	mation 1927 M State of	r legal domicile IA
	Part	Summary	<u> </u>		···
	_	Briefly describe the organization's mission or most significant activities Women'			
	2 2	supporting six philanthropic projects for women			
	ernance	loan and award programs and a women's college of			on.
	≥ -	Check this box If the organization discontinued its operations or disposed		1 1	_
	_ # i	Number of voting members of the governing body (Part VI, line 1a)			5
	φ 4	Number of independent voting members of the governing body (Part VI, line 1b).			5
202		Total number of individuals employed in calendar year 2019 (Part V, line 2a)			3
		Total number of volunteers (estimate if necessary)			100
4	/I I	Total unrelated business revenue from Part VIII, column (C), line 12	· · · · · · · ·		
0	√/ b	Net unrelated business taxable income from Form 990-T, line 39	DDFC :		
งบุง	W	RECEIVED IN CO		Prior Year	Current Year
~~`		Contributions and grants (Part VIII, line 1h) IRS - OSC - 1		1,053,756	1,015,155
~)		Program service revenue (Part VIII, line 2g)	2t · · · ·		
9/	\\$ \10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-1	194	128
\mathcal{I}	72 11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
<u> </u>	12	Total revenue - add lines 8 through 11 (must equal Part VIII, colum ் (ஆ) flipe 12) ர் A	H	1,053,950	1,015,283
L	V // 13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		737,211	780,188
10	2/ 14	Benefits paid to or for members (Part IX, column (A), line 4)	· · · · · <u> </u> _		
(M	Jg 15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10),		20,702	24,220
S	2 16a	Professional fundraising fees (Part IX, column (A), line 11e)			
_	ە كۆپ	Total fundraising expenses (Part IX, column (D), line 25) ▶ 528			
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		367,882	239,100
	2 18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,125,795	1,043,508
,6/	19	Revenue less expenses Subtract line 18 from line 12		-71,845	-28,225
7	19 10 see 20		Be	eginning of Current Year	End of Year
	를 20	Total assets (Part X, line 16)		381,253	353,028
\cdot , \sim	l ≪≝ 21	Total liabilities (Part X, line 26)			
d'	1 2 C I	Net assets or fund balances Subtract line 21 from line 20		381,253	353,028
	Part II	Signature Block			
Dac	Inder per	alties of perjury, I declare that I have examined this return, including accompanying schedul ct, and complete. Declaration of preparer (other than officer) is based on all information of whic	es and statemen	ts, and to the best of my ki	nowledge and belief, it is
$\stackrel{\sim}{\sim}$	true, corre		ii preparer nas ar	iy kilowledge	
17	0) ana Vankoch		8/5/2020)
00	Sign	Signature of officer		Date	
91	Here	Dana Van Roekel		Director	of Finance
1833	'	Type or print name and title			
17,		Print/Type preparer's name Preparer's signature	Date	Check if P	ΠN
10%	Paid			self-employed	
{ }	Preparer Use Only	Firm's name		Firm's EIN	
\sim	use Uniy	Firm's address >		Phone no	
	May the	RS discuss this return with the preparer shown above? (see instructions)	. <u> </u>		Yes No
	For Page	work Reduction Act Notice, see the separate instructions.			Form 990 (2019)

Form 990 (2019)

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Form 9	90 (2019)		Р	age 3
Part	IV Checklist of Required Schedules			
	•		Yes	No
٠ 1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		- 1	
	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 Schedulc 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	_X_	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		v
-	"Yes," complete Schedule D, Part I	l o		X
7		7		Х
0	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	\vdash		
8	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	۳		
9	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or		1	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Χ_
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,		2	
• •	VII, VIII, IX, or X as applicable			3
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
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			ĺ
	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		Х
е	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			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	Schedule D, Parts XI and XII	12a	Х	
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If	l		
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			1
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		l .
45	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		X
15	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	<u> </u>		
10	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			<u></u> -
. •	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	x
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
	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			1
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	<u> </u>

Part	Checklist of Required Schedules (continued)			
	Delthe array also words at the OS 000 feet at the Color of the Color o		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	- 1	х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		$\neg \neg$	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
		24a		Х
b		24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	, , , , , , , , , , , , , , , , , , ,	25a		<u> X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		<u>X</u>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current		1	
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		v
27	controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	20		<u>X</u>
21	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	ĺ	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		X
	• • • • • • • • • • • • • • • • • • • •	28b		<u>X</u>
C	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		<u> </u>
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			
24	conservation contributions? If "Yes," complete Schedule M	30		<u>X</u>
31 32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		_X_
32	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		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	20	,	
Pari	19? Note: All Form 990 filers are required to complete Schedule O V Statements Regarding Other IRS Filings and Tax Compliance	38	X	<u> </u>
HELL.	Check if Schedule O contains a response or note to any line in this Part V			
	One of the oriented of contains a response of note to any line in this rait v	· · ·	Yes	No
1a	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	1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	_X	<u></u>

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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 3									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?									
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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?									
	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)			l						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х						
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X						
	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							
ь	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		'							
_	and services provided to the payor?	7a								
ь	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								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h								
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		<u> </u>						
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>						
10	Section 501(c)(7) organizations. Enter									
a	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									
11	Section 501(c)(12) organizations. Enter									
a	Gross income from members or shareholders			}						
b	Gross income from other sources (Do not net amounts due or paid to other sources									
	against amounts due or received from them)									
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>						
	Note: See the instructions for additional information the organization must report on Schedule O									
b	Enter the amount of reserves the organization is required to maintain by the states in which	}		}						
	the organization is licensed to issue qualified health plans									
	Enter the amount of reserves on hand	<u> </u>		 						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	_	X						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation 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		X						
	If "Yes," complete Form 4720, Schedule O.	L	L	Щ_						

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 thr response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes of the control of t				
	Check if Schedule O contains a response or note to any line in this Part VI				X
Sect	ion A. Governing Body and Management			-	
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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	1a 5		,	
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 rel	ationship with			
	any other officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or ur	der the direct			ı
	supervision of officers, directors, trustees, or key employees to a management company or other p		3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was fi	ed?	4		<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's	assets?	5		<u>X</u>
6	Did the organization have members or stockholders?		6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to el	ect or appoint			
	one or more members of the governing body?		7a	<u>X</u>	
b	Are any governance decisions of the organization reserved to (or subject to approval	by) members,			
	stockholders, or persons other than the governing body?		7b	X	
8	Did the organization contemporaneously document the meetings held or written actions under	ertaken during		, .	
	the year by the following				
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	Х	
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	<u> </u>	<u> </u>
Secti	on B. Policies (This Section B requests information about policies not required by the Inte	ernai Revenue	Coae	Yes	No
			40-		"
10a	Did the organization have local chapters, branches, or affiliates?		10a	<u> X</u>	
b	If "Yes," did the organization have written policies and procedures governing the activities of		10b	v	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt p		11a	X	_
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fi	ling the form?.	ı ı a		-
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		12a	Х	1
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		120		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests	that could give	12b	х	
	rise to conflicts?				
С	Did the organization regularly and consistently monitor and enforce compliance with the p		12c	Х	
4.0	describe in Schedule O how this was done		13	43	X
13	Did the organization have a written whistleblower policy?		14	х	<u> </u>
14	Did the organization have a written document retention and destruction policy?			- ^` -	
15	Did the process for determining compensation of the following persons include a review as independent persons, comparability data, and contemporaneous substantiation of the deliberation				
_	The organization's CEO, Executive Director, or top management official Non-		15a		x
a	Other officers or key employees of the organization		15b		X
b	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				
16.	Did the organization invest in, contribute assets to, or participate in a joint venture or similar	r arrangement		ŀ	
104	with a taxable entity during the year?		16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization				
J	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	safeguard the	16b		
Sect	ion C. Disclosure	<u> </u>		<u></u>	
	List the states with which a copy of this Form 990 is required to be filed ▶ None				
17 18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable)	990 and 990-	[(Sec	tion F	501(6)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that approximately on the control of the control	ply hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing docur and financial statements available to the public during the tax year.			iest ļ	ouicy,
20	State the name, address, and telephone number of the person who possesses the organization's	books and record	is ►		
	Kathy A. Soppe, 3700 Grand Avenue, Des Moines, IA 50312 (515	1233-3153			

orm	990	(2019)	

	. 7
Page	3 <i>1</i>

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

Check if Schedule O contains a response or note to any line in this Part	rt VII	

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										itee													
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (do not check more than one box, unless person is both an officer and a director/trustee) (Officer and a director/trustee) Officer individual trustee or director		Position (do not check more than one box, unless person is both an officer and a director/trustee)			Position (do not check more than one box, unless person is both an officer and a director/trustee)			Position (do not check more than one box, unless person is both an officer and a director/trustee)			Position (do not check more than one box, unless person is both an officer and a director/trustee)			Position (do not check more than one box, unless person is both an officer and a director/trustee)			Position (do not check more than one box, unless person is both an officer and a director/trustee)		(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) Fran Hunt	20																						
President	120	х		х				o	0	0													
(2) Karen Kline	20	<u> </u>							· · · · · · · · · · · · · · · · · · ·	-													
Vice President	-	x		х				0	0	0													
(3) Carolyn Walker	20																						
Organizer		Х		x				0	0	0													
(4) Janet Brown	20																						
Treasurer		X	Ì	Х				0	0	0													
(5) Nancy Wertz	20																						
Secretary		x		х				0	0	0													
(6)																							
(7)																							
(8)					-																		
(9)																							
(10)																							
(11)																							
(12)	_	-																					
(13)																							
(14)				T																			

Part VII Section A. Officers, Directors, Trus	stees, Key	/ Emj	oloy	/ee	s, a	nd Hi	igh	est Compensate	d Employe	ees (co	ntinued)
` (A) Name and title	(B) Average hours per week	/erage box, unless person is bot officer and a director/tru			is both or/truste	en ee)	(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)	organizati (W-2/1099-		organi	m the zation and rganizations
(15)			-							-		
(16)												
(17)											_	
(18)												
(19)												
(20)					-							
(21)												
(22)										_		
(23)									-		ı	
(24)					-		-					
(25)						-						
Subtotal	Section A ot limited t	 <u></u>	se l	 .ste	 		▶		han \$100,0	000 of		
	-			0			•					Yes No
3 Did the organization list any former of employee on line 1a? If "Yes," complete Sche											3	x
4 For any individual listed on line 1a, is the organization and related organizations g	reater tha	n \$1	50,6	000	17	lf "Ye	s, "	complete Sched			4	x
 Individual	r accrue c	ompe	nsa	tion	fro	m an	y u	ınrelated organızat			5	x
Section B. Independent Contractors												
1 Complete this table for your five high compensation from the organization Report	est compe t compens	ensate ation	ed for	inde the	epe ca	ndent lendar	ye ye	ontractors that re ear ending with or	eceived m within the	ore the	an \$10 zation's	00,000 of tax year
(A) Name and business add	ress							(B) Description of se	rvices		(C) Compens	ation
None							+					
							$oldsymbol{\perp}$					
Total number of independent contractor received more than \$100,000 of compensate							to	those listed abo	ove) who	1	į	,

			. ——	-			
	990 (2						Page 9
Par	t VIII						
		Check if Schedule O contains a respon	nse or note to an				
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ध ध	1a	Federated campaigns 1a					
E a	ь	Membership dues 1b	283,233	•			
ع ق	c	Fundraising events 1c					
Z Z	d	Related organizations 1d			*		
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions) 1e					
Sin	f	All other contributions, gifts, grants,					
er i	•	and similar amounts not included above . 1f	731,922				
اغَجَا	g	Noncash contributions included in					
달		lines 1a-1f 1g	s				
မှ င	h	Total. Add lines 1a-1f		1,015,155			
			Business Code	*	, , , , , , ,		
93	2a						
ه چَ	b						
Program Service Revenue	c						
ame	d						
Ŗ							
Pro	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	3	Investment income (including dividends,					
		other similar amounts)		128			128
	4	Income from investment of tax-exempt bond					<u> </u>
	5	Royalties		<u> </u>			`
		(ı) Real	(II) Personal				
	6a	Gross rents 6a					
	ь	Less rental expenses 6b					1
	С	Rental income or (loss) 6c		1			
	d	Net rental income or (loss)	▶				
	7a	Gross amount from (i) Securities	(II) Other				,
		sales of assets	ĺ			•	
		other than inventory 7a					
ne	b	Less cost or other basis					
en]	and sales expenses 7b					1
Şe	С	Gain or (loss) 7c					
-	ď	Net gain or (loss)	<u> ▶</u>				
Other Revenue	8a	Gross income from fundraising					
O	1	events (not including \$		1			
	1	of contributions reported on line			į		1.
		1c) See Part IV, line 18 8a	_		ŀ		
	b	Less direct expenses					
	C	Net income or (loss) from fundraising events	<u>s ▶</u>				
	9a	Gross income from gaming	1		,		

	rt IX Statement of Functional Expenses		A II = 4b = = = = :		(4)
sec	tion 501(c)(3) and 501(c)(4) organizations mus				
	· Check if Schedule O contains a resp				
	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	720,188	720,188		
2	Grants and other assistance to domestic				•
	individuals See Part IV, line 22	60,000	60,000	· ,	
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16			-	į.
4	Benefits paid to or for members				·
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above to disqualified				
-	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	22,391	7,464	14,927	
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,829	610	1,219	
11	Fees for services (nonemployees)				
а	Management				
b	Legal				
C	Accounting	1,600		1,600	
	Lobbying				
	Professional fundraising services See Part IV, line 17.				· · · · · · · · · · · · · · · · · · ·
	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
4.0	(A) amount, list line 11g expenses on Schedule O)				
	Advertising and promotion	· · · · · · · · · · · · · · · · · · ·			
	Office expenses	528			528
	Royalties	320			320
	Occupancy		· 		····
	Travel				
	Payments of travel or entertainment expenses		-		
	for any federal, state, or local public officials	1	-		
19	Conferences, conventions, and meetings	44,448	14,816	29,632	
	Interest				
	Payments to affiliates	167,732	167,732		
	Depreciation, depletion, and amortization				
	Insurance	1,280		1,280	
	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e if	,			
	line 24e amount exceeds 10% of line 25, column		ļ		
	(A) amount, list line 24e expenses on Schedule O)				
	Operating Expenses	6,862	2,287	4,575	
b	Board/Committee Expense	16,650	5,550	11,100	
d					
	All other expenses	1 042 500	070 647	64 222	
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	1,043,508	978,647	64,333	528
-0	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)	i			

Form 990 (2019) Part X Balance Sheet

	,	Check if Schedule O contains a response or note to any line in this Pa	art X	. .	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	161,327	1	195,598
	2	Savings and temporary cash investments	219,926	2	157,430
	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		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	
	10a	Land, buildings, and equipment cost or other			1 + 1, 1
		basis Complete Part VI of Schedule D 10a	•		* **
	ь	Less accumulated depreciation 10b		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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	381,253	16	353,028
	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	
S	22	Loans and other payables to any current or former officer, director,	₹ . ,		
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%	• 4		ı
jabi		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	
sec		Organizations that follow FASB ASC 958, check here ▶ and complete lines 27, 28, 32, and 33.	, t. 1,		
alar	27	Net assets without donor restrictions		27	
88	28	Net assets with donor restrictions		28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ► X and complete lines 29 through 33.	e e e e e e e e e e e e e e e e e e e		,
ō	29	Capital stock or trust principal, or current funds	• •	29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds	381,253	31	353,028
et ,	32	Total net assets or fund balances	381,253	32	353,028
Z	33	Total liabilities and net assets/fund balances	381,253		353,028
					E 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 015.283 . 1 2 1,043,508 2 -28,2253 Revenue less expenses Subtract line 2 from line 1........... 3 4 381,253 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 5 5 6 6 7 7 8 8 9 9 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 10 10 353,028 **Financial Statements and Reporting** Part XII Х Yes Other Accounting method used to prepare the Form 990 | X | Cash Accrual 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 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 Consolidated basis Both consolidated and separate basis Separate basis 2b 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 2c 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

За

Form 990 (2019)

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

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

Department of the Treasury

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No 1545-0047

► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service 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-B

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 Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III				
Nam	e of organization			Employer idea	ntification number	
Ρ.	E.O. Sisterhood FL	State Chapter		59-62014	141	
	rt I-A Complete if the c	organization is exempt under	section 501(c) or i	s a section 527 organ	nization.	
1	Provide a description of the	organization's direct and indirect p	political campaign ac	ctivities in Part IV (see in	structions for	
	definition of "political campa					
2		xpenditures (see instructions)		▶ \$		
3		campaign activities (see instruction				
Par	t I-B Complete if the c	organization is exempt under	section 501(c)(3).			
1	Enter the amount of any exc	cise tax incurred by the organization	n under section 495	5 ▶ \$		
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under secti	on 4955 , . ▶ \$		
3	If the organization incurred a	a section 4955 tax, did it file Form	4720 for this year?		. Yes No	
4a	a Was a correction made?					
b	If "Yes," describe in Part IV.				<u></u>	
Pai	t I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3)	
1	Enter the amount directly e	expended by the filing organization	n for section 527 ex	empt function		
	activities			▶\$		
2	Enter the amount of the filin	ng organization's funds contributed	I to other organization	ons for section		
	527 exempt function activities					
3		enditures Add lines 1 and 2 En				
		. .				
4	Did the filing organization fil	e Form 1120-POL for this year?			Yes No	
5	Enter the names, addresses	and employer identification numb ts. For each organization listed, er	per (EIN) of all section	on 527 political organiza	ations to which the filing	
		tributions received that were pron				
	as a separate segregated ful	nd or a political action committee (PAC). If additional sp	pace is needed, provide i	nformation in Part IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political	
	(a) Name	(b) Address	(0) 2	filing organization's	contributions received and	
				funds If none, enter -0-	promptly and directly	
					delivered to a separate	
					political organization If none, enter -0-	
					none, enter -	
(1)			4			
(2)			-			
			<u> </u>			
(3)			-			
			-	 		
(4)			-			
			 			
(5)			1			
(6)						
(0)			1			

	t II-A	m 990 or 990-EZ) 2019	on is exempt under section 501(c)(3) and	I filed Form F769 (elec	Page 2
F GI	L II-A	section 501(h)).	on is exempt under section 50 I(c)(5) and	i ilieu roim 5766 (elec	ction under
A C	Check ▶		longs to an affiliated group (and list in Part IV e and share of excess lobbying expenditures)	ach affiliated group mem	ber's name,
BC	Check 🕨	f the filing organization ch	ecked box A and "limited control" provisions app	oly	
			ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
b c d e	Total lob Total lob Other ex Total ex	bying expenditures to influence bying expenditures (add lines 1 empt purpose expenditures empt purpose expenditures (add	public opinion (grassroots lobbying) a legislative body (direct lobbying) a and 1b)		
	columns				
L	If the a <u>m</u>	ount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
12	Not over	\$500,000	20% of the amount on line 1e		
L.	Over \$50	0,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
-		00,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
_		00,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		•
	Over \$17		\$1,000,000		_
h:	Subtract	line 1g from line 1a If zero or k	5% of line 1f)		
j	If there	is an amount other than zero	on either line 1h or line 1i, did the organiza		
	reporting		4 Var Averaging Daied Hades Section 504(b)		Yes No
	16		4-Year Averaging Period Under Section 501(h)		na holow
	(5		a section 501(h) election do not have to comp the separate instructions for lines 2a through		ins below.
		Lobi	oying Expenditures During 4-Year Averaging Po	eriod	

	Lobbying Expenditures During 4-Year Averaging Period				
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))		1			
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2019

_	dule C (Form 990 or 990-EZ) 2019	<u> </u>				F	Page 3
Ра	rt II-B Complete if the organization is exempt under section 501(c)(3) and has No (election under section 501(h)).)T file	d For	m 5/6			
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(6	a)		(b	<u>) </u>	
	cription of the lobbying activity	Yes	No		Amo	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local		`				(* × p)
	legislation, including any attempt to influence public opinion on a legislative matter or					• .	A 🕠
	referendum, through the use of			. `	' , -	, , ,	
а	Volunteers?				,	4	
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?					•	. :
d	Mailings to members, legislators, or the public?	- 1					
e	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		_		_		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		-	<u> </u>			
i	Other activities?		 				
j	Total Add lines 1c through 1i				;		
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			ĺ	•	,	,
b	If "Yes," enter the amount of any tax incurred under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5)), or s	sectio	n		
	501(c)(6).			-		Yes	No
4	Wars substantially all (00% or mars) dues resound pendeductible by members?				1	X	110
1 2	Were substantially all (90% or more) dues received nondeductible by members?		Nor	ie	2	X	<u> </u>
3	Did the organization agree to carry over lobbying and political campaign activity expenditures fi			year?		"	х
	rt III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."	' OR (I	b) Pa	rt III-A		3, is	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include ampolitical expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
þ	Carryover from last year			2b 2c			
С	Total			3			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) of the first of th						
4	excess does the organization agree to carryover to the reasonable estimate of nondeductible						
	and political expenditure next year?			4			
5	Taxable amount of lobbying and political expenditures (see instructions)	<u></u>	• • •	5			
	rt IV Supplemental Information						
	vide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affilia ee instructions), and Part II-B, line 1. Also, complete this part for any additional information	tea gro	up IIS	t), Pan	: II-A, I	ines 1	and
2 (3	ee instructions), and rait in-b, line r Also, complete this part for any additional information						
		-		-			

Scheaule C (r	orm 990 or 990-E2) 2019	Page 4
Part IV	Supplemental Information (continued)	
		
		····-
-		
•••		
		<u> </u>
		<u> </u>

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization Employer identification number P.E.O. Sisterhood FL State Chapter 59-6201441 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year 2a b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register............... 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the

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, handling of
	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
	>
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (ii) Assets included in Form 990, Part X..... 🕨 🕏 🚐
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

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

Schedule D (Form 990) 2019

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Pa	rt III Organizations Maintaini	ng Collections o	f Art, Histor	rical Tre	asures	, or Other	Similar Assets (continued)	
3	Using the organization's acquisition	on, accession, and	other record	ds, check	any o	f the follow	ing that make sig	nificant use	of its
•	collection items (check all that app	ly)							
а	Public exhibition		d 🗍	Loan	or excha	ange prograi	m		
b	Scholarly research		e	Other					
С	Preservation for future gene	rations		,					
4	Provide a description of the organ		ns and expla	in how t	hev fur	ther the or	nanization's exemp	t nurnose i	n Part
·	XIII				,		,	\$ P3.P333	
5	During the year, did the organization	n solicit or receive	donations of	art histo	orical tr	easures or	other similar		
	assets to be sold to raise funds rath							Yes	No
Pa	rt IV Escrow and Custodial A		tanted as par	t or the t	Jigariiz.	200113 001100		1.63	1110
ı u	Complete if the organiza		'es" on Ford	n 990 F	Part IV	line 9 or r	enorted an amou	nt on Form	ı
	990, Part X, line 21	ation answered i	C3 0111 011	555, 1	artiv,		cported an annou	017 1 01111	l
12	Is the organization an agent, truste	e custodian or oth	aer intermed	ary for c	ontribut	ions or othe	r assets not		
14	-			-				Yes	No
h	included on Form 990, Part X? If "Yes," explain the arrangement i						[165 [
J	in res, explain the arrangement	II Fait Aili ailu coil	thiete the lon	owing tat	л с .		Amoun	_	
_	Pogrania halanco					4.	Aillouil	·	
C	Beginning balance								
d	Additions during the year								
e	Distributions during the year						 -		
f	Ending balance							No.	1
	Did the organization include an am			-				Yes	_ No
	If "Yes," explain the arrangement i	n Part XIII Check	here if the ex	planation	nas be	en proviaea	on Part XIII	<u> </u>	
Pa	rt V Endowment Funds.	otion anawarad "V	loo" on For	~ 000 E		lino 10			
	Complete if the organiza						1 4 11 77	1.13	
		(a) Current year	(b) Prior	year	(C) IW	o years back	(d) Three years back	(e) Four yea	rs back
1 a	Beginning of year balance							-	
þ	Contributions		ļ		_		<u> </u>	 	
C	Net investment earnings, gains,		1					1	
	and losses						·		
d	Grants or scholarships							ļ	
е	Other expenditures for facilities,								
	and programs							ļ	
f	Administrative expenses							<u> </u>	
g	End of year balance		<u> </u>					<u> </u>	
2	Provide the estimated percentage	of the current year	r end balance	e (line 1g,	column	(a)) held as			
а	Board designated or quasi-endown	nent >	%						
b	Permanent endowment ▶	%							
С	Term endowment ▶	_%							
	The percentages on lines 2a, 2b, a	and 2c should equa	l 100%						
3 a	Are there endowment funds not in	the possession of	the organiza	tion that	are hel	d and admir	nistered for the		
	organization by							Yes	s No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the relate	ed organizations list	ted as require	ed on Sch	edule R	?		3b	
4	Describe in Part XIII the intended in		ation's endo	vment fu	nds				
Pa	rt VI Land, Buildings, and Equ Complete if the organiz	uipment.	Vec" on Ear	m 000 l	Dart IV	line 11a	See Form 000 D	art Y linn 1	0
	Description of property		or other basis	(b) Cost				d) Book value	<u>. </u>
			estment)		ther)	depi	eciation	-, 5000 value	
1 a	Land						* A		
b	Buildings								
С	Leasehold improvements								
d	Equipment								
е	Other								
Tota	I. Add lines 1a through 1e (Column	(d) must equal Fo	rm 990, Part	X, colum	n (B), lır	ne 10c)			

Part VII	Investments - Other Securities.	l "Yes" on Form 990), Part IV, line 11b. See Form 990, Part X, line 12.
•	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)		Cost or end-of-year market value
	al derivatives		
	held equity interests		
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			<u> </u>
(G)			
(H)			
	a (h) must aqual Form 990. Part Y col. (R) line 12.)		
Part VIII	n (b) must equal Form 990, Part X, col (B) line 12) . ► Investments - Program Related.		
Part VIII		"Yes" on Form 990), 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
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	n (b) must equal Form 990, Part X, col (B) line 13) .		
Part IX		d "Yes" on Form 99 escription	0, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(1)		-	
(2)			
(3)			
(4)		·	
(5)			
(6)			
(7)			
(8)			
(9)	umn (b) must equal Form 990, Part X, col (B)	line 15.)	
Part X	line 25		0, Part IV, line 11e or 11f. See Form 990, Part X,
Part X	Complete if the organization answered line 25 (a) Description	d "Yes" on Form 99	0, Part IV, line 11e or 11f. See Form 990, Part X, (b) Book value
Part X 1. (1) Fede	Complete if the organization answered line 25		
Part X 1. (1) Fede (2)	Complete if the organization answered line 25 (a) Description		
1. (1) Fede (2) (3)	Complete if the organization answered line 25 (a) Description		
1. (1) Fede (2) (3) (4)	Complete if the organization answered line 25 (a) Description		
Part X 1. (1) Fede (2) (3) (4) (5)	Complete if the organization answered line 25 (a) Description		
Part X 1. (1) Fede (2) (3) (4) (5) (6)	Complete if the organization answered line 25 (a) Description		
Part X (1) Fede (2) (3) (4) (5) (6) (7)	Complete if the organization answered line 25 (a) Description		
Part X 1. (1) Fede (2) (3) (4) (5) (6) (7) (8)	Complete if the organization answered line 25 (a) Description		
Part X (1) Fede (2) (3) (4) (5) (6) (7) (8) (9)	Complete if the organization answered line 25 (a) Description	ption of liability	(b) Book value
Part X (1) Fede (2) (3) (4) (5) (6) (7) (8) (9) Total. (Colum	Complete if the organization answered line 25 (a) Description of the complete if the organization answered line 25 (a) Description of the complete if the organization answered line 25 (b) must equal Form 990, Part X, col (B) line 25	ption of liability	(b) Book value
1. (1) Fede (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column 2. Liability for	Complete if the organization answered line 25 (a) Description of the complete in the complete	ption of liability	(b) Book value

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	1,015,283
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains (losses) on investments	:	
a b	Donated services and use of facilities	i l	
C	Recoveries of prior year grants	1.	
d	Other (Describe in Part XIII)		
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,015,283
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)]	
	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,015,283
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	1,043,508
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	1 1	
b	Prior year adjustments	1. 1	
C	Other losses		
đ	Other (Describe in Part XIII)	1	
е	Add lines 2a through 2d	2e	1 042 500
3	Subtract line 2e from line 1	3	1,043,508
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	1	
b	Other (Describe in Fait Air)	4c	
С 5	Add lines 4a and 4b	_	1,043,508
	XIII Supplemental Information.	I . T I	
2, Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, I XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	

Schedule D (Form 990) 2019	Page	e 3
Part XIII Supplemental Information (continued)		
		_
		—
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		_
_		
		_
		—
		—
		_

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

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

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

OMB No 1545-0047	2019
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► Go to www.irs.gov/Form990 for the latest information.

Employer identification number

59-6201441

P.E.O. Sisterhood FL State Chapter

General Information on Grants and Assistance Part 1

X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 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 (b) EIN or government	(b) EIN		c) IRC section (d) Amount of cash (e) Amount of non- (if applicable) grant cash assistance	(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)	102,796	0			Gen Supp/Schol
(2) P.E.O. Educational Loan Fund							
Des Moines, IA 50312	426078059	501(c)(3)	58,941	0			Educ Loans
(3) P.E.O. Int'l Peace Scholarship							
Des Moines, IA 50312	426078058	501(c)(3)	59,966	0			Scholarships
(4) P.E.O. Program for Contin Educ							
Des Moines, IA 50312	237405311	501(c)(3)	113,296	0			Educ Grants
(5) P.E.O. Scholar Awards							
Des Moines, IA 50312	421379026	501(c)(3)	57,454	0			Educ Awards
(6) P.E.O. STAR Scholarship		!					
Des Moines, IA 50312	300583651	501(c)(3)	74,891	0			Scholarships
(7) P.E.O. Foundation		_					
Des Moines, IA 50312	426094564	501(c)(3)	252,844	0			Schol/Grants
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government org	government (organizations lis	anizations listed in the line 1 table.	le		A	7
	od in the line	1 table					

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.

	Part III can be duplicated if additional space is needed	i space is need	ded.			
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Scho	1 Scholarships to Cottey College	4	000,09	0	0 N/A	N/A
2						
က						
4						
က						
9						
7						
Part IV	Part IV Supplemental Information. Provide the informal	the information	on required in P	art I, line 2, Part	II, column (b), and any o	tion required in Part I, line 2, Part III, column (b), and any other additional information.

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

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

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

Employer identification number

P.E.O. Sisterhood FL State Chapter	59-6201441	
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 vo	oting members present.	
In addition, certain proposed amendments to the bylaws are present	nted and voted upon.	
Part VI, Line 11b: copies of the final Form 990 were provided to	each member of the	
executive board of Florida State Chapter prior to filing. Board	members are asked to	
review the return and respond with any questions, though no form	al review process is	
currently in place.		
Part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest policies and Signature part VI, Line 12c: Conflict of Interest part VI, Line 12c: Conflict of Interest part VI, Line 12c: Conflict of Interest part VI, Line 12c: Conflict of Inter	ages are distributed	
each year to all executive board members and to any committee me	mbers having influence	
over financial transactions. Signature pages are collected by t	he 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 m	embers vote on the	
appropriate action.		
Part VI, Line 19: Governing documents, conflicts of interest pol	icy and financial	
statements are available to members upon request. These items a	re not made available	
to the general public.		
Part XII, Line 2b: The organization's financial statements were	audited by an	
independent accountant on a cash basis.		

Name of the organization	Employer identification number
P.E.O. Sisterhood FL State Chapter	59-6201441
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	Sabadula O (Sam 990 as 990 57) (2040)

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