Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

A Fo	or the	2017 calendar year, or tax year beginning APR 1, 2017 and	lending M	AR 31, 2018	
B Ch	eck if plicable,	C Name of organization		D Employer identific	ation number
	Addres	OKLAHOMA P.E.O. PROJECTS FUND, INC.			
	Name change	Doing business as		73-61	107830
	initiai return Final	Number and street (or P.O. box if mail is not delivered to street address) 6528 EAST 101ST STREET STE D-1 #465	Room/suite	E Telephone number	545-6223
ـــا	return/ termin-	City or town, state or province, country, and ZIP or foreign postal code	1	G Gross receipts \$	179,680.
[ated Amond:			H(a) Is this a group ref	
=	return Applica I bon			for subordinates?	
<u></u>	beugiut I nou	SAME AS C ABOVE	2	H(b) Are all subordinates ind	
I Ta	ax-exe	mpt status: X 501(c)(3) 501(c) () (insert no) 4947(a)(1)	or 527	1 ''	ist. (see instructions)
		www.okpeo.org		H(c) Group exemption	
		organization; X Corporation Trust Association Other	L Year		State of legal domicite: IA
		Summary			
93		Briefly describe the organization's mission or most significant activities. TO FAND SCHOLARSHIPS.	ROVIDE	EDUCATIONAL	GRANTS
盲	-	Check this box if the organization discontinued its operations or disposition	sed of more	than 25% of its net assi	ets
Governance		Number of voting members of the governing body (Part VI, line 1a)		131	7
		Number of independent voting members of the governing body (Part VI, line 1b)		1	7
8		Fotal number of individuals employed in calendar year 2017 (Part V, line 2a)		CEIVED 3	0
Activities	6	Total number of volunteers (estimate if necessary)	1	E	0
쇬		Total unrelated business revenue from Part VIII, column (C), line 12	RE	2018. 76	0.
۷	b l	Net unrelated business taxable income from Form 990 T, line 34	1	76	0.
			18/-3	Orprior Year ()	Current Year
	8	Contributions and grants (Part VIII, line 1h)	181	126 068:	163,732.
Ĕ	9	Program service revenue (Part VIII, line 2g)	\\\\\\\ <u>\</u>	aguli 0.	<u> </u>
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	\	8,258.	15,948.
"	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		144,326.	179,680.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		151,387.	147,750.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
SS		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expense		Professional fundraising fees (Part IX, column (A), line 11e)		0.	<u>0.</u>
×		Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>	7 005	F 705
۳		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	_	7,985.	7,785.
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	· · · -	159,372.	155,535.
		Revenue less expenses Subtract line 18 from line 12	·····	-15,046.	24,145.
ts or				ginning of Current Year	End of Year
Asset (Bala)		Total assets (Part X, line 16)	······	674,136.	698,281.
et A		Total liabilities (Part X, line 26)	······	674,136.	0. 698,281.
	rt II	Not assets or fund balances. Subtract line 21 from line 20	· · · · · · · · · · · · · · · · · · ·	0/4/1300	0,0,201.
		Ities of perjury, I declare that I have examined this return, including accompanying schedul	ee and etatem	ants, and to the hest of my	knowledge and helief it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of v			momorgy and pelici, it is
06,	JUNEL	De Fran Porte, Charman	-, propuro		- 2018
Sigi	·	Signature of officer		Date	<u> </u>
Her		DEANN BOHL, CHAIRMAN			
1161	C	Type or print name and title	·		· · · · · · · · · · · · · · · · · · ·
		Print/Type preparer's name Preparer's signature	· · · · · · · · · · · · · · · · · · ·	Date Check	PTIN
Paid	Ī	JAY A HORN, CPA	-	II sell-employe	P01259887
	атег	Firm's name DENMAN & COMPANY, LLP	J,	Firm's EIN	42-0794029
-	Only	Firm's address 1601 22ND STREET, SUITE 400			
. •	•	WEST DES MOINES, IA 50266-1453		Phone no. 51	5-225-8400
Mav	the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
	01 11-2		ions.		Form 990 (2017)

Form	990 (2017) OKLAHOMA P.E.O. PROJECTS FUND, INC. 73-6107830 Page 2										
Par	t III Statement of Program Service Accomplishments										
	Check if Schedule O contains a response or note to any line in this Part III										
1	Briefly describe the organization's mission:										
	TO PROVIDE EDUCATIONAL GRANTS AND SCHOLARSHIPS.										
2	Did the organization undertake any significant program services during the year which were not listed on the										
	prior Form 990 or 990-EZ?										
	If "Yes," describe these new services on Schedule O.										
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?										
	If "Yes," describe these changes on Schedule O.										
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.										
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and										
	revenue, if any, for each program service reported.										
4a	(Code) (Expenses \$ 88,500 • including grants of \$ 88,500 •) (Revenue \$)										
	THE ORGANIZATION AWARDED GRANTS TO WOMEN ATTENDING COLLEGE FOR ACADEMIC										
	STUDIES OR TECHNICAL COURSES.										
	(Code) (Expenses \$ 32,250 • including grants of \$ 32,250 •) (Revenue \$)										
4b	(Code (Expenses \$ 32,250. including grants of \$ 32,250.) (Revenue \$ 17 THE ORGANIZATION'S CONTINUING EDUCATION FUND AWARDED GRANTS TO WOMEN										
	WHO HAVE EXPERIENCED AN INTERRUPTION IN THEIR ACADEMIC CAREER AND HAVE										
	RETURNED TO COMPLETE THEIR DEGREE PROGRAM.										
4c	(Code) (Expenses \$ 27,000 · Including grants of \$ 27,000 ·) (Revenue \$)										
	THE ORGANIZATION'S COTTEY SCHOLARSHIPS COMMITTEE AWARDS SCHOLARSHIPS TO										
	OKLAHOMA WOMEN WHO ARE ATTENDING COTTEY COLLEGE IN NEVADA, MISSOURI.										
4d	Other program services (Describe in Schedule O.)										
	(Expenses \$ uncluding grams of \$) (Revenue \$)										
40	Total program service expenses ► 147,750.										
	Form 990 (2017)										

			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?	2	Х	
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		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	dunng the tax year? If "Yes," complete Schedule C, Part II	4		X
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 "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	['		
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			7.5
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	١		v
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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,	44-		х
	Part VI	11a		
ט	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 of its total	110		
·	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 reported in	1.0		
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	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	116	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	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 foreign investments valued at \$100,000	1		
	or more? If *Yes," complete Schedule F, Parts I and IV	14b	L	X
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		<u> X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	1		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	1		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	Ì		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	ŀ		
	complete Schedule G. Part III.	19		<u> X</u>

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	•		Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	1		İ
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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 27 If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	_23_		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		x
	Schedule K. If "No", go to line 25a	24a		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
С	any tax-exempt bonds?	24c		İ
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		х
ь	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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1		'
	instructions for applicable filing thresholds, conditions, and exceptions)	<u> </u>		
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28b	 -	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			x
~~	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		х
31	contributions? If "Yes," complete Schedule M	30		
٥,	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N. Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33_		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	<u> </u>	X
35a	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		X
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> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note, All Form 990 filers are required to complete Schedule O	38	X	<u></u>

Par	990 (2017) OKLAHOMA P.E.O. PROJECTS FUND, INC. 73-610' t V Statements Regarding Other IRS Filings and Tax Compliance	/83) <u>F</u>	⊳ _{age} 5
[0	Check if Schedule O contains a response or note to any line in this Part V			
	The state of the s	· · · · · · · · · · · · · · · · · · ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	2	1 '68	1.40
b		5		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7		
•	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements.		†	T
		ol 📗		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	+	T
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1	1
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			1
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
ь	If "Yes," enter the name of the foreign country			1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	1		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c	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 chantable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		T	
	were not tax deductible?	6b		
7	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		X
b	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		X
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?	7 <u>f</u>		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
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.	ļ	1	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	1	<u> </u>
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	-	ļ
10	Section 501(c)(7) organizations. Enter:		ļ	
а	Initiation fees and capital contributions included on Part VIII, line 12		1	

732005 11-28-17

13

amounts due or received from them.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

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

c Enter the amount of reserves on hand

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

14a Did the organization receive any payments for indoor tanning services during the tax year?

b Gross income from other sources (Do not net amounts due or paid to other sources against

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Section 501(c)(12) organizations. Enter:

a Gross income from members or shareholders

Section 501(c)(29) qualified nonprofit health insurance issuers.

organization is licensed to issue qualified health plans

11a

X

Form 990 (2017)

12a

13a

Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 7 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 in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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 b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a a The governing body? **b** Each committee with authority to act on behalf of the governing body? 8Ь Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? <u>11a</u> **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c ın Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 14 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? X a The organization's CEO, Executive Director, or top management official 15a X b Other officers or key employees of the organization 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 X taxable entity during the year? 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. X Upon request Other (explain in Schedule O) Another's website Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: AMY CONNOR - 918-645-6223 6528 EAST 101ST STREET, SUITE D-1 #465 TULSA OK 74133-6754

17-64241

Part VIII 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 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.

List persons in the following order. Individual trustees or directors, institutional trustees; officers, key employees; highest compensated employees; and former such persons.

X Check this box if neither the organization ne	or any related o	orga	niza	ion	con	npen	sat	ed any current officer, d	rector, or trustee.	·	
(A)	(B)		(C) Position					(D)	(E)	(F)	
Name and Title	Average	(do	not cl	Posi neck i	ntion more	l than d	one	Reportable	Reportable	Estimated	
	hours per	box	unie: cer an	ss per	son i	s bott	าลก	compensation	compensation	amount of	
	week					1		from	from related	other	
	(list any hours for	Juect.				_		the organization	organizations (W-2/1099-MISC)	compensation from the	
	related	000	stee		l	Safe		(W-2/1099-MISC)		organization	
	organizations	Individual trustee or director	nstitutional trustee		Xey employee	E E	ŀ			and related	
	below	ndua	tutto	ja Ge	E E	loyee	يق			organizations	
	line)	ig Đ	ılsı	Officer	Xey	Highest compensated employee	퉏			· · · · · · · · · · · · · · · · · · ·	
(1) PAM CROWDER	1.00					l		_	_	_	
CHAIRMAN		X	ļ	X	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.	
(2) JEAN VAN DELINDER	1.00									_	
VICE CHAIRMAN		X		X	_	<u> </u>	L	0.	0.	0.	
(3) GINNI YOUNG	1.00									_	
SECRETARY		X	<u> </u>	X	ļ	ļ	_	0.	0.	0.	
(4) LINDA AREND	1.00			l					1		
BOARD MEMBER	1 2 2 2 -	X	ļ	<u> </u>	_	<u> </u>	<u> </u>	0.	0.	0.	
(5) DEANN BOHL	1.00		1							_	
BOARD MEMBER	1 00	X	<u> </u>		├-	├	<u> </u>	0.	0.	0.	
(6) RHONDA COOK	1.00			1						_	
BOARD MEMBER	1 00	X			<u> </u>	\vdash		0.	0.	0.	
(7) SUE THOMAS	1.00	 			1					_	
BOARD MEMBER		X	├-		├	╁	-	0.	0.	0.	
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Form 990 (2017)

Form		KLAHOMA	P.E.O.	PR	lOJ	EC	TS	F	UN	D, INC.	73-61	<u>.07</u>	830	P	age 8
Par		irectors, Trus	tees, Key Em	ploy	ees,	and	Hig	ghes	t C	ompensated Employee	s (continued)				
	` (A)		(B)			((>)			(D)	(E)	- }		(F)	
	Name and title		Average	١		Posi				Reportable	Reportable	f	Es	stimate	ed
	•		hours per			heck i ss per				compensation	compensation	n	an	nount	of
			week	offi	cer ar	nd a de	recto	r/trus	tee)	from	from related			other	
			(list any	director						the	organizations	s	com	pensa	tion
			hours for	a a	1	1		8		organization	(W-2/1099-MIS	,C)	fr	om the	е
			related	frustee or 0	l se	1		Highest compensated employes		(W-2/1099-MISC)		J	org	anizat	ion
			organizations	d fres	뉼	ŀΙ	oyee	ğ.				- 1		d relat	
			below	Individual	Institutional trustee	je l	Key employee	ploye	ě	ļ			orga	anızatio	ons
	<u> </u>		line)	亨	Ē	Officer	Key	포트	훈	ļ	· - 				
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1b	Sub-total								ightharpoons	0.		0.			0.
	Total from continuation she								ightharpoonup	0.		0.			0.
<u>d</u>	Total (add lines 1b and 1c)					<u> </u>			▶_	0.		0.			0.
2	Total number of individuals (i								o re	eceived more than \$100	000 of reportable				
	compensation from the organ														0
			_							····				Yes	No
3	Did the organization list any	former officer.	director, or tri	uste	a. ka	ev en	olan	vee.	orl	highest compensated er	nplovee on	- 1			
•	line 1a? If "Yes," complete Se												3		X
4	For any individual listed on lii	na 1a is tha si	uc <i>ii iiiuiviuuai</i> im of reportab	۰۰ <u>:</u> ۲۰ ما			···· tion		 Loth	ner compensation from t	he organization	٠. ا	,		
7					-						ne organization		4		X
_	and related organizations gre												-		<u> </u>
5	Did any person listed on line														v
	rendered to the organization		nolete Schedul	e J J	or s	uch	oers	on	••••				_5		X
Sec	tion B. Independent Contrac														
1	Complete this table for your	•	•	•							•	ensat	tion fro	mc	
	the organization. Report com	pensation for	the calendar y	oar e	endi	ng w	ith c	or wi	thin	the organization's tax y	ear.				
		(A)				_				(B)		_		C)	
	Name	and business	address	N	ON	<u> </u>			_	Description of s	services		ompe	nsatio	<u>n</u>
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	Total manhouse for door 100						4 ln	- II-	ا	abough wha reasing 4 ==	are then				
2	Total number of independent		_	ioi III	mite	u (0	เกอร	>⊎ IIS 1	rea	above) who received m	Ole nigni				
	\$100,000 of compensation for	rom the organi	zation					<u>, </u>							

				r note to any line	in this Doct VIII			
	`	· Check if Schedule O contai	ns a response c	r note to any line	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Related organizations Government grants (contribution All other contributions, gifts, grants similar amounts not included above Noncash contributions included in lines 1a	, and	163,732.	163,732.			
<u>ध</u>	b	Total. Add lines 1a-1f			103,732.			
Program Service Revenue	2 a			Business Code				
F	f	All other program service reven	ue					
	3 4 5	Investment income (including dother similar amounts) Income from investment of tax-	ividends, intere	st, and	15,948.			15,948.
	3	1109411103	(i) Real	(ii) Personal				-
		Less. rental expenses	(i) (teal	(i) i cisonal				
		Rental income or (loss) [<u> </u>	>				
i			/2 Canada	····				
:	7 8	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory Less. cost or other basis and sales expenses Gain or (loss)						- 1
			· · · · · · · · · · · · · · · · · · ·					
Other Revenue		Gross income from fundraising including \$ contributions reported on line 1	events (not					
ther		Less: direct expenses				}		
ō		Net income or (loss) from fundr		.				
		a Gross income from gaming act						
		Part IV, line 19	b	L	<u> </u>		.,	
		c Net income or (loss) from gami		<u></u>				
		a Gross sales of inventory, less rand allowances	a					
		c Net income or (loss) from sales						<u> </u>
		Miscellaneous Revenue		Business Code				
	11 :			2223 0000				
	l .	ab						
	ł	c						
	i	d All other revenue						
		e Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			179,680.	0.	0	. 15,948.

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must compl Check if Schedule O contains a respons			nplote column (A).	
	· · · · · · · · · · · · · · · · · · ·	(A)	(B)	(C)	(D)
	ot include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	T T			-
	individuals See Part IV, line 22	147,750.	147,750.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	ļ			
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		·		
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				·· III
	Management				
b	Legal				
Č	Accounting				
d	Lobbying	-			
ء	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		· · · · · · · · · · · · · · · · · · ·		
g g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel			**** - =	
18	Payments of travel or entertainment expenses				
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest		· · · · · · · · · · · · · · · · · · ·		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		· · · · · · -		
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	PROFESSIONAL FEES	3,400.	······································	3,400.	
h	CONTRACTED SERVICES	3,000.		3,000.	-
2	MISCELLANEOUS	1,385.		1,385.	
d					
	All other expenses			·	<u> </u>
25	Total functional expenses. Add lines 1 through 24e	155,535.	147,750.	7,785.	0.
26	Joint costs. Complete this line only if the organization				
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here I if tollowing SOP 98-2 (ASC 958-720)				
	IT TOUGHNING SUP 98-2 (ASC 958-720)			<u> </u>	000

	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	260,363.	1	287,345
2	Savings and temporary cash investments	71,629.	2	53,826
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
*	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	······································
1 -	D. I deferred above	· · · · · · · · · · · · · · · · · · ·	9	
9	Land, buildings, and equipment cost or other			
10a	- · · · · · · · · · · · · · · · · · · ·			
_	basis. Complete Part VI of Schedule D Less' accumulated depreciation 10b	 	10c	
b			11	- · · · · · · · · · · · · · · · · · · ·
11	Investments - publicly traded securities	342,144.	12	357,11
12	Investments - other securities See Part IV, line 11	J42,144.		337,11
13	Investments - program-related See Part IV, line 11	· · · · · · · · · · · · · · · · · · ·	13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	674 126	15	600 20
16	Total assets. Add lines 1 through 15 (must equal line 34)	674,136.	16	698,28
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	<u> </u>
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons			
	Complete Part II of Schedule L		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	0.	26	
	Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and			
	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets		27	
27 28 29 30 31 32	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	0.	30	
31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	······································
32	Retained earnings, endowment, accumulated income, or other funds	674,136.	32	698,28
33	Total net assets or fund balances	674,136.	33	698,28
			. ~ .	~ ~ ~ , a. U

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

OKLAHOMA P.E.O. PROJECTS FUND, INC. 73-6107830 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s)

	functionally integrated, or	r Type III non-lunct	ionally integrated supporti	ny organiza	ation.		
f	Enter the number of supported of	organizations				*** ****** *******************	
Я	Provide the following information	about the suppor	tod organization(s).				
	(i) Name of supported	(ii) EIN	(iii) i po oi oi gariization	(iv) is life orga In your governi	mizalion listed no document?	(v) Amount of monetary	(vi) Amount of other
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
							1
Tota	1			1			
		7 ··· · · · · · · · · · · · · · · · · ·					

that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness

Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III

requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

73-6107830 Page 2 Schedule A (Form 990 or 990-EZ) 2017 OKLAHOMA P.E.O. PROJECTS FUND, INC. 73-6107 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not			,			
	include any "unusual grants ")	123,939.	82,090.	332,503.	136,068.	163,732.	838,332.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to			1			
	or expended on its behalf						
3	The value of services or facilities		:				
	furnished by a governmental unit to						
	the organization without charge				<u> </u>		
4	Total. Add lines 1 through 3	123,939.	82,090.	332,503.	136,068.	163,732.	838,332.
5	The portion of total contributions						
	by each person (other than a						•
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						246,299.
6	Public support. Subtract line 5 from line 4	-					592,033.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	123,939.	82,090.	332,503.	136,068.	163,732.	838,332.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	3,396.	3,078.	4,616.	8,258.	15,948.	35,296.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain		-				
	or loss from the sale of capital			Ì			
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10			-			873,628.
12	Gross receipts from related activities,	etc (see instruction	ons)		****	12	
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	1 501(c)(3)	
	organization, check this box and stor	p here					
Se	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2017 (ine 6, column (f) di	vided by line 11, c	olumn (f))		14	67.77 %
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	69.78 %
16	a 33 1/3% support test - 2017. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies		•	***************************************			
١	33 1/3% support test - 2016. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check the	s box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			, ▶□
17	a 10% -facts-and-circumstances test	t - 2017. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the "fac	cts-and-circumstand	ces" test, check th	is box and stop I	nere. Explain in Pa	rt VI how the organ	nization
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a j	publicly supported	organization		▶□
1	10% -facts-and-circumstances test	t - 2016. If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circui	mstances" test, ch	eck this box and	stop here. Explain	n in Part VI how the	e
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	ly supported organ	nization	▶□
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	<u> </u>
		· · ·		-	Sche	edule A (Form 990	or 990-EZ) 2017

17-61211

Voc No

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
 Did the organization have any supported organization that does not have an IRS determination of status.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filling organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L. (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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9a		
9b		
9c		
10a		
10b		

	dule A (Form 990 or 990-EZ) 2017 OKLAHOMA P.E.O. PROJECTS FUND, INC. 73-62	<u> 10783</u>	<u>0 Ра</u>	age 5
Par	t IV Supporting Organizations (continued)			
	•		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	1		
	controlled the organization's activities. If the organization had more than one supported organization,	1		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes." explain in			
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		لـــــا	
		····	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	1,10
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	·			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			Щ.
000	Mon D. All Type III dapporting digunizations		Van	N.
_	Did the executation provide to each of its supported executations by the last day of the fifth month of the		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1_		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	-		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions	s).		
а	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	.	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	1		
		2b		
•	activities but for the organization's involvement. Parent of Supported Organizations Answer (a) and (b) below.	""		
3				
а		2-		<u> </u>
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
þ	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			لــــا
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this repart.	3b		
73202	5 10-08-17 Schedule A (Form		a 1-⊢71	2017

chedule A (Form 990 or 990-EZ) 2017 OKLAHOMA P.E.O. PROJECT: Part V Type III Non-Functionally Integrated 509(a)(3) Supporting			73-6107830 _{Page}
Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI) See instructions
other Type III non-functionally integrated supporting organizations must co	mplete Sec	tions A through E.	
ection A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI).			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		T
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		<u></u>
7 Check here if the current year is the organization's first as a non-functional	ly integrated	d Type III supporting ora	anization (see
instructions).	. •		•

Schedule A (Form 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017

b Excess from 2014
c Excess from 2015
d Excess from 2016
e Excess from 2017

Schedule A	(Form 990	or 990-E	Z) 2017	OK	LAHC	MA	P.1	E.O.	PRO	JECTS	FUND), INC.		73-61078	30 Page
Part VI	Suppler	nenta	Infor	matic	on. Pr	rovide	the e	xolanai	ions real	ured by F	Part II. line	10: Part II lin	e 17a or	17b; Part III, line	12
	Part IV. Se	ection A	. lines 1	. 2. 3b	. 3c. 4l	b. 4c.	5a. 6.	9a. 9b	. 9c. 11a	. 11b. and	d 11c. Par	t IV. Section F	Lines 1	and 2, Part IV, Se	rz, ection C
	line 1; Par	t IV, Sed	ction D.	lines 2	2 and 3	; Part	IV, Se	ection E	E. lines 1d	c. 2a. 2b.	3a. and 3b	b. Part V. line	1: Part V	. Section B. line 1	e; Part V.
	Section D	, lines 5	, 6, and	8; and	Part V	, Sect	ion E,	, lines 2	2, 5, and	6. Also co	omplete th	is part for any	addition	al information.	,
	(See instri	uctions))												
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SCHEDULE D

Department of the Treasury Internal Revenue Service

(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**

Inspection

Name of the organization

OKTAHOMA P.E.O. PROJECTS FIND TATO **Employer** identification number 73-6107830

Par	t I Organizations Maintaining Donor Advised Fund		r Accounts. Complete if the	
نتت	organization answered "Yes" on Form 990, Part IV, line 6.		Complete ii tila	
		(a) Donor advised funds	(b) Funds and other accounts	
4	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 th	at the assets held in donor advised	funde	
5	are the organization's property, subject to the organization's exclusive			No
6	Did the organization inform all grantees, donors, and donor advisors in			140
O	for charitable purposes and not for the benefit of the donor or donor a	• •	•	
	impermissible private benefit?		·	No
Pai				140
1	Purpose(s) of conservation easements held by the organization (check			
•	Preservation of land for public use (e.g., recreation or education	, -	rically important land area	
	Protection of natural habitat	Preservation of a certific		
	Preservation of open space	1 Teservation of a certific	red Historic structure	
2	Complete lines 2a through 2d if the organization held a qualified cons	anystian contribution in the form of	a consequation excempet on the last	
2	day of the tax year.	ervation continuation in the form of	Held at the End of the Tax	
_				1641
a _				
b				
C	Number of conservation easements on a certified historic structure in		2c	
а	Number of conservation easements included in (c) acquired after 7/25		1 - 1	
_				
3	Number of conservation easements modified, transferred, released, e	xtinguished, or terminated by the of	rganization during the tax	
	Number of states where a report to wheat to concertation accomment.	Jacobad 🏲		
4	Number of states where property subject to conservation easement is			
5	Does the organization have a written policy regarding the penodic mo			L
•	violations, and enforcement of the conservation easements it holds?	of volations, and enforcing consequent		No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	of violations, and emorcing conser	rvation easements during the year	
	Amount of expenses incurred in monitoring, inspecting, handling of vi	alatians and enforcing concentration	an accompanie during the year	
7		olations, and emorcing conservation	on easements during the year	
_	Does each conservation easement reported on line 2(d) above satisfy	Ab	(A)(D)(s)	
8				l
•	and section 170(h)(4)(B)(ii)?			No
9	In Part XIII, describe how the organization reports conservation easen	•		
	include, if applicable, the text of the footnote to the organization's final	ancial statements that describes the	e organization's accounting for	
Da	conservation easements rt III Organizations Maintaining Collections of Art, H	istorical Treasures or Othe	er Similar Assets	
ra		· ·	er Shimar Assets.	
	Complete if the organization answered "Yes" on Form 990, Pa			
1a	If the organization elected, as permitted under SFAS 116 (ASC 958),	•		
	historical treasures, or other similar assets held for public exhibition,		ce of public service, provide, in Part XI	Ш,
	the text of the footnote to its financial statements that describes thes			
ь	If the organization elected, as permitted under SFAS 116 (ASC 958),	·		
	treasures, or other similar assets held for public exhibition, education,	, or research in furtherance of public	c service, provide the following amoui	nts
	relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			
2	If the organization received or held works of art, historical treasures, or	or other similar assets for financial g	gain, provide	
	the following amounts required to be reported under SFAS 116 (ASC	•		
а	Revenue included on Form 990, Part VIII, line 1		> \$	
b	Assets included in Form 990, Part X		> \$	

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

Schedule D (Form 990) 2017

_		A P.E.O. P					73-61			iqe 2
Par										
	Using the organization's acquisition, accession	on, and other record	s, check any o	the follow	ring that are a s	ignificant i	use of its c	ollection	items	
	(check all that apply)		. — .							
а	Public exhibition	C	_		e programs					
b	Scholarly research	•	Other							
C	Preservation for future generations									
	Provide a description of the organization's co	-	•	-			ose in Part	XIII.		
-	During the year, did the organization solicit or		•		_		_	٦.,		1
Par	to be sold to raise funds rather than to be ma					- C 00		Yes		No
Fai	reported an amount on Form 990, Par		ete ii the organ	ization ans	swered tes o	1 Form 99	u, Part IV,	line 9, or		
	Is the organization an agent, trustee, custodia		liani for anatah		ther exects not	in aliceland				
	_		-					Yes	[No
	on Form 990, Part X?	and complete the fo	llouing table:			······ ·· ······		_ res	ш	NO
D	ii 165, explain the analigement in Fact Allia	and complete the lo	nowing table.				Υ	Amount		
_	Reginaling halance					1c	 	Amount		
	Beginning balance						 			
	Distributions during the year						 -			
	Ending balance						 			
) 2a	Did the organization include an amount on Fo							Yes		No
	If "Yes," explain the arrangement in Part XIII.							03		1
Par										
		(a) Current year			Two years back	T	vears back	(e) Four	vears t	nack
1a	Beginning of year balance						10000	(2/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	100.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Contributions									
	Net investment earnings, gains, and losses	····				 				
	Grants or scholarships									
	Other expenditures for facilities									
•	and programs							}		
f	Administrative expenses						·		e	
g g	End of year balance									
2	Provide the estimated percentage of the curr	ent vear end balanc	e (line 1a. colu	nn (a)) held	d as:	1				
	Board designated or quasi-endowment		%	(-4)						
b	Permanent endowment	%								
_	Temporarily restricted endowment	<u></u> %								
-	The percentages on lines 2a, 2b, and 2c show									
За	Are there endowment funds not in the posse		ation that are h	eld and ad	ministered for t	he organiz	ation			
	by:	_						ſ	Yes	No
								3a(i)		
					•			3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza			- 00						
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.							
Par	t VI Land, Buildings, and Equipm	ent.					_			
	Complete if the organization answered	d "Yes" on Form 99	0, Part IV, line	1a. See Fo	orm 990, Part X	, line 10.				
	Description of property	(a) Cost or o		Cost or o		Accumulat epreciation		(d) Bool	< value	
	Land									
	Buildings									
	Leasehold improvements									
ď	Equipment	1								
_	Other									
	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part	X column (B)	line 10c)			. •			0.

Schedule D (Form 990) 2017

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

Schedule D (Form 990) 2017

OKI Part i General Information 1 Does the organization main Dopartment of the Treasury Internal Revenue Service
Name of the organization SCHEDULE 1 (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	2017
► Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.	Open to Public Inspection
LAHOMA P. B.O. PROJECTS FUND, INC.	Employer identification number 73-6107830
ntain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection grants or assistance?	on Yes X No
ssistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any d more than \$5,000 Part II can be duplicated if additional space is needed.	IV, line 21, for any

criteria used to award the grants of assistance? 2. Describe in Part IV the organization's procedures for monitoring the use	tance?	toring the use of grant t	of grant funds in the United States	United States			
121	Jomestic Organia	rations and Domestic	: Governments. (Somplete if the orga	anization answered "Y	'es" on Form 990, Part I	V, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	5,000 Part II can	be duplicated if addition	onal space is need	ed.			
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, EMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	id government org	janizations listed in the	e line 1 table				
۱,	see the Instruction	ons for Form 990					Schedule I (Form 990) (2017)

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. 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. (d) Amount of non-cash assistance ٥. ٥. 88,500 32,250, 27,000, (c) Amount of cash grant (b) Number of recipients 23 SCHOLARSHIPS TO OKLAHOMA WOMEN WHO ARE ATTENDING GRANTS TO WOMEN ATTENDING COLLEGE FOR ACADEMIC SCHOLARSHIPS TO WOMEN TO ASSIST IN CONTINUING (a) Type of grant or assistance STUDIES OR TECHNICAL COURSES. COTTEY COLLEGE, NEVADA, MO. THEIR ACADEMIC CAREER. Part IV Part III

Page 2

73-6107830

INC.

PROJECTS FUND,

OKLAHOMA P.E.O.

Schedule I (Form 990) (2017)

732102 11-01-17

Schedule I (Form 990) (2017)

SCHEDULE O

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public

Inspection

Internal Revenue Service Name of the organization

OKLAHOMA P.E.O. PROJECTS FUND, INC.

Employer identification number 73-6107830

FORM 990, PART VI, SECTION B, LINE 11B:
THE BOARD OF DIRECTORS REVIEWS THE FORM 990 TAX RETURN BEFORE FILING.
FORM 990, PART VI, SECTION B, LINE 12C: WRITTEN CONFLICT OF INTEREST POLICIES ARE UPDATED AND REVIEWED ANNUALLY FOR
EACH BOARD MEMBER.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.
FORM 990, PART XII, LINE 2C: THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR OVERSIGHT OF AUDIT OF
FIANCIAL STATEMENT AND SELECTION OF THE INDEPENDENT AUDIT FIRM.