



P.E.O. Foundation
3700 Grand Avenue
Des Moines, Iowa 50312
(515) 255-3153

Form to Establish a Fund in the P.E.O. Foundation

Please review ***Establishing a Fund in the P.E.O. Foundation*** before completing this form. If you are establishing a scholarship fund, please also review ***Options for Scholarship Funds***

Make check payable to "P.E.O. Foundation" and send to the above address with this completed form.

Fund Name: _____

Name of Donor: _____

Address: _____

City _____ State/Province _____ Zip/Postal Code _____

Phone: _____ Email: _____

Initial Amount: \$ _____ (A minimum of US \$1,000)

Choose one of the following types of funds: For details, review ***Establishing a Fund in the P.E.O. Foundation***.

1. ☐ **Transfer Fund to P.E.O. Educational Project(s)**: If more than one is chosen, the amount must be divided equally.
- ☐ Cotney College ☐ Educational Loan Fund ☐ International Peace Scholarship
☐ Program for Continuing Education ☐ Scholar Awards ☐ STAR Scholarship

2. ☐ **Undesignated Fund**: Income from your fund will be distributed annually by the P.E.O. Foundation Board of Trustees to P.E.O. educational projects where it is most needed that year as part of the Annual Impact Distribution.

3. ☐ **Cotney College Scholarship Fund**: For details, review ***Options for Scholarship Funds***.

Check the scholarship option you have selected. **If choosing Option C, please write in or the minimum principal balance.**

☐ **A** ☐ **B** - is no longer being offered; existing funds originally established as Option B will remain in place ☐ **C** \$ _____
(minimum principal balance)

4. ☐ **General Scholarship Fund**: For details, review ***Options for Scholarship Funds***.

Reciprocity Groups may only establish funds through the P.E.O. Foundation in support of P.E.O. International projects.

Check the scholarship option you have selected. **If choosing Option C, please write in or the minimum principal balance.**

☐ **A** ☐ **B** - is no longer being offered; existing funds originally established as Option B will remain in place ☐ **C** \$ _____
(minimum principal balance)

Special Instructions (these will be considered when preparing the **Statement of Operation**): *Recipient may attend any accredited post-secondary institution unless otherwise indicated in Special Instructions.*

Fund Location (State/Province/District): _____ Chapter: _____

Contact Person (for any additional information needed to establish this fund):

Name: _____

Address: _____

City _____ State/Province _____ Zip/Postal Code _____

Phone: _____ Email: _____

Name of Scholarship Selection Committee:

Scholarship Selection Committee Chair:

Name: _____

Address: _____

City _____ State/Province _____ Zip/Postal Code _____

Phone: _____ Email: _____

Names/Addresses of Recipients of Annual Activity Statement (maximum of 2):

_____	_____	_____
Name	Address	Chapter Office Held, If Applicable

_____	_____	_____
Name	Address	Chapter Office Held, If Applicable

A fund that is not fully funded with the requisite US \$5,000 minimum balance five (5) years from the date it is established shall be terminated and the balance shall be distributed as part of the Annual Impact Distribution of undesignated funds of the P.E.O. Foundation.

All gifts or donations become part of the P.E.O. Foundation and must be used for P.E.O. educational or charitable purposes. Due to IRS tax regulations, once funds are in the P.E.O. Foundation they cannot be returned to the individual donor or to the local or state/provincial/district chapter from which they were received.

P.E.O. Foundation distributes a listing of funds that have been established within each P.E.O. state/provincial/district (s/p/d) chapter to the officers of these chapters. This information may be posted on s/p/d websites and/or distributed to the members of P.E.O. within the s/p/d chapters. IF YOU DO NOT WISH FOR THIS FUND TO BE INCLUDED ON SUCH A LIST, PLEASE CHECK HERE. ☐

Signature: _____ Date: _____