			** PUBLIC DISCLOSURE COPY	* *		
	0	00	Return of Organization Exempt Fro	om In	ncome Tax	OMB No. 1545-0047
For	mУ	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Coc			» 2019
•		uary 2020)	Do not enter social security numbers on this form as it	e made public.	Open to Public	
Depa	ntment nal Reve	of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the	e latest i	nformation.	Inspection
AF	or th	e 2019 calend	ar year, or tax year beginning and endi	ing		
Β	Check if		forganization		D Employer identific	ation number
a	applicab	THEO	DORE ROOSEVELT PRESIDENTIAL LIBRARY			
X	Addre chang	ge FOUN	DATION			
	chang	ge Doing b	usiness as		47-132404	.3
	returr Final	Number			E Telephone number	
		2	E CENTURY AVENUE 100	0	701-226-7	
	ated Amer	City or t	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	11,884,137.
	returr Appli	DISM	ARCK, ND 58503		H(a) Is this a group ret	
	tiòn pendi	F Name a	nd address of principal officer: ROD BACKMAN AS C ABOVE		for subordinates?	
		empt status:		527	H(b) Are all subordinates inc	
			X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or ESIDENTIALLIBRARY.ORG		H(c) Group exemption	ist. (see instructions)
						State of legal domicile: ND
	art I	Summary				
	1		be the organization's mission or most significant activities: $DESIGN$,	. CON	NSTRUCT. AND	OPERATE
Se	.		SIDENTIAL LIBRARY FOR THEORDORE ROOS			
nar	2		x x if the organization discontinued its operations or disposed o			
Governance	3		ting members of the governing body (Part VI, line 1a)			10
õ	4		lependent voting members of the governing body (Part VI, line 1b)			10
s So	5		of individuals employed in calendar year 2019 (Part V, line 2a)			2
/itie	6	Total number	of volunteers (estimate if necessary)		6	20
Activities &	7 a	Total unrelate	d business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated	business taxable income from Form 990-T, line 39		7b	0.
					Prior Year	Current Year
ē	8	Contributions	and grants (Part VIII, line 1h)		562,127.	11,879,374.
enu	9		ce revenue (Part VIII, line 2g)		0.	0.
Revenue	10		come (Part VIII, column (A), lines 3, 4, and 7d)		-1,435,318.	-39,632.
-	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		-873,191.	11,839,742.
	13		milar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14		to or for members (Part IX, column (A), line 4)		24,815.	197,408.
Expenses	15	Salaries, other	r compensation, employee benefits (Part IX, column (A), lines 5-10)		73,343.	0.
en:	10a	Total fundrais	undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) \blacktriangleright 186,934.		13,343.	
ă	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		466,409.	485,744.
	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25)		564,567.	683,152.
	19		expenses. Subtract line 18 from line 12		-1,437,758.	11,156,590.
Dr Br					jinning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (F	Part X, line 16)		173,924.	11,498,353.
Ass	21		s (Part X, line 26)		98,252.	279,575.
Net-	22		fund balances. Subtract line 21 from line 20		75,672.	11,218,778.
	art II	Signature				
Und	er pen	alties of perjury,	I declare that I have examined this return, including accompanying schedules and	statemer	nts, and to the best of my	knowledge and belief, it is
true	, corre	ct, and complete	. Declaration of preparer (other than officer) is based on all information of which p	oreparer h	nas any knowledge.	

Sign	Signature of officer		Date									
Here	ROD BACKMAN, TREASURER											
	Type or print name and title											
	Print/Type preparer's name	Preparer's signature Date										
Paid	CHERI A. HAARSTICK, CPA	CHERI A. HAARSTICK, 11/04										
Preparer	Firm's name 🍗 BRADY, MARTZ & A	SSOCIATES, P.C.	Firm's EIN 🕨 45-0310328									
Use Only	Firm's address 🖌 2537 S UNIVERSIT	Y DRIVE										
	FARGO, ND 58103		Phone no.701-280-2100									
May the IF	RS discuss this return with the preparer shown ab	ove? (see instructions)	X Yes No									
932001 01-2	932001 01-20-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2019)											

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	THEODORE ROOSEVELT PRESIDENTIAL LIBRARY 1990 (2019) FOUNDATION 47-1324043	Page 2
Par	rt 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: PRESIDENTIAL LIBRARY FOR THEODORE ROOSEVELT	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	X No
	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? Yes If "Yes," describe these changes on Schedule O.	X No
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 \$341,046. including grants of \$) (Revenue \$)
	THE FOUNDATION IS TO PLAN, BUILD, AND OPERATE THE THEODORE ROOSEVELT	
	PRESIDENTIAL LIBRARY. TRPLF IS NOW IN THE PROCESS OF DESIGNING THE	
	LIBRARY. THE SITE & THE EXHIBITS WILL PROVIDE RARE INSIGHT INTO	
	ROOSEVELT'S LIFE. TRPLF IS UNDERTAKING A NATIONAL CAPITAL CAMPAIGN TO	
	BUILD THE LIBRARY.	
46		```
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
70		/
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses > 341,046.	
10	Form 990) (2010)
932002	2 01-20-20	- (2013)

FOUNDATION

Part IV Checklist of Required Schedules

Form 990 (2019)

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			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	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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		X
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?			
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
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		<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u>X</u>
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		<u>X</u>
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 foreign investments valued at \$100,000			77
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			77
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			v
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			v
00	complete Schedule G, Part III	19		X X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		<u> </u>
	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			х
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II	21	990	A (2019)
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Form	990 (2019) FOUNDATION 47-1	324043	3 р	Page
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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			
	Schedule K. If "No," go to line 25a	24 a	ı	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24 b)	<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?		;	<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24 d	I	<u> </u>
25a	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	<u>25a</u>	ı	<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	25 b)	X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	_	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlle			.,
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	_	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV			X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	<u>28b</u>)	X
с	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV		;	X X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		<u>⊢</u> ^
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
	contributions? If "Yes," complete Schedule M			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		⊢^
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			x
00	Schedule N, Part II	32		⊢≏
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00		x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		⊢≏
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		x
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?			X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		<u>'</u>	<u>⊢</u>
b	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 organizatio		'	\vdash
55	If "Yes," complete Schedule R, Part V, line 2			x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	····· •		
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pa				<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	11		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
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Form 990 (2019)

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Form	990 (2019) FOUNDATION 47-1324	043	Р	_{age} 5						
Par	TV Statements Regarding Other IRS Filings and Tax Compliance (continued)			-						
			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return 2a 2									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)									
3a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?									
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b								
	a 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).									
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		X						
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	any contributions that were not tax deductible as charitable contributions?	6a		X						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	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								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c		X						
d	I If "Yes," indicate the number of Forms 8282 filed during the year7d									
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?									
8	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.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
а	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.)									
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year [12b]									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note: See the instructions for additional information the organization must report on Schedule O.									
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			77						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X						
	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			v						
	excess parachute payment(s) during the year?	15		X						
	If "Yes," see instructions and file Form 4720, Schedule N.			v						
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.									

Form **990** (2019)

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FOUNDATION

Form 990 (2019)

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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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1)		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	긱		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X X X X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
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 elect or appoint one or			
	more members of the governing body?	7a		X
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 undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed <u>ND</u>			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 701-226-7466			
	1611 E CENTURY AVENUE , NO. 100, BISMARCK, ND 58503			
			ן 990	(004

THEODORE RC	JOSEVELT	PRESIDENTIAL	LIBRARY

FOUNDATION

Form 990 (2		47-1324043
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 VII

(D)

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.

 $\langle \mathbf{c} \rangle$

(D)

Т

(_)

 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.

(. .

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one					Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar	nd a d	irecto	r/trus	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	r dire				ted		organization	(W-2/1099-MISC)	from the
	related	itee o	ustee			ensa		(W-2/1099-MISC)		organization
	organizations	ll trus	nal tr		loyee	d uo				and related
	below	Individual trustee or director	Institutional trustee	cer	Key employee	hest o	ner			organizations
	line)	ln di	Inst	Officer	Key	Highest compensated employee	Forr			
(1) CATHILEA ROBINETT	10.00									
CHAIR		Х		Х				0.	0.	0.
(2) ROD BACKMAN	15.00									
TREASURER		Х		Х				0.	0.	0.
(3) MARJORIE CURREY	5.00									
SECRETARY		Х		X				0.	Ο.	0.
(4) ROBERT LAUF	5.00									
VICE CHAIR		х		x				0.	Ο.	0.
(5) STEPHEN BECKHAM	5.00									
BOARD MEMBER		х						0.	0.	0.
(6) CHEVY HUMPHREY	5.00									
BOARD MEMBER		х						0.	0.	0.
(7) KERMIT ROOSEVELT III	5.00									
BOARD MEMBER		х						0.	Ο.	0.
(8) SERENA ROOSEVELT	5.00									
BOARD MEMBER		Х						0.	Ο.	0.
(9) MURRAY SAGSVEEN	5.00									
BOARD MEMBER		Х						0.	Ο.	0.
(10) MELANI WALTON	5.00									
BOARD MEMBER		Х						0.	0.	0.
(11) EDWARD O'KEEFE	70.00									
CEO				Х				125,083.	0.	0.
		-								
		I								
932007 01-20-20										Form 990 (2019)

Page 7

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	990 (2019) FOUNDATIC		111	F	ΥĿ	51			TIAL LIBRARY	47-1	324	043	Р	age 8	
Par	EVII Section A. Officers, Directors, Trus (A) Name and title	tees, Key Em (B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					ne an	Compensated Employee (D) Reportable compensation from	es (continued) (E) Reportable compensatio from related	on		(F) Estimated amount of other		
			Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest com pensated employee	Former	the organization (W-2/1099-MISC)	organizatior (W-2/1099-MI	าร	fi org an	pensa rom th anizat d relat	ation le tion ted	
			-												
			-												
			-												
			-												
c d	Subtotal Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A	· · · · · · · ·				 		125,083. 0. 125,083.		0.0.0.			0. 0. 0.	
2	Total number of individuals (including but n compensation from the organization	ot limited to th	iose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	Э		Yes	1 No	
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s			key e	empl	oye	e, or	hig	ghest compensated emp	loyee on		3		x	
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	0,000? If "Yes,	" со	mple	ete S	Sche	edule	J f	for such individual			4		x	
5 Sect	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," com											5		x	
1	Complete this table for your five highest control the organization. Report compensation for the organization for t										pensat	tion fro)m		
	(A) Name and business				U				(B) Description of s		С	(C compe	C) nsatio	n	
	LOWSTONE STRATEGIES 0 FAR WEST DR, BISMARC	<u>K, ND 5</u>	85	04					INTERIM SERV	ICES		10	6,8	00.	
2	Total number of independent contractors (in \$100,000 of compensation from the organiz		ot lin	niteo	d to t	thos 1	se list	ted	above) who received me	ore than		E e a	990 ()	0010	
												rorm	220 (∠U19)	

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932008 01-20-20

Form	1 99	0 (2	2019) FOUNDATION				47-1324	043 Page 9
Pa	rt V	/111						
			Check if Schedule O contains a response of	or note to any lin		(B)	(0)	
					(A) Total revenue	Related or exempt	(C) Unrelated business revenue	(D) Revenue excluded from tax under
								sections 512 - 514
nts nts	1		Federated campaigns 1a					
Gra			Membership dues 1b					
fts,			Fundraising events 1c Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts			Related organizations 1d Government grants (contributions) 1e					
			All other contributions, gifts, grants, and					
		'	similar amounts not included above 1f	11,879,374.				
otl		a	Noncash contributions included in lines 1a-1f	, , -				
Cor		-	Total. Add lines 1a-1f	•	11,879,374.			
				Business Code				
ø	2	а						
Program Service Revenue		b						
Se		с						
am eve		d						
'ogı B		е						
P			All other program service revenue					
			Total. Add lines 2a-2f					
	3		Investment income (including dividends, intere		4 202			4 300
			other similar amounts)		4,392.			4,392.
	4		Income from investment of tax-exempt bond p					
	5		Royalties	(ii) Personal				
	6	~	Gross rents					
	0		Less: rental expenses 6b					
			Rental income or (loss) 6c					
			Net rental income or (loss)					
	7		Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory 7a 371.					
		b	Less: cost or other basis					
en			and sales expenses	44,395.				
evenue		с	Gain or (loss)	-44,395.				
Ě			Net gain or (loss)	►	-44,024.	-44,024.		
Other	8	а	Gross income from fundraising events (not					
δ			including \$ of					
			contributions reported on line 1c). See					
			Part IV, line 18					
			Less: direct expenses 8b					
	0		Net income or (loss) from fundraising events Gross income from gaming activities. See	₽				
	9	d	Part IV, line 19 9a					
		h	Less: direct expenses 9b					
			Net income or (loss) from gaming activities					
	10		Gross sales of inventory, less returns					
			and allowances 10a					
		b	Less: cost of goods sold 10b					
			Net income or (loss) from sales of inventory					
"				Business Code				
Miscellaneous Revenue	11	а						
ane		b						
cell }ev		С						
Mis			All other revenue					
			Total. Add lines 11a-11d		11 020 540	44.004		4 200
0000	12		Total revenue. See instructions	▶	11,839,742.	-44,024.	0.	4,392. Form 990 (2019)
93200	y 01-	-20-	20					FULLI 330 (2019)

932009 01-20-20

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THEODORE ROOSEVELT PRESIDENTIAL LIBRARY Form 990 (2019) FOUNDATION Part IX Statement of Functional Expenses

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	Check if Schedule O contains a response				
	not include amounts reported on lines 6b, 8b, 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				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	170,917.	86,059.	51,275.	33,583
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	10.077			
7	Other salaries and wages	12,375.	8,662.	3,713.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
0	Payroll taxes	14,116.	7,340.	4,235.	2,541
1	Fees for services (nonemployees):				
а	Management				
	Legal	40,244.		40,244.	
С	Accounting	7,761.		7,761.	
d	Lobbying	10,000.	10,000.		
е					
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	5,964. 67,079.		5,964.	
2	Advertising and promotion	67,079.			67,079
3	Office expenses	9,455.		9,455.	
4	Information technology				
5	Royalties				
6	Occupancy	3,680.		3,680.	
7	Travel	18,222.		9,111.	9,111
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 1			
9	Conferences, conventions, and meetings	14,967.		14,967.	
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	2 0 5 0		2 252	
3		3,250.		3,250.	
4	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а		232,500.	157,880.		74,620
b	CONSULTING	71,105.	71,105.		, • _ •
c	MISCELLANEOUS	1,517.	,	1,517.	
d		_, •		,	
	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	683,152.	341,046.	155,172.	186,934
<u>6</u>	Joint costs. Complete this line only if the organization	,			
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Fight following SOP 98-2 (ASC 958-720)				

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932010 01-20-20

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Form 990 (2019)

THEODORE	ROOSEVELT	PRESIDENTIAL	LIBRARY
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Form 990 (2019)
Part X Balance Sheet

		Check if Schedule O contains a response or	note to any line in this Part X		<u></u>	
		·		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		115,966.	1	11,232,151.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any curren				
		trustee, key employee, creator or founder, su	bstantial contributor, or 35%			
		controlled entity or family member of any of t	hese persons		5	
	6	Loans and other receivables from other disqu	alified persons (as defined			
		under section 4958(f)(1)), and persons descri	bed in section 4958(c)(3)(B)		6	
ŝ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
As	9				9	
	10a	Land, buildings, and equipment: cost or othe				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities			11	51,095.
	12	Investments - other securities. See Part IV, lir	ne 11		12	
	13	Investments - program-related. See Part IV, li	ne 11		13	
	14	Intangible assets			14	215,107
	15	Other assets. See Part IV, line 11		15	0 .	
	16	Total assets. Add lines 1 through 15 (must e		1 1 1 2 2 2 2 4	16	11,498,353
	17	Accounts payable and accrued expenses	98,252.	17	279,575.	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Comple			21	
ŝ	22	Loans and other payables to any current or f	ormer officer, director,			
Liabilities		trustee, key employee, creator or founder, su	bstantial contributor, or 35%			
abi		controlled entity or family member of any of t	hese persons		22	
	23	Secured mortgages and notes payable to un	related third parties		23	
	24	Unsecured notes and loans payable to unrela	ated third parties		24	
	25	Other liabilities (including federal income tax,	payables to related third			
		parties, and other liabilities not included on li	nes 17-24). Complete Part X			
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		. 98,252.	26	279,575.
		Organizations that follow FASB ASC 958, o	check here 🕨 🔀			
ces		and complete lines 27, 28, 32, and 33.				
lan	27				27	10,485,637.
Ba	28	Net assets with donor restrictions		. 78,799.	28	733,141.
pun		Organizations that do not follow FASB AS	C 958, check here 🕨 📃			
Net Assets or Fund Balances		and complete lines 29 through 33.				
s S	29	Capital stock or trust principal, or current fun			29	
set	30	Paid-in or capital surplus, or land, building, o	equipment fund		30	
t As	31	Retained earnings, endowment, accumulated			31	
Ne	32	Total net assets or fund balances		75,672.	32	11,218,778.
	33	Total liabilities and net assets/fund balances		173,924.	33	<u>11,498,353</u> .

Form **990** (2019)

932011 01-20-20

THEODORE ROOSEVE	LT PRESIDENTI	AL LIBRARY
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FOUNDATION

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	990 (2019) FOUNDATION	47-	1324	043	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	11	,839		
2	Total expenses (must equal Part IX, column (A), line 25)	2		683		
3	Revenue less expenses. Subtract line 2 from line 1	3	11	,156		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		75	5,6	72.
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8		-13	3,48	84.
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	11	,218	3,7°	78.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	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					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				1
	review, or compilation of its financial statements and selection of an independent accountant?			2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Auc	lit			1
	Act and OMB Circular A-133?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red aud	it			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2019)

932012 01-20-20

SCHEDULE A	Dublic Che	rity Status on		lia Qu	unnart		OMB No. 1545-0047
(Form 990 or 990-EZ)		rity Status an nization is a section 501					2010
		47(a)(1) nonexempt cha					2019
Department of the Treasury Internal Revenue Service	-	Attach to Form 990 or F					Open to Public Inspection
Name of the organizati		v/Form990 for instruction				Employer	identification number
nume er ine er gamzati	FOUNDATION				11/1	• •	7-1324043
Part I Reason	for Public Charity Status	All organizations must co	omplete this	s part.) Se	e instructions		
The organization is not a	a private foundation because it is: (For lines 1 through 12, c	heck only o	ne box.)			
1 A church, co	nvention of churches, or association	on of churches described	l in section	1 70(b) (1	l)(A)(i).		
	cribed in section 170(b)(1)(A)(ii).						
	a cooperative hospital service org			~ ~ ~ ~			44 - 14 - 19 1 - 19 - 19 - 19 - 19 - 19 - 19 - 19 -
	search organization operated in co	njunction with a nospital	described i	n sectio	n 170(b)(1)(A	(III). Enter	the hospital's name,
city, and stat 5 An organizati	ion operated for the benefit of a co	llege or university owned	l or operate	d by a do	vernmental u	nit describe	ed in
	(b)(1)(A)(iv). (Complete Part II.)			a sy a ge			
	ate, or local government or govern	mental unit described in	section 170	0(b)(1)(A)	(v).		
7 🛛 An organizati	ion that normally receives a substa	intial part of its support fi	rom a gover	mmental	unit or from th	ie general p	public described in
section 170(b)(1)(A)(vi). (Complete Part II.)						
	<pre>/ trust described in section 170(b)</pre>		-				
-	al research organization described			-		-	-
	or a non-land-grant college of agric	culture (see instructions).	Enter the na	ame, city	, and state of	the college	or
university:	ion that normally receives: (1) more	than 33 1/3% of its sum	oort from co	ontributio	ns memberst	nin fees an	d gross receipts from
	ited to its exempt functions - subje						
	unrelated business taxable income						
See section	509(a)(2). (Complete Part III.)						
11 🔄 An organizati	ion organized and operated exclus	ively to test for public sa	fety. See s	ection 50)9(a)(4).		
-	ion organized and operated exclus	•	-			-	
	y supported organizations describe						Check the box in
	ough 12d that describes the type of		-			-	- t. d
	upporting organization operated, s ted organization(s) the power to re	-	•	-			
	on. You must complete Part IV, Se		majonty of	the unec			ipporting
	supporting organization supervised		tion with its	supporte	d organizatio	n(s), by hav	ing
control or r	management of the supporting org	anization vested in the sa	ame person	s that co	ntrol or manag	ge the supp	ported
organizatio	on(s). You must complete Part IV,	Sections A and C.					
	nctionally integrated. A supportin					ly integrate	d with,
	ed organization(s) (see instructions		-		-		
	n-functionally integrated. A supp	00				0	
	functionally integrated. The organized	• •			•	an attentiv	reness
	nt (see instructions). You must con box if the organization received a	-				II Type III	
	y integrated, or Type III non-functio				iype i, iype	n, type in	
	ing information about the supporte	ed organization(s).		institute d			
(i) Name of supp organizatior		(iii) Type of organization (described on lines 1-10	(iv) Is the organ in your governing	g document?	(v) Amount of support (see ir	-	(vi) Amount of other support (see instructions)
	1	above (see instructions))	Yes	No	support (see in	istructions)	
							
Total	duation Act Nation and the local	undiana fan Earre 000 a	000 57		O		
	eduction Act Notice, see the Instr	14	990-EZ.	932021 09-	20-19 SCNE	uule A (FOr	m 990 or 990-EZ) 2019

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Schedule A (Form 990 or 990-EZ) 2019 FOUNDATION

Part II

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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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")		15314200.	504,807.	562,127.	11879374.	28260508.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3		15314200.	504,807.	562,127.	11879374.	28260508.		
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)						9819404.		
6	Public support. Subtract line 5 from line 4.						18441104.		
	ction B. Total Support		I.	L	ł				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total		
	Amounts from line 4		15314200.	504,807.		11879374.	28260508.		
	Gross income from interest,			-	-				
	dividends, payments received on								
	securities loans, rents, royalties,								
	and income from similar sources					4,392.	4,392.		
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								
	assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10						28264900.		
	Gross receipts from related activities,	etc. (see instructi	ons)			12			
	First five years. If the Form 990 is for	-							
	organization, check this box and stor	•					X		
Sec	ction C. Computation of Publi								
14	Public support percentage for 2019 (I	ine 6, column (f) d	ivided by line 11, c	olumn (f))		14	%		
15	Public support percentage from 2018					15	%		
16a	33 1/3% support test - 2019. If the c					ore, check this bo	x and		
	stop here. The organization qualifies								
b	33 1/3% support test - 2018. If the o		-						
	and stop here. The organization qual								
17a	10% -facts-and-circumstances test								
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	ere. Explain in Pa	rt VI how the orgar	nization		
	meets the "facts-and-circumstances"				-	-			
b	10% -facts-and-circumstances test	-		• • • •					
	more, and if the organization meets th	-	-						
	organization meets the "facts-and-circ				• •				
18	•			•			s >		
	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Check this box and see instructions								

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Schedule A (Form 990 or 990-EZ) 2019 FOUNDATION

Part III Support Schedule for Organizations Described in Section 509(a)(2)

47-1324043 Page 3

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support	_	-				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiza	ation,
_	check this box and stop here						
Sec	ction C. Computation of Publi	ic Support Per	centage			, <u>,</u>	
	Public support percentage for 2019 (I		•	column (f))		15	%
-	Public support percentage from 2018					16	%
	ction D. Computation of Inves					1 1	
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2019. If the						7 is not
	more than 33 1/3%, check this box a						▶∟
b	33 1/3% support tests - 2018. If the						
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check tl			
93202	23 09-25-19		16		Sch	edule A (Form 990	or 990-EZ) 2019

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Schedule A (Form 990 or 990 EZ) 2019 FOUNDATION
Part IV Supporting Organizations

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(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

- 1 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.
- 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 filing 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 (as 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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2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

Yes No

1

Schedule A (Form 990 or 990-EZ) 2019

10b

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Schedule A (Form 990 or 990-EZ) 2019 FOUNDATION
Part IV Supporting Organizations (continued)

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	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			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	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 carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	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			
			Yes	No
4	Did the examination provide to each of its supported examinations, by the last day of the fifth month of the		162	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)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)		
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			
	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			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	_~		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in</i> Part VI.	3a		
h		Ja		
b		2 h		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Schedule A (Form 990 or 990-EZ) 2019

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Sche				47-1324043 Page 6	
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orgai	nizations		
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in	Part VI). See instructions. All	
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior 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			
6	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			
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)	
1	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			
е	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			
Sect	ion C - Distributable Amount			Current Year	
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
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			

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2019

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	dule A (Form 990 or 990-EZ) 2019 FOUNDATION		4	7-1324043 Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	6	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
	From 2015			
	From 2016			
	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D.			
•	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
Ŭ	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
U	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
'	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2016			
	Excess from 2018 Excess from 2019			
6	LAUG33 IIUII 2013			

Schedule A (Form 990 or 990-EZ) 2019

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Schedule A	(Form 990 or 990-EZ) 2019 E	OUNDATION		47-1324043 Page 8
Part VI	Supplemental Informa Part IV, Section A, lines 1, 2, line 1; Part IV, Section D, line	tion. Provide the explanations require 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 1 s 2 and 3; Part IV, Section E, lines 1c, 2 and Part V, Section E, lines 2, 5, and 6.	1b, and 11c; Part IV, Section B, lin 2a, 2b, 3a, and 3b; Part V, line 1; P	es 1 and 2; Part IV, Section C, art V, Section B, line 1e; Part V,
932028 09-25-	9		Sch	edule A (Form 990 or 990-EZ) 2019

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

** PUBLIC DISCLOSURE COPY

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

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Employer identification number

Name of the	е	organization

Organization type (check one):

THEODORE ROOSEVELT PRESIDENTIAL LI	BRARY
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FOUNDATION

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Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributions totaling \$5,000 or more during the year for an *exclusively* set is contributed.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

THEODORE ROOSEVELT PRESIDENTIAL LIBRARY FOUNDATION

Employer identification number

47-1324043

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>10,250,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>700,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>250,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>250,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

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	ORE ROOSEVELT PRESIDENTIAL LIBRARY ATION		47-1324043
Part II	Noncash Property (see instructions). Use duplicate copies of Part	Il if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	Data received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		_	

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Page 3

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

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Schedule B (Form 990, 990-EZ, or 990-PF) (2019)	
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	E ROOSEVELT PRESIDENTI	IAL LIBRARY	Employer identification number
fr c L) through (e) and the following line ent charitable, etc., contributions of \$1,000 or	$\frac{47 - 1324043}{47 - 1324043}$ ection 501(c)(7), (8), or (10) that total more than \$1,000 for the yeatry. For organizations less for the year. (Enter this info. once.) $\blacktriangleright $
a) No. from Part I 	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_	Transferee's name, address, an	(e) Transfer of gif nd ZIP + 4	t Relationship of transferor to transferee
) No.			
rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, an	(e) Transfer of gif	Relationship of transferor to transferee
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gif	t Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
 	Transferee's name, address, an	(e) Transfer of gif	t Relationship of transferor to transferee
-			

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SCHEDULE C	Political Campaign and Lobbying Activitie	es	OMB No. 1545-0047
(Form 990 or 990-EZ)	For Organizations Exempt From Income Tax Under section 501(c) and section	2019	
Department of the Treasury Internal Revenue Service	 Complete if the organization is described below. Attach to Form 990 or Fo Go to www.irs.gov/Form990 for instructions and the latest informatio 		Open to Public Inspection
If the organization answ	vered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Ca	ampaign Activ	ities), then
 Section 501(c)(3) org 	anizations: 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 organization 	ations: Complete Part I-A only.		
If the organization answ	vered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying	Activities), the	n
 Section 501(c)(3) org 	anizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. I	Do not complet	e Part II-B.
 Section 501(c)(3) org 	anizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part	II-B. Do not co	mplete Part II-A.
If the organization answ	vered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or F	orm 990-EZ, P	art V, line 35c (Proxy
Tax) (see separate inst	ructions), then		
 Section 501(c)(4), (5) 	, or (6) organizations: Complete Part III.		
Name of organization	THEODORE ROOSEVELT PRESIDENTIAL LIBRARY	Employer	identification number
	FOUNDATION	4	7-1324043
Part I-A Comple	ete if the organization is exempt under section 501(c) or is a sectior	n 527 organi	zation.

1	Provide a descrip	otion of the orga	nization's direct	and indirect i	political campaid	gn activities in Part IV.

2 Political campaign activity expenditures	
3 Volunteer hours for political campaign activities	0
Part I-B Complete if the organization is exempt under section 501(c)(3).	
1 Enter the amount of any excise tax incurred by the organization under section 4955	• \$
2 Enter the amount of any excise tax incurred by organization managers under section 4955	► \$
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	Yes No
4a Was a correction made?	
b If "Yes," describe in Part IV.	
Part I-C Complete if the organization is exempt under section 501(c), exce	ept section 501(c)(3).
1 Enter the amount directly expended by the filing organization for section 527 exempt function ac	ctivities > \$
2 Enter the amount of the filing organization's funds contributed to other organizations for section	527
exempt function activities	► \$
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,	
line 17b	► \$
4 Did the filing organization file Form 1120-POL for this year?	YesNo

5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization
	made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political
	contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a
	political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2019

932041 11-26-19

Schedule C (Form 990 or 990-EZ) 2019						324043 Page 2
Part II-A Complete if the orga	anization	is exer	npt under sectior	n 501(c)(3) and file	d Form 5768 (ele	ection under
section 501(h)).						
A Check 🕨 🛄 if the filing organizati	ion belongs	to an affi	liated group (and list ir	Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and share	of excess	lobbying	expenditures).			
B Check ► if the filing organizati	ion checked	d box A a	nd "limited control" pro	ovisions apply.		
	s on Lobby itures" mea	• •	nditures ınts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public	opinion (grassroots lobbying)			
b Total lobbying expenditures to influe						
c Total lobbying expenditures (add line						
d Other exempt purpose expenditures						
e Total exempt purpose expenditures						
f Lobbying nontaxable amount. Enter				r		
If the amount on line 1e, column (a) or			bying nontaxable am			
Not over \$500,000	(0) 15.		the amount on line 1e.			
Over \$500,000 but not over \$1,000,	000		00 plus 15% of the exc			
Over \$1,000,000 but not over \$1,000,			00 plus 10% of the exc			
Over \$1,500,000 but not over \$1,50			00 plus 10% of the exce			
	00,000			ss over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
a Creasesta pantavable amount (ant	or 2504 of lir	20.1f)				
 g Grassroots nontaxable amount (enter h Subtract line 1g from line 1a. If zero 		,				
		•				
i Subtract line 1f from line 1c. If zero	-		line 1; did the even	•		
j If there is an amount other than zero reporting section 4911 tax for this ye						Yes No
			eraging Period Under	Section E01(b)		
(Some organizations that	at made a s	section 5		have to complete all o	f the five columns b	elow.
	Lobby	ing Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 20	16	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount						
 b Lobbying ceiling amount (150% of line 2a, column(e)) 						
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

932042 11-26-19

Schedule C (Form 990 or 990-EZ) 2019 FOUNDATION

47-1324043 Page 3 er section 501(c)(3) and has NOT filed Form 5768

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)
of the	lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?		x		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X		
	Publications, or published or broadcast statements?		Х		
	Grants to other organizations for lobbying purposes?		Х		
	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		10	,000.
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		-
	Other activities?		Х		
i	Total. Add lines 1c through 1i			10	,000.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(5)	, or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from th		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"NO" OR (b	b) Part I	II-A, line	3, IS
1	Dues, assessments and similar amounts from members		. 1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
с	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		. 5		
Par	t IV Supplemental Information				
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A,	, lines 1 ar	nd 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2019

			al Financial Statemen		OMB No. 1545-0047
(Forn	n 990)	Part IV, line 6, 7, 8, 9, 10	anization answered "Yes" on Form 99 , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or	iu, 12b.	ZUIS Open to Public
	ment of the Treasury I Revenue Service		Attach to Form 990. 90 for instructions and the latest infor	mation.	Inspection
Nam	e of the organizatio	n THEODORE ROOSEVELT FOUNDATION	PRESIDENTIAL LIBRAR	Y Em	nployer identification number 47-1324043
Par	t I Organiza	tions Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accou	nts. Complete if the
	organization	n answered "Yes" on Form 990, Part IV, lir			
			(a) Donor advised funds	(b) Fu	nds and other accounts
1		d of year			
2 3		contributions to (during year) grants from (during year)			
4		end of year			
5		n inform all donors and donor advisors in		/ised funds	
	are the organization	n's property, subject to the organization's	exclusive legal control?		Yes No
6	•	n inform all grantees, donors, and donor a	0 0	-	
		oses and not for the benefit of the donor o			
Par		ation Easements. Complete if the or			
1		ervation easements held by the organizati		, i art iv, into i	·
		of land for public use (for example, recrea	· · · ·	of a historically	y important land area
	Protection of	natural habitat	Preservation	of a certified h	istoric structure
		of open space			
2	•	through 2d if the organization held a quali	fied conservation contribution in the form	m of a conserva	
•	day of the tax year.			2a	Held at the End of the Tax Year
a b		nservation easements			
c	•	ation easements on a certified historic str			
d		ation easements included in (c) acquired a			
	listed in the Nationa	al Register		2d	
3		ration easements modified, transferred, re	eased, extinguished, or terminated by the	he organizatior	n during the tax
4	year				
4 5		where property subject to conservation east ion have a written policy regarding the per		 of	
Ŭ		procement of the conservation easements in			Yes No
6		hours devoted to monitoring, inspecting,			
	▶				
7		es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserv	vation easemer	nts during the year
•	►\$				
8		ration easement reported on line 2(d) abov (4)(B)(ii)?	•		Yes No
9		e how the organization reports conservati			
		include, if applicable, the text of the footr			
_		ounting for conservation easements.			. .
Par		tions Maintaining Collections of		Other Simila	ar Assets.
		the organization answered "Yes" on Form elected, as permitted under FASB ASC 95			
Ia	e	asures, or other similar assets held for pul	· · ·		
		Part XIII the text of the footnote to its final			public
b	· •	elected, as permitted under FASB ASC 95			et works of
	art, historical treasu	ures, or other similar assets held for public	exhibition, education, or research in fu	rtherance of pu	ublic service,
	-	ng amounts relating to these items:			
		ded on Form 990, Part VIII, line 1			\$
~			agurage or other similar agosts for financ		
2		received or held works of art, historical tre nts required to be reported under FASB A		nai yain, provid	
а	-	on Form 990, Part VIII, line 1	-	►	\$
		Form 990, Part X			\$
		duction Act Notice, see the Instruction			Schedule D (Form 990) 2019
932051	10-02-19		20		

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2019.06030 THEODORE ROOSEVELT PRESID 97979_1

THEODORE	ROOSEVELT	PRESIDENTIAL	LIBRARY
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		E ROOSEVEL	PRESIDEN	LIAL LIBRA			~ . ~	
	dule D (Form 990) 2019 FOUNDAT							8 Page 2
	rt III Organizations Maintaining C						(contir	lued)
3	Using the organization's acquisition, accession	on, and other record	s, check any of the f	following that make s	significant i	use of its		
	collection items (check all that apply):	_						
a	Public exhibition	d		hange program				
b	Scholarly research	e	Other					
с	Preservation for future generations							
4	Provide a description of the organization's co	=	•	-		se in Part	XIII.	
5	During the year, did the organization solicit o						٦.,	
Da	to be sold to raise funds rather than to be ma t IV Escrow and Custodial Arrange						Yes	No No
Fai	rt IV Escrow and Custodial Arrang reported an amount on Form 990, Par		ete if the organizatio	n answered "Yes" of	n Form 990), Part IV, I	ine 9, or	
					in a lucal a al			
1a	Is the organization an agent, trustee, custodia		•			_	7 ¥ • •	
	on Form 990, Part X?					∟	Yes	No No
D	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:				A	
					4.		Amount	[
	Beginning balance							
	Additions during the year							
e f	Distributions during the year							
f 2a	Ending balance Did the organization include an amount on Fo						Yes	No
	If "Yes," explain the arrangement in Part XIII.				• • • • • • • • • • • • • • • • • • • •		_ 165	
Par						<u></u>		
		(a) Current year	(b) Prior year	(c) Two years back		years back	(a) Four	years back
1a	Beginning of year balance	15,150.	15,020.			rours buok		yours buck
	Contributions	50,814.	110.	10,020.		5,000.		
c	Net investment earnings, gains, and losses	371.						
	Grants or scholarships							
	Other expenditures for facilities							
C	and programs							
f	Administrative expenses							
g	End of year balance	66,335.	15,130.	15,020.		5,000.		
2	Provide the estimated percentage of the curr	,	,	,				
	Board designated or quasi-endowment		%					
	Permanent endowment 100.00	%						
		/°						
Ū	The percentages on lines 2a, 2b, and 2c sho	, -						
3a	Are there endowment funds not in the posses		tion that are held ar	nd administered for t	he organiza	ation		
	by:						ſ	Yes No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza						3b	
4	Describe in Part XIII the intended uses of the							•
Par	rt VI Land, Buildings, and Equipm							
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Part X	, line 10.			
	Description of property	(a) Cost or o	ther (b) Cost	or other (c)	Accumulate	ed	(d) Bool	< value
		basis (investn	nent) basis	(other) de	epreciation			
1a	Land							
	Buildings							
	Leasehold improvements							
	Equipment							
	Other							
Tota	I. Add lines 1a through 1e. <i>(Column (d) must e</i>	qual Form 990, Part J	X, column (B), line 1	0c.)				0.

Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 FOUNDATION

47-1324043 Page 3

Part VII Investments - Other Securities. Complete if the organization answered "Yes" on Form 990, I

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value				
(1) Financial derivatives						
(2) Closely held equity interests						
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)						

Part VIII Investments - Program Related.

Complete if the organization answered "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)		
Total. (Col. (b) must equal Form 990. Part X. col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col Part X	lumn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.	
1.	(a) Description of liability	(b) Book value
(1) Fe	ederal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2019

►

932053 10-02-19

Sche	edule D (Form 990) 2019 FOUNDATION			Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Sta	tements With Revenu	ie per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.		
1	Total revenue, gains, and other support per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	atements With Expen	ses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, lir	ne 12a.	F - F	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
с	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Amounts included on Form 990, Part IX, line 23, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a b				
	Investment expenses not included on Form 990, Part VIII, line 7b	4b	4c	
b c 5	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4b		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

TRPLF	WILL	USE	ENDOWMENT	FUNDS	FOR	THE	PURPOSE	OF	DESIGN,	CONSTRUCTION
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AND OPERATION OF THE PRESIDENTIAL LIBRARY

932054 10-02-19

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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. THEODORE ROOSEVELT PRESIDENTIAL LIBRARY

FOUNDATION

Employer identification number 47-1324043

OMB No. 1545-0047

Open to Public

Inspection

19

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OF THE UNITED STATES.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTANT AND REVIEWED BY THE CFO. A

COPY IS PROVIDED TO EACH BOARD MEMBER PRIOR TO FILING THE RETURN.

FORM 990, PART VI, SECTION B, LINE 12C:

BOARD MEMBERS ARE REQUIRED TO COMPLETE A QUESTIONAIRE. ANY POTENTIAL

CONFLICTS OF INTEREST ARE REVIEWED BY THE BOARD CHAIR AND RESOLVED WITH THE

PARTIES INVOLVED.

FORM 990, PART VI, SECTION B, LINE 15A:

THE BOARD USESS A THIRD PARTY TO PERFORM A STUDY FOR THE CEO'S

COMPENSATION. OTHER TOP MANAGEMENT ARE COMPARED TO SALARIES IN THE REGION.

FORM 990, PART VI, SECTION C, LINE 19:

UPON REQUEST

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 932211 09-06-19