# Form 990

SCANNED JAN 1 2 2010

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

e organization may have to use a copy of this return to satisfy state reporting requirements

2008
Open to Public Inspection

		nue Service I he organization may have to use a copy of this return to sa	atisfy state r	eporting requirements.	Inspection
A F	or the	e 2008 calendar year, or tax year beginning and	ending		
В	heck if pplicables Address chang	ss label or print or PARTNERSHIP		D Employer identific	
느	_lchang	Doing Business As	<del></del>	06385	
	return Termii ation	Specific   '	Room/suite 6TH_FL	E Telephone number 202-6	554-4600
	Amen return	ded tions City or town, state or country, and ZIP + 4		G Gross receipts \$	4,697,397.
	Application	[ WADITINGTON, DC 20004-1300		H(a) is this a group ret	urn
	pendi	F Name and address of principal officer GEORGE COOPER SAME AS C ABOVE		for affiliates? <b>H(b)</b> Are all affiliates inclu	Yes X No
		empt status X 501(c) ( 3 ) ◀ (insert no.)		If "No," attach a li	st. (see instructions)
<u>J V</u>	<u>Ve</u> bsi	te: ► WWW.TRCP.ORG		H(c) Group exemption	
K T	ype of	organization X Corporation Trust Association Other ▶	L Year	of formation 2002 M	State of legal domicile DE
Pa	irt l	Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities SEE	PART I	II OF FORM 9	90.
rua	2	Check this box If the organization discontinued its operations or dispos	sed of more	than 25% of its assets	
ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3	19
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	19
es	5	Total number of employees (Part V, line 2a)		5	37
ΞĚ	6	Total number of volunteers (estimate if necessary)		6	0
cţi	7a	Total gross unrelated business revenue from Part VIII, Ingert2 requirer (6)		7a	0.
•	ь	Total gross unrelated business revenue from Part VIII, Inc. 12 column (s)  Net unrelated business taxable income from Form 990. Line 34		7b	0.
		Ĭ		Prior Year	Current Year
Revenue		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)  JAN 0 5 2010		5,265,737.	4,666,356.
eve.		Investment income (Part VIII, column (A), lines 3, 4, and 70)		74,829.	31,041.
ď		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 70c, and 1eUT		. 1,0230	01/0110
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,340,566.	4,697,397.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		7,010,000	1,00.,00,0
		Benefits paid to or for members (Part IX, column (A), line 4)			
y,	l	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,581,396.	2,370,939.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	71,139.	2,0.0,000	
per		Total fundraising expenses (Part IX, column (D), line 25) ► 165, 28	86.		, transmit in the contract of
Щ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		2,516,045.	2,955,711.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<del></del>	4,168,580.	5,326,650.
		Revenue less expenses Subtract line 18 from line 12		1,171,986.	-629,253 <b>.</b>
or es		. Co. Co. Co. Co. Co. Co. Co. Co. Co. Co	<del></del>	Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	<del>  -</del>	2,748,334.	2,408,083.
Ass I Ba	21	Total liabilities (Part X, line 26)	-	354,227.	693,229.
Net	22	Net assets or fund balances Subtract line 21 from line 20		2,394,107.	1,714,854.
P	ırt II	Signature Block		2/05/1/20/1	
		Under penalties of penalty declare that I have examined this return, including accompanying schedules an and complete Declaration of preparer (giver than officer) is based on all information of which preparer has a	d statements, a	and to the best of my knowledge	and belief, it is true, correct,
Sigr	1			1 11-5-	09
Her	е	Signature of officer		Date	
		GEORGE /COOPER, PRESIDENT AND CEO Type or propriating and title	<del></del>		
		Property Date	Che	ck if Preparer	s identifying number
Paid		signature David F. Maling CPA 11-3-6	99 self		uctions)
Prep	arer's	Firm's name (or GELMAN, ROSENBERG & FREEDMAN	1 2111		<del></del>
Use	Only	yours if self-employed). 4550 MONTGOMERY AVE., SUITE 650	ипа∪и	EIN -	
		address, and	MOVIU	Dharage - / 2	01) 951-9090
May	the If	RS discuss this return with the preparer shown above? (see instructions)	· · · · · · · · · · · · · · · · · · ·	TABOUG NO P (3	$X$ Yes $\square$ No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2008)

Pa	rt III Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission:
	THE THEODORE ROOSEVELT CONSERVATION PARTNERSHIP'S MISSION IS TO
	GUARANTEE ALL AMERICANS QUALITY PLACES TO HUNT AND FISH.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes", describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? X Yes No
	If "Yes", describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
	(Code: ) (Expenses \$ 1,555,106. including grants of \$ ) (Revenue \$
	UNIONS: THE USA PROGRAM IS A ONE-OF-A-KIND, HUNTING AND FISHING PROGRAM
	OF THE TRCP AND ITS TRADE UNION PARTNERS, EXCLUSIVELY FOR
	CONSERVATION-MINDED UNION MEMBERS, RETIREES AND THEIR FAMILIES THAT
	HUNT, FISH AND APPRECIATE THE OUTDOORS.
4b	(Code ) (Expenses \$ 854,301 • including grants of \$ ) (Revenue \$
	ROADLESS: THE TRCP BELIEVES THAT PROPER MANAGEMENT OF ROADLESS AREAS IN
	OUR NATIONAL FORESTS CAN PROVIDE QUALITY HUNTING AND FISHING OPPORTUNITIES FOR ALL AMERICANS, THEREFORE THE TRCP MAKES SURE YOUR
	VOICE IS HEARD IN DISCUSSIONS DETERMINING THE FATE OF INVENTORIED
	ROADLESS AREAS IN YOUR STATE.
4c	(Code: ) (Expenses \$ 647,855 • Including grants of \$ ) (Revenue \$ )
	ENERGY: BY COMBINING SCIENCE-BASED EXPERTISE WITH AN ACTIVE NETWORK OF
	SPORTSMEN, THE TRCP'S ENERGY STAFF WORKS WITH HUNTERS AND ANGLERS
	THROUGHTOUT THE WEST TO CONSERVE OUR OUTDOOR TRADITIONS BY SUPPORTING
	RESPONSIBLE ENERGY DEVELOPMENT.
4d	Other program services. (Describe in Schedule O.)
<u></u>	(Expenses \$ 1,511,594 • including grants of \$ ) (Revenue \$ )  Total program service expenses ▶ \$ 4,568,856 • (Must equal Part IX, Line 25, column (B) )
<u>4e</u>	Total program service expenses ►\$ 4,568,856. (Must equal Part IX, Line 25, column (B))  Form 990 (2008)
	rom <b>390</b> (2006)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1		
	If "Yes," complete Schedule A	1	Х	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	_3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	1		
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N/	Α
6	Did the organization maintain any donor advised funds or any accounts where 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		Х
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; 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		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	,		
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? 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 questions 24b-24d and complete Schedule K			1
	If "No", go to question 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Х
		Form	990 (	

# Part IV Checklist of Required Schedules (continued)

			163	140
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	X	
b	Have a family member who had a direct or indirect business relationship with the organization?		-	
	If "Yes," complete Schedule L, Part IV	28ь		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х

Form **990** (2008)

# Part V Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1ą				
	U.S. Information Returns Enter ·0· if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	}
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 37			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	Ì
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	За	İ	Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
h	If "Yes," enter the name of the foreign country:	70		
J	See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	50	i i	Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5a</u> 5b		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	ЭD		
C	Tax Shelter Transaction?	<b>5</b> -		
6.	Did the organization solicit any contributions that were not tax deductible?	5c		Х
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		
D	were not tax deductible?	66		
7		6b		
7	Organizations that may receive deductible contributions under section 170(c).  Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	70		Х
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a_		A.
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b		
C	to file Form 8282?	70		х
<b>ا</b>	If "Yes," Indicate the number of Forms 8282 filed during the year	7c		
	<u> </u>			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7-	1	Х
		7e		X
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	Х	- 11
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	X	-
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  N/A	8		
^	excess business holdings at any time during the year?  N / A  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
9	Did the organization make any taxable distributions under section 4966?  N/A	0-		
a	/-	9a		
b		9ь		
10	Section 501(c)(7) organizations. Enter N/A			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 504(4)(40) agreement on Form N/A			
11	Section 501(c)(12) organizations. Enter: N/A			
a	Gross income from members or shareholders  11a			
ь	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 N/A 12b	<u></u>		
		Form	990 (	2008)

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			•	
<u>,-</u>	Months doverning body and management	-		Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,	Γ		162	140
	processes, or changes in Schedule O. See instructions				
1a		19			
b	Enter the number of voting members that are independent	19			
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		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	ŀ			
	of officers, directors or trustees, or key employees to a management company or other person?		3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	Ī	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	Ī	5		X
6	Does the organization have members or stockholders?	Ī	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	[			
	governing body?		7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	Γ	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	Γ			
	by the following:				
а	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?		8b	Χ	
9a	Does the organization have local chapters, branches, or affiliates?		9a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,				
	and branches to ensure their operations are consistent with those of the organization?		9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must				
	describe in Schedule O the process, if any, the organization uses to review the Form 990		10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		11		<u> X</u>
<u>Sec</u>	tion B. Policies				
		_		Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	-	12a		<u>X</u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise				
	to conflicts?	-	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	1		İ	
	in Schedule O how this is done	F	12c		
13	Does the organization have a written whistleblower policy?		13		<u>X</u>
14	Does the organization have a written document retention and destruction policy?	-	14		<u>X</u>
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	ı		v	
	The organization's CEO, Executive Director, or top management official?		15a	Х	
Ð	Other officers or key employees of the organization?		15b		<u>X</u>
16-	Describe the process in Schedule O. (see instructions)		1		
ioa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1	v
	taxable entity during the year?	-  -	16a		<u> </u>
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation		ŀ		
	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	l	40.		
800	exempt status with respect to such arrangements? tion C. Disclosure		16b		
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CO, CT, DC,	FT.	GA	TT.	KC
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.			, 111	, KB
10	public inspection. Indicate how you make these available. Check all that apply.	able 1	or		
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy		4 6i~ -	20/21	
13	statements available to the public.	y, and	ıınar	icial	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organ	01=c+.	on: 🛌		
	GEORGE COOPER - 202-654-4600	ıızatl	on: 🖊		
	555 11TH STREET, NW, 6TH FLOOR, WASHINGTON, DC 20004-1300				
832006 12-18-			Earm (	990 (	20087
12-18-	w and compact a raw rate profit of privile		LOUIL :	33U (	2000)

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee, or key employee

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours	(6	Position (check all that apply)		Reportable compensation	Reportable compensation	Estimated amount of			
	per	$\vdash$	T	T T		T	,,,, 	from	from related	other
	week	frustee or director				뮲		the	organizations	compensation
		Stee	ustee		_	ensat		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		la t	onal t		akold	15 g				and related
		Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
JAMES D. RANGE	<del>-  </del>						-			
CHAIRMAN	0.50	X		Х				0.	0.	0.
R. THOMAS BUFFENBARGER										
DIRECTOR	0.50	X	ļ					0.	0.	0.
CHARLES COLLINS										
DIRECTOR	0.50	Х						0.	0.	0.
MATTHEW HOGAN	1									
DIRECTOR	0.50	Х						0.	0.	0.
CHARLES GUAVIN										
DIRECTOR	0.50	X			L	_	L	0.	0.	0.
WILLIAM HITE										
DIRECTOR	0.50	Х					<u> </u>	0.	0.	0.
J. MICHAEL NUSSMAN										
DIRECTOR	0.50	X						0.	0.	0.
CHRISTOPHER MERRITT										
DIRECTOR	0.50	Х						0.	0.	0.
JAMES MARTIN										
DIRECTOR	0.50	Х						0.	0.	0.
DAVID PERKINS							İ		_	_
DIRECTOR	0.50	X						0.	0.	0.
MARK PIERCE									_	_
DIRECTOR	0.50	X						0.	0.	0.
CHARLES POTTER										_
DIRECTOR	0.50	Х	<u> </u>					0.	0.	0.
JOHN "MICK" SEIDL	0.50	l						,		_
DIRECTOR	0.50	X					ļ	0.	0.	0.
ROLLIE SPARROWE	0.50	l						00 -00		
DIRECTOR	0.50	Х	<u> </u>					22,500.	0.	3,525.
HOWARD VINCENT	0.50	١								•
DIRECTOR	0.50	X						0.	0.	0.
ALAN WENTZ	0.50	١,,						_	_	^
DIRECTOR	0.50	X		_		_	<u> </u>	0.	0.	0.
STEVEN WILLIAMS	0.50	,,						_		^
DIRECTOR 822007 12-18-08	0.50	X				<u></u>		0.	0.	0. Form <b>990</b> (2008)

832007 12-18-08

Form 990 (2008)

R ane

Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	оуеє	es, a	nd l	High	nest	Compensated Employ	ees (continued)			
(A)	(B)			(D)	(E)		(F)					
Name and title	Average	١.	Position		Reportable	Reportable		Estimat	.ed			
	hours	(c	heck	k all	that	app	oly)	compensation	compensation	ē	mount	
	per week	ector	ļ					from the	from related organizations	60	other mpens:	
		o di	g.	ļ		ated		organization	(W-2/1099-MISC)		from th	
		nstee	TUSE	l	88	Suadu		(W·2/1099·MISC)	,		ganıza	
		trait tr	tonal	١.	ploy	St con	_				nd rela	
		individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated	Ę,			or	ganızat	ions
SID EVANS		┢	F	-	_	-	1			-		
DIRECTOR	0.50	Х						0.	0			0.
DONALD ROLLINS		┢			<del> </del>				<u> </u>	+		
DIRECTOR	0.50	X						0.	0			0.
GEORGE COOPER			_				<u> </u>			•		
PRESIDENT/CEO	40.00			Х			ĺ	164,632.	0	. 2	21,1	35.
FRED MYERS									-			
VP/USA EXEC. DIRECTOR	40.00					Х		134,425.	0	. :	13,3	72.
WILLIAM D'OLIVERIA												
DEPUTY DIRECTOR USA	40.00	<u> </u>				Х		89,855.	0	.  3	37,1	76.
THOMAS FRANKLIN												
SENIOR VP	40.00					X	L.,	113,654.	0	. 1	l8,4	21.
THOMAS ST. HILAIRE	1											
VP, CAMPAIGN MANAGEMENT	40.00					Х		100,262.	0	• 1	10,0	92.
MATTHEW CONNOLLY									_	ľ		
PRESIDENT EMERITUS	0.50					_	Х	46,000.	. 0	•	_	0.
				_								
1b Total	L					<b></b>	L	671,328.	0	. 10	3,7	21.
2 Total number of individuals (including those	e in 1a) who re	ceive	ed m	ore	thar	n \$1	00,0	000 in reportable			<u> </u>	
compensation from the organization									<b>&gt;</b>	•		4
									-		Yes	No
3 Did the organization list any former officer,	director or tru	stee	, key	em/	ploy	yee,	or h	ighest compensated en	nployee on			
line 1a? If "Yes," complete Schedule J for s										3	X	
4 For any individual listed on line 1a, is the su	ım of reportab	le co	mpe	ensa	tion	and	d oth	er compensation from t	he organization			
and related organizations greater than \$15			-							4	X	ļ
5 Did any person listed on line 1a receive or a				rom	any	unr	elate	ed organization for servi	ces rendered to			İ
the organization? If "Yes," complete Sched	ule J for such	oers	on							5	<u> </u>	X
Section B. Independent Contractors	<del></del>											_

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
HUSCH BLACKWELL SANDERS, LLP, 4801 MAIN STREET, SUITE 1000, KANSAS CITY, MO 64112	LEGAL	288,636
		-
2 Total number of independent contractors (including those in 1) who received in from the organization ▶ 1	nore than \$100,000 in compensation	

Form **990** (2008)

PARTNERSHIP

Pa	rt VĮII	Statement of Rever	nue					
•					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts		Federated campaigns	1a					
gra		Membership dues	1b					
a,t		Fundraising events	1c					
Contributions, gifts, grants and other similar amounts		Related organizations	1d	<del></del>				
		Government grants (contribut	F					
iğ bi	f	All other contributions, gifts, gran	1 1	4 666 356				
	_	similar amounts not included abo		4,666,356.				
ang	_	Noncash contributions included in lines  Total. Add lines 1a-1f	1a-1r \$	<b>—</b>	4666356.			
-	- ii	rotal. Aud lines ra II		Business Code	1000330.			
. I	2 a			Business code				
Program Service Revenue	b							
용필	c							
e a	d							-
Par.	е							
ا ته	f	All other program service reve	enue					
	g	Total. Add lines 2a-2f		<b></b>				
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		<b>&gt;</b>	31,041.			31,041.
	4	Income from investment of ta	x-exempt bond p	proceeds				
	5	Royalties						
			(ı) Real	(II) Personal	<u> </u>			
	6 a	Gross Rents	<u></u>	<del> </del>				
		•	ļ					
		Rental income or (loss)		<u> </u>	Ī	<u> </u>		
		Net rental income or (loss)  Gross amount from sales of	(i) Securities	(II) Other	<u> </u>			, -, .,,,,,,
	/ a	assets other than inventory	(I) Securities	(ii) Other				
	h	Less: cost or other basis	<del></del>	<del> </del>		-		
- 1		and sales expenses						
	С	Gain or (loss)						
		Net gain or (loss)		<b>•</b>			<u> </u>	
Other Revenue		Gross income from fundraisin including \$						
eve		contributions reported on line		1				
<u>ت</u>		Part IV, line 18	a			=		
£	b	Less: direct expenses	b					
١	С	Net income or (loss) from fund	draising events					<del>,</del>
	9 a	Gross income from gaming ac	ctivities. See	Į.				
		Part IV, line 19	а					
		Less: direct expenses	b		Į			
		Net income or (loss) from gan						<del></del>
	10 a	Gross sales of inventory, less				-		
ì		and allowances	a .		į			
		Less: cost of goods sold	b		Į į			
	<u>c</u>	Net income or (loss) from sale		<u> </u>				
	44.5	Miscellaneous Revenu		Business Code	ł :			
	11 a b			<del> </del>	<del> </del>		<del> </del>	
	,D C		<del></del>				-	
	d	All other revenue	·					
	_	Total. Add lines 11a-11d		<b></b>				
	12	Total Revenue Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c, 9c, 10	0c, and 11e	4697397.	0.	_ 0.	31,041.
83200 02-02							· · · · · · · · · · · · · · · · · · ·	Form <b>990</b> (2008)

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

	All other organizations must comp		tions must complete al		(D)
	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 governments and		37,531,000	gonoral expenses	cxpenses
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				, , , , , , , , , , , , , , , , , , , ,
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the US		·		
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	185,767.	111,460.	55,730.	18 <b>,</b> 577.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 010 000			
7	Other salaries and wages	1,818,239.	1,511,989.	217,464.	88,786.
8	Pension plan contributions (include section 401(k)	22 212	22		
_	and section 403(b) employer contributions)	38,819.	33,585.	4,289. 21,076.	945. 4,731.
9	Other employee benefits	186,364.	160,557.	21,076.	4,731.
10	Payroll taxes	141,750.	119,021.	18,246.	4,483.
11	Fees for services (non-employees)				
a	Management	224 011	275 245	40.666	<del></del>
b	Legal	324,911.	275,245.	49,666.	
C.	Accounting	29,503.		29,503.	
d	, , , , , , , , , , , , , , , , , , ,				
e	Professional fundraising services See Part IV, line 17				<del>" - "</del>
f	Investment management fees	715 020	620 657	05 750	400
9		715,838.	629,657.	85,752.	429.
12	Advertising and promotion	182,430. 509,072.	180,460.	582.	1,388. 9,115.
13	Office expenses	176,076.	446,115.	53,842.	9,115.
14	Information technology	170,070.	86,249.	89,561.	266.
15	Royalties	138,360.	45,879.	02 401	<del></del> -
16 17	Occupancy Travel	319,319.	266,206.	92,481. 38,768.	14 245
18	<u> </u>	319,319.	200,200.	30,700.	14,345.
10	Payments of travel or entertainment expenses				
19	for any federal, state, or local public officials  Conferences, conventions, and meetings	114,554.	75,084.	32,255.	7,215.
20	Interest	114/334.	73,004.	32,233.	7,213.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,908.		14,908.	
23	Insurance	22,847.	7,576.	15,271.	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	22,017.	,,,,,,,,	13,271.	
а	POLLING & TV PRODUCTION	348,759.	348,759.		
b	ADMINISTRATIVE FEES	46,250.	46,250.		
С	DUES & SUBSCRIPTIONS	12,884.	7,781.	4,324.	779.
d	INDIRECT COSTS	0.	216,983.	-231,210.	14,227.
е			•		, = = 7 -
f	All other expenses			-	
25	Total functional expenses. Add lines 1 through 24f	5,326,650.	4,568,856.	592,508.	165,286.
26	Joint Costs. Check here ▶ ☐ If following			-	
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

832010 12-18-08

Form 990 (2008)

Form 990 (	2008)	
Part X.	Balance	Sheet

7 (2)	* 241	balance offeet	(A) Beginning of year		(B)
		Cook and total beauty	500.		End of year
İ	1	Cash · non-interest-bearing	1,826,667.	1	1,000.
	2	Savings and temporary cash investments		2	1,598,765.
	3	Pledges and grants receivable, net	869,106.	3	738,511.
	4	Accounts receivable, net		4	1,000.
İ	5	Receivables from current and former officers, directors, trustees, key			
		employees, or other related parties. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
ŀ		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
- 1		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	11,680.	9	14,628.
	10a	Land, buildings, and equipment cost basis 10a 99,303	3.		, , , , , , , , , , , , , , , , , , , ,
	ь	Less accumulated depreciation Complete			
		Part VI of Schedule D 10b 45, 124	39,497.	10c	54,179.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	884.	15	0.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,748,334.	16	2,408,083.
	17	Accounts payable and accrued expenses	354,227.	17	693,229.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
ا بر	21	Escrow account liability. Complete Part IV of Schedule D		21	
Ë	22	Payables to current and former officers, directors, trustees, key employees,			- T
Liabilities		highest compensated employees, and disqualified persons. Complete Part II		,	
֡֡֡֞֞֞֞֞֡֓֞֡֓֞֡֡֡֓֞֡֓֞֡֡֡֡֡֡֡֡		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties			
	24	Unsecured notes and loans payable		23	
ĺ			<del></del>	24	<del> </del>
	25	Other liabilities. Complete Part X of Schedule D	354,227.	25_	693,229.
_	26_	Total liabilities. Add lines 17 through 25	334,227.	26	093,229.
		Organizations that follow SFAS 117, check here X and complete			
ces		lines 27 through 29, and lines 33 and 34.	912 041		0 150
au	27	Unrestricted net assets	812,941.	27	9,152.
Ř	28	Temporarily restricted net assets	1,581,166.	28	1,705,702.
פ	29	Permanently restricted net assets		_29	, , , , , , , , , , , , , , , , , , ,
3		Organizations that do not follow SFAS 117, check here and			
Net Assets or Fund Balanc		complete lines 30 through 34.			
Set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	<u> </u>
e	32	Retained earnings, endowment, accumulated income, or other funds		32	<u> </u>
_	33	Total net assets or fund balances	2,394,107.	_33_	1,714,854.
	34	Total liabilities and net assets/fund balances	2,748,334.	34	2,408,083.
Par	t XI	Financial Statements and Reporting	<del></del>	_	Yes No
1	Acco	unting method used to prepare the Form 990. Cash X Accrual	Other		
		the organization's financial statements compiled or reviewed by an independent			2a X
		the organization's financial statements audited by an independent accountant			2b X
		s* to lines 2a or 2b, does the organization have a committee that assumes res		audit	· · · · · · · · · · · · · · · · · · ·
		w, or compilation of its financial statements and selection of an independent ac		auuit,	47
		·		ام ۸۰۰۰	
Ja		result of a federal award, was the organization required to undergo an audit or nd OMB Circular A-133?	audits as set forth in the Sing	ie Aud	1.   1.
	n 16	s," did the organization undergo the required audit or audits?			[ЗЬ

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2008 Open to Public Inspection

OMB No 1545-0047

Name of the organization

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

Employer identification number 04-3706385

Part I	Reason	for Public Char	ity Status (All organiz	ations mus	st complet	e this part	.) (see inst	tructions)				
The organ	nization is not a	private foundation	because it is: (Please ch	eck only o	ne organiz	ation.)						
1 🗀	A church, co	nvention of churche	s, or association of churc	ches descr	ribed in se	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	<b>'0(b)(1)(A)(ii)</b> . (Attach Sc	hedule E)								
3	A hospital or	a cooperative hospi	tal service organization of	described i	n section	170(b)(1)	<b>(A)(iii).</b> (Att	tach Sche	dule H)			
4	A medical res	search organization	operated in conjunction	with a hos	pıtal descr	ibed in se	ction 170	(b)(1)(A)(ii	i). Enter ti	he hospital	's nam	ne,
	city, and stat	e:										
5 🗀			benefit of a college or ur	niversity ov	vned or op	erated by	a governr	nental uni	t describe	ed in		
	_	(b)(1)(A)(iv). (Comple		·		,	-					
6 🗀			ent or governmental uni	t described	d in sectio	n 170(b)(1	)(A)(v).					
7 X	•	. •	eives a substantial part					r from the	general p	oublic desc	rıbed ı	n
	<del>-</del>	<b>b)(1)(A)(vi).</b> (Comple										
8 🗀	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)											
9 🔲	•		eives: (1) more than 33 1		•	om contri	butions, m	nembershij	o fees, an	nd gross red	celpts	from
	•	-	nctions · subject to certa							_	-	
			axable income (less sect		-							
		509(a)(2). (Complete	•		•		,					
10 🔲			perated exclusively to te	st for publi	c safety. S	ee sectio	n 509(a)(4	l). (see ins	tructions)	)		
11 🗔	-	-	perated exclusively for th								of one	or
	more publicly	supported organization	ations described in secti	on 509(a)(1	l) or sectio	n 509(a)(2	) See sec	tion 509(a	a)(3). Che	ck the box	that	
			organization and compl									
	a Type		7		e III · Func		egrated		d 🗔	Type III • (	Other	
е 🔙			at the organization is not	controlled	directly of	r indirectly	by one or	r more disc	qualified p	persons oth	ner tha	เก
			than one or more publicly									
f	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III											
	supporting o	rganization, check tl	his box									
g	Since Augus	t 17, 2006, has the o	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?			
	(i) A perso	n who directly or inc	firectly controls, either al	lone or tog	ether with	persons o	lescribed i	ın (II) and (I	III) below,		Yes	No
	the gov	erning body of the s	upported organization?							11g(i)		<u> </u>
	(ii) A famıly	member of a perso	n described in (i) above?	,						11g(ii)		L
	(iii) A 35%	controlled entity of a	a person described in (i) o	or (iı) above	∋?					11g(iii)	<u> </u>	<u> </u>
h	Provide the f	ollowing information	about the organizations	the organ	ızatıon sup	oports.						
		<u></u>		_						<del></del> -		
(i) Name	e of supported	(ii) EIN	(iii) Type of	p. /	rganization		•	(vi) is	the	(vii) An	nount o	of
	anization	(,	organization (described on lines 1-9	in col (i) listed in your organization in col		organization in col (i) organized in the			port			
			above or IRC section		document?		support?	0.5	7			
			(see instructions))	Yes	No	Yes	No	Yes	No			
							1	<u> </u>				
		ļ.		<b>\</b>				<b>!</b>				
							ļ	1				
								<u> </u>				
		l					[					
				<b> </b>	ļ	<b> </b>		<u> </u>	<b> </b> -			
			<u></u>	<u> </u>	<u> </u>	ļ <u>.</u>	<u></u>	<u> </u>	<u> </u>			
							1					
Total				<u> </u>	<u> </u>	<u> </u>	<u> </u>	1	<u> </u>			
LHA For	Privacy Act a	nd Paperwork Redu	uction Act Notice, see t	he Instruc	tions for F	Form 990.		Schedul	e A (Forn	n 990 or 99	90-EZ	2008

Schedule A (Form 990 or 990-EZ) 2008 PARTNERSHIP

04-3706385 Page 2 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) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2,119,772 3,229,337, 3,088,563 5,265,737 4,666,356 18 369 765. 2 Tax revenues levied for the organization'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 - 3 2,119,772 3,229,337 3,088,563 5,265,737, 4,666,356 18,369,765. 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) 4,047,246. 6 Public Support. Subtract line 5 from line 4 14,322,519. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total 7 Amounts from line 4 2,119,772 3,229,337 3,088,563 5,265,737. 4,666,356. 18,369,765. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 56,153. 75,789. 162,983. 31,041. and income from similar sources 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 4,149. 7,397. 15,743. 27,289. assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 18,560,037. 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 77.17 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 14 61.96 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 15 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ightharpoons Xstop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2008

	ert III   Support Schedule for ( ction A. Public Support	Jrganizations	Described in	Section Susta	(Complete on	y if you checked the bo	ox on line 9 of Part I
	endar year (or fiscal year beginning in)	(2) 2004	(h) 0005	(=) 0000	(-1) 0007	(-) 0000	<u> </u>
		(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	<b>(f)</b> Total
•	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants")						
_					-		
2	Gross receipts from admissions, merchandise sold or services performed, 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 business 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 - 5						
7a	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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						<del>-</del> -
Sec	tion B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6						
10a	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						
	Add lines 10a and 10b 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 IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thir	d, fourth, or fifth to	ax year as a secti	on 501(c)(3) organiza	ation,
	check this box and stop here						▶□
Sec	tion C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2008 (	ine 8, column (f) d	ivided by line 13, d	column (f))		15	%
16	Public support percentage from 2007	Schedule A, Part	IV-A, line 27g			16	%
Sec	tion D. Computation of Inve	stment Incom	e Percentage				
17	Investment income percentage for 20	<b>08</b> (line 10c, colur	mn (f) divided by lir	ne 13, column (f))		17	<u>%</u>
18	Investment income percentage from:	2007 Schedule A,	Part IV-A, line 27h			18	%
19a	33 1/3% support tests - 2008. If the	organization did r	not check the box	on line 14, and line	15 is more than	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a						▶□
b	33 1/3% support tests - 2007. If the						ind
	line 18 is not more than 33 1/3%, che						▶□
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ir	structions	▶□
					Sc	hedule A (Form 990	or 990-EZ) 200

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

## Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

To be completed by organizations described below.

Attach to Form 990 or Form 990-EZ.

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

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

Section 501(c)(4), (5), or (6) organizations Complete Part III

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II·B. Do not complete Part II·A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

Name of orga	nization THEODOF	RE ROOSEVELT CON	SERVATION	Emp	loyer identification number
	PARTNEF				04-3706385
Part I-A	To be completed b	y all organizations exer	npt under section	501(c) and section 5	27 organizations.
	See the instructions for	Schedule C for details		<u></u>	
		zation's direct and indirect polit	ical campaign activities	s in Part IV.	
2 Political	expenditures			▶ \$	<u> </u>
3 Voluntee	r hours				
B. A. B.	<del></del>				<del></del>
Part I-B	See the instructions for S	y all organizations exer Schedule C for details	npt under section	1 501(c)(3).	
1 Enter the	amount of any excise tax	incurred by the organization ur	nder section 4955	▶ \$	S
2 Enter the	amount of any excise tax	incurred by organization mana	gers under section 495	<b>5 ▶</b> \$	S
3 If the org	anization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
4a Was a co	orrection made?				Yes No
	describe in Part IV.				
Part I-C	To be completed b	y all organizations exer	npt under section	501(c), except section	on 501(c)(3).
	See the instructions for S				
		d by the filing organization for s			S
		nization's funds contributed to d	other organizations for s	section 527	
•	unction activities			▶\$	
	•	function expenditures. Add line	es 1 and 2 and enter he	re and on	
_	20-POL, line 17b			▶ \$	
	ling organization file Form				└── Yes └── No
		mployer identification number (I			
		e if the amount was paid from the		•	
	nal space is needed, prov	a separate political organization	, such as a separate se	egregated tund or a political	action committee (PAC).
- additio		1	( ) = ( )		T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
				filing organization's funds If none, enter -0	l
					delivered to a separate
					political organization. If none, enter -0
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·	<del> </del>				
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. LHA

Schedule C (Form 990 or 990-EZ) 2008

832041 12-18-08

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) Total			
2a Lobbying non-taxable amount	284,443.	306,688.	358,429.	416,333.	1,365,893.			
b Lobbying ceiling amount (150% of line 2a, column(e))					2,048,840.			
c Total lobbying expenditures	83,589.	25,000.	17,772.	12,727.	139,088.			
d Grassroots non-taxable amount	71,111.	76,672.	89,607.	104,083.	341,473.			
e Grassroots ceiling amount (150% of line 2d, column (e))					512,210.			
f Grassroots lobbying expenditures	32,500.		10,572.	5,548.	48,620.			

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008 PARTNERSHIP

04-3706385 Page 3

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# Schedule D

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008 Open to Public Inspection

Name of the organization

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

Employer identification number 04-3706385

Schedule D (Form 990) 2008

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor		. — —
Pa			
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or		istorically important land area
	Protection of natural habitat		fied historic structure
	Preservation of open space	T TOSOT VALION OF SOIL	nos motorio structure
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a con	nservation easement on the last day
_	of the tax year.	sorvation semmedicin in the form of a con	isorvation casement on the last day
	or the tax year.		Held at the End of the Year
а	Total number of conservation easements		2a
h	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	` '	2d
3	Number of conservation easements modified, transferred, re		
•	year ▶	incused, extinguished, or terminated by the	ie organization during the taxable
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		and
	enforcement of the conservation easements it holds?	riodio monitoring, inspection, violations, t	Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	nd enforcing easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about		
•	and section 170(h)(4)(B)(ii)?	to eation, the requirements of section 77.	Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expens	
	include, if applicable, the text of the footnote to the organiza		
	conservation easements.	men e maneral etaterneme mat december	the organization's accounting for
Pa	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	ot to report in its revenue statement and b	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	•	•
	the footnote to its financial statements that describes these	•	
ь	If the organization elected, as permitted under SFAS 116, to		nce sheet works of art, historical treasures
_	or other similar assets held for public exhibition, education, or		
	these items.	or research in farmorance of public service	or, provide the following amounts relating to
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures or other similar assets for financi	
~	the following amounts required to be reported under SFAS 1		ai gairi, provide
_	Revenues included in Form 990, Part VIII, line 1	ro relating to these items:	<b>•</b> •
a			► \$ ► \$
ь	Assets included in Form 990, Part X		•

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

	rt III Organizations Maintaining C		U:-	torical T		041-		04-37		
3	Using the organization's accession and othe	r records, check an	y of the	following the	at are a signif	licant us	e of its co	lection ite	ems (chec	k all
	that apply):		. $ abla$							
a	Public exhibition		<b>'</b>		change progr	ams				
b	Scholarly research	•	• 📖	Other						_
C	Preservation for future generations									
4	Provide a description of the organization's co							ose in Par	t XIV	
5	During the year, did the organization solicit o					er sımıla	r assets	_	_	
Da	to be sold to raise funds rather than to be ma								_ Yes_	NoNo
Pa	Trust, Escrow and Custodial reported an amount on Form 990, Par	: <b>Arrangements</b> t X, line 21.	. Comp	olete if organ	iization answ	ered "Ye	s" to Forn	1 990, Pai	rt IV, line 9	9, or
1a	Is the organization an agent, trustee, custodi	an or other interme	diary for	contribution	ns or other as	sets not	Included			
	on Form 990, Part X?		-						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table:						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			_
е	Distributions during the year						1e		_	
f	Ending balance						1f	_		
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Yes	☐ No
<u>b</u>	If "Yes," explain the arrangement in Part XIV.								_	
Pa	TY Endowment Funds. Complete if	organization answe	ered "Ye	es" to Form	990, Part IV,	lıne 10.				
		(a) Current year	(b) F	Prior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance					77	*			<del>4 </del>
b	Contributions						***************************************			***************************************
С	Investment earnings or losses				"					
d	Grants or scholarships							***************************************		
е	Other expenditures for facilities					7'	. ,			<del>, , . , , , , , , , , , , , , , ,</del>
	and programs					Ī				
f	Administrative expenses			· · · · · · · · · · · · · · · · · · ·			7-1-			
g	End of year balance						·····	***************************************		
2	Provide the estimated percentage of the year	r end balance held a	as:			r.			<del></del>	
а	Board designated or quasi-endowment		%							
b	Permanent endowment ►	%	_							
С	Term endowment ▶	<del></del> %								
3a	Are there endowment funds not in the posses	ssion of the organiz	ation th	at are held a	ınd admınıste	ered for t	he organiz	ation		
	by.	•							[-	Yes No
	(i) unrelated organizations								3a(i)	100 100
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	listed as required o	n Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Building				, Part X, line	10.				
	Description of investment	(a) Cost or o			or other		epreciatio	n	(d) Book	value
		basis (investr	nent)	basis	(other)	` ,	•		(-,	
1a	Land									
ь	Buildings									
c	Leasehold improvements									
d	Equipment		•	9	9,303.		45,12	24.	54	,179.
е	<u>Other</u>									. = •
Total	. Add lines 1a-1e. (Column (d) should equal Fo	rm 990, Part X. colu	mn (B).	line 10(c).)				<b></b>	54	,179.

Schedule D (Form 990) 2008

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Part VII Investments - Other Securities.	See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value		od of valuation of-year market value
Financial derivatives and other financial products		<u> </u>	
Closely-held equity interests			
Other			
Total. (Col (b) should equal Form 990, Part X, col (B) line 12 )			
Part VIII Investments - Program Related.	See Form 990, Part X, line 13.		
(a) Description of investment type	(b) Book value		od of valuation f-year market value
		· <del>-</del> -	
•···		,, , , , , , , , , , , , , , , , , , , ,	
Total (Col (b) should equal Form 990, Part X, col (B) line 13 )	<u> </u>		
Part IX Other Assets. See Form 990, Part X, Irr			
(a	a) Description		(b) Book value
		<del></del>	
		<del></del>	
	<del></del>		
	<del></del>		
	<del></del>		
Total. (Column (b) should equal Form 990, Part X, col (B)			
Part X Other Liabilities. See Form 990, Part > (a) Description of liability		b) Amount	
		S) Amount	
Federal income taxes			
		<del></del>	
		<del></del>	
Total. (Column (b) should equal Form 990, Part X, col (B)			
In Part XIV, provide the text of the footnote to the organization	zation's financial statements th	at reports the organization's	liability for uncertain tax positions

under FIN 48. 832053 12-23-08

PARTNERSHIP

	TXI Reconciliation of Change in Net Assets from Form 990	) to Financia	l Statements	<del></del>	3100303 Fage 4
	Total revenue (Form 990, Part VIII, column (A), line 12)	to i manoic	1		4,697,397.
1, 2			2		5,326,650.
	Total expenses (Form 990, Part IX, column (A), line 25)		<del></del> 1		-629,253.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	<del></del> -	-023,233.
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		-50,000.
7	Prior period adjustments		7		-30,000.
8	Other (Describe in Part XIV)		8		-50,000.
9	Total adjustments (net). Add lines 4-8		9		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10	2-4	<u>-679,253.</u>
	t XII   Reconciliation of Revenue per Audited Financial State	ILIGITES AAITH	nevenue per r	7 7	4,853,334.
1	Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1	4,033,334.
2		ا مما			
a	Net unrealized gains on investments	_2a	155,937	- 1	
b	Donated services and use of facilities	2b		4 ∣	
	Recoveries of prior year grants	2c	<del></del> -	-	
d	Other (Describe in Part XIV)	2d		- 1	155 027
_	Add lines 2a through 2d			2e	155,937. 4,697,397.
3	Subtract line 2e from line 1			3	4,031,331.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 . 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	_4a		- 1	
p	Other (Describe in Part XIV)	4b	<del></del>	- <del> </del>	0
_	Add lines 4a and 4b			4c	4,697,397.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)		F	5	<del></del>
	t XIII Reconciliation of Expenses per Audited Financial State	ements with	Expenses per		
1	Total expenses and losses per audited financial statements			11	5,482,587.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1	155 027		
а	Donated services and use of facilities	2a	155 <b>,</b> 937.	4	
b	Prior year adjustments	2b		-	
C	Losses reported on Form 990, Part IX, line 25	2c		4 1	
d	Other (Describe in Part XIV)	2d		4 l	155 005
e	Add lines 2a through 2d			2e	155,937.
3	Subtract line 2e from line 1			3	5,326,650.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1		1 1	
а	investment expenses not included on Form 990, Part VIII, line 7b	4a	_ <del></del>	4 1	
b	Other (Describe in Part XIV)	4b		1 1	
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18	3)		5	5,326,650.
Pa	t XIV Supplemental Information	<del></del>			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Pa	art III, lines 1a ai	nd 4; Part IV, lines 1	b and	2b, Part V, line 4, Part
Х; Ра	rt XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.				
				_	
					<del></del>
				Cabaa	tule D (Ferm 000) 2009

#### SCHEDULE J (Form 990)

Department of the Treasury

# **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

Employer identification number 04-3706385

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ь	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision			
	of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
			·	.,
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a:			
а	Receive a severance payment or change of control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
	The organization?	5a		$\frac{x}{x}$
b	Any related organization?	5b		<u>X</u>
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
	The organization?	6a		<u>X</u>
b	Any related organization?	6b		X
_	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		<u> </u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regs. section 53.4958·4(a)(3)? If "Yes," describe in Part III	8		Х

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

Schedule J (Form 990) 2008

04-3706385

# PARTNERSHIP

Schedule J (Form 990) 2008

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(F)	reported in prior Form 990 or Form 990-EZ	0	0	0	0.																													Schedule J (Form 990) 2008
(E)	(D)·(I)(B)	185,767.	0	46,000.	0.																													Schedule
(D)	benefits	17,002.	0	0	0																													
(C)	compensation	4,133.	0	0	0.																													
3C compensation	(iii) Other compensation				0																													
N-2 and/or 1099-MISC compensation	(ii) Bonus & incentive compensation	0	0	0.	0 •				:																									
(B) Breakdown of \	(i) Base compensation	164,632.	0	46,000.	• 0																													
		Ξ	Ξ	<b>E</b>	(E)	€	Ξ	€	<u> </u>	Ξ	(E)	Ξ	<u> </u>	Ξ	<u> </u>	Ξ	(ii)	ε	Ξ	8	(E)	(1)	(ii)	<u>(i)</u>	(ii)	()	Ξ	ε	(ii)	(I)	(ii)	(3)	(ii)	
	(A) Name		GEORGE COOPER		MATTHEW CONNOLLY																													

#### SCHEDULE L

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

#### **Transactions with Interested Persons**

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, lines 38a or 40b.

2008 Open To Public Inspection

OMB No 1545-0047

Name of the organization THEODORE ROOSEVELT CONSERVATION
PARTNERSHIP

Employer identification number

	TIVERSH			<u> </u>					14-31	0030	<u> </u>	
Part I Excess Benefit						=						
To be completed by	organization	s that ar	swered "Ye	<u>s" on Form 99</u>	0, Part IV,	line 25a or 2	55 <u>,</u> or F	<u>orm 99</u>	0-EZ, Pa	rt V, line		
(a) Name of dis	-		(c) Corrected									
	——————————————————————————————————————		<del></del>	<u> </u>		Description o			<del>-</del>		Yes	No_
				<del> </del>		<del></del>			<del></del>			
				<del></del>			<del></del>		<u>-</u>			
				<del> </del>			<del> </del>					
	_	<del></del>		<u> </u>								
			<del>-</del> -	<del> </del>								
			<u>.</u>		<del></del>							
2 Enter the amount of tax impo	osed on the d	organizat	tion manage	rs or disqualifi	ed person	s during the	year und	der				
section 4958	0	-b	عا له م مدر عامد د						<b>5</b>			
3 Enter the amount of tax, if ar	ıy, on iine ∠,	above, r	eimbursed b	y the organiza	ation				• \$			<del></del>
Part II Loans to and/o	r From Int	ereste	d Person			·	<del></del>					
					O Dort IV	line 26 or E	arm 000	EZ Do	ممال لا اسم	200		
(a) Name of Interested	(b) Loan 1						(e)		EZ, Part V, line 38a.  (f) Approved			ritten
person and purpose	the organ			ıınal principal imount	(a) Bala	ance due	defa		by bo	ard or		ment?
	То	From	;				Yes	No	No Yes		Yes	No
<del></del>		11011	<del>'   </del>	_					103	No	,03	110
					_				1			
				7.0								
												,
Total				▶ \$								*************
Part III Grants or Assis	tance Ber	nefiting	g Interest	ed Person	s.							
To be completed by	organization	s that ar	swered "Yes	s" on Form 99	0, Part IV,	lıne 27.						
(a) Name of interested	person		(b) Relat	tionship betwe			and		(c) Amou			pe
			· · · · · · · · · · · · · · · · · · ·	the or		of assistance						
		$\perp$						<u> </u>				
				<u> </u>						_		
								Ш				
							_					
B. Vikal B. · · ·												
Part IV Business Trans			_									
To be completed by		- h						1			(a) She	
(a) Name of interested	• •	hip between ir nd the organiz		(c) Amo transa			Descript transacti		(e) Sharing of organization's			
			person a	no the organiz	ation	liansa	CHOIT		liansact	1011	rever	
TAMES D DANCE	ил томах	<del></del>		Λ1E	T 0F	CTNC	EOD	Yes	No X			
JAMES D. RANGE JAMES D. RANGE	HAIRMAN					GING						
JAMES D. RANGE ROLLIE SPARROWE		OARD C	<u>HAIRMAN</u>					TENA SULT			X	
VOTITE STAKKOME		<u>P</u>	TKECTO			30	,000	<u>. LOI</u>	юОГТ	TING	<del></del>	Х
								<del> </del> -				
								<del></del>				

SEE SCHEDULE O FOR SCHEDULE L CONTINUATIONS

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

Schedule L (Form 990 or 990-EZ) 2008

### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

Employer identification number 04-3706385

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:
THE THEODORE ROOSEVELT CONSERVATION PARTNERSHIP ADDED CLIMATE CHANGE
AND JOINT ENERGY PROGRAMS.
FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:
THE THEODORE ROOSEVELT CONSERVATION PARTNERSHIP ELIMINATED ITS
MEMBERSHIP AND POLICY PROGRAMS DUE TO LACK OF FUNDING.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
TV SHOW
EXPENSES \$ 408126. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
COMMUNICATIONS
EXPENSES \$ 308750. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
WETLANDS
EXPENSES \$ 271534. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
JOINT ENERGY
EXPENSES \$ 248960. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FARM POLICY
EXPENSES \$ 125001. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
ENTERIOR TO THOUSE THE STATE OF THE THOUSE THE THE THE THE THE THE THE THE THE TH
FISHERIES/MARINE
EXPENSES \$ 90591. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.  LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule O (Form 990) 2008

#### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

Employer identification number 04-3706385

MINING
EXPENSES \$ 31700. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
STATE WILDLIFE
EXPENSES \$ 23655. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
CLIMATE CHANGE
EXPENSES \$ 3277. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 10: A COPY OF THE 990 IS PROVIDED TO
THE FINANCE COMMITTEE FOR REVIEW AND COMMENT. A COPY OF THE 990 IS PROVIDED
TO THE BOARD BEFORE IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS OBTAINED
ASSISTANCE IN DETERMINING THE APPROPRIATE COMPENSATION FOR THE CEO.
COMPARABILITY DATA WAS OBTAINED BY A THIRD PARTY AND PROVIDED TO THE BOARD
TO ASSIST IN ITS DETERMINATION. THE DELIBERATION AND DECISION OCCURED
DURING EXECUTIVE SESSION OF A MEETING OF THE BOARD OF DIRECTORS.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AK, AL, AR, AZ, CA, CO, CT, DC, FL, GA, IL, KS, KY, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM
NY,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WI,WV
FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST THESE ITEMS WILL BE
FURNISHED. A CONFLICT OF INTEREST POLICY IS NOT CURRENTLY AVAILABLE BUT IS

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

832211 12-18-08 Schedule O (Form 990) 2008

#### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public Inspection

Name of the organization

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

Employer identification number 04-3706385

UNDER CONSIDERATION BY THE BOARD OF DIRECTORS.
SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: JAMES D. RANGE
(D) DESCRIPTION OF TRANSACTION: LODGING FOR BOARD MEETING.
(A) NAME OF PERSON: JAMES D. RANGE
(D) DESCRIPTION OF TRANSACTION: SUBTENANT RENTAL AGREEMENT WITH FIRM IN
WHICH CHAIRMAN IS PARTNER.
(A) NAME OF PERSON: ROLLIE SPARROWE
(D) DESCRIPTION OF TRANSACTION: CONSULTING SERVICES FOR PROGRAM
INITIATIVES.
FORM 990, PART VI, LINE 12 AND LINE 13
THE ORGANIZATION WAS IN PROCESS OF IMPLEMENTING A WRITTEN CONFLICT OF
INTEREST POLICY AND A WRITTEN WHISTLEBLOWER POLICY IN 2008. THESE
POLICIES ARE OFFICIALLY IN EFFECT IN 2009.

2008 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

990

Current Year Deduction	864.	14,044. 14,908.
Current Sec 179	0	0 0
Accumulated Depreciation	2,503.	27,713. 27,713. 30,216.
Basis For Depreciation	6,048.	93,255.
Reduction In Basis	o	0 0
Bus % Excl		
Unadjusted Cost Or Basis	6,048.	93,255.
Line No	7 9	16
Life	5.00	2.00
Method	N N	N. C. C. C. C. C. C. C. C. C. C. C. C. C.
Date Acquired	VARIESSI	VARIESSI
Description	FURNITURE & FIXTURES (D)FURNITURE AND 1FIXTURES * 990 PAGE 10 TOTAL FURNITURE & FIXTURES	2(D)COMPUTER EQUIPMENT * 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT * GRAND TOTAL 990 PAGE 10 DEPR
Asset No	П	

(D) - Asset disposed

828 102 04-25-08

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone