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Return of Organization Exempt From Income Tax

2008

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

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

Open to Public Inspection

For the 2008 calendar year, or tax year beginning 10/01, 2008, and ending 9/30, 2009

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending		Please use IRS label or print or type. See specific instructions. HERBERT HOOVER PRESIDENTIAL LIBRARY ASSOCIATION, INC. P.O. BOX 696 WEST BRANCH, IA 52358	D Employer identification number 42-0848288
		E Telephone number (319)-643-5327	G Gross receipts \$ 982,469.
F Name and address of principal officer RUBY TRIPLETT SAME AS C ABOVE		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☒ No If 'No,' attach a list (see instructions)	
I Tax-exempt status ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527		H(c) Group exemption number	
J Website: WWW.HOOVERASSOCIATION.ORG			
K Type of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other		L Year of formation: 1954 M State of legal domicile: IA	

Part I Summary	
1 Briefly describe the organization's mission or most significant activities: <u>TO PROTECT AND PRESERVE HERBERT HOOVER MEMORABILIA AS DESCRIBED IN PART III AND SCHEDULE O.</u>	
2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.	
3 Number of voting members of the governing body (Part VI, line 1a) 3 45	
4 Number of independent voting members of the governing body (Part VI, line 1b) 4 45	
5 Total number of employees (Part V, line 2a) 5 7	
6 Total number of volunteers (estimate if necessary) 6 144	
7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 7a 0.	
b Net unrelated business taxable income from Form 990-T, line 34 7b 0.	
Revenue	8 Contributions and grants (Part VIII, line 1h) 24,196. 749,173.
	9 Program service revenue (Part VIII, line 2g) 11,660.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 31,630. 182,028.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 3,339. 29,803.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 70,822. 961,004.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 45,914. 120,460.
	14 Benefits paid to or for members (Part IX, column (A), line 4)
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 56,959. 250,194.
	16a Professional fundraising fees (Part IX, column (A), line 11e)
	b Total fundraising expenses (Part IX, column (D), line 25) 66,184.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 240,027. 271,623.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 342,900. 642,277.
19 Revenue less expenses. Subtract line 18 from line 12 -272,078. 318,727.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16) 4,969,905. 5,194,291.
	21 Total liabilities (Part X, line 26) 64,579. 90,891.
	22 Net assets or fund balances. Subtract line 21 from line 20 4,905,326. 5,103,400.

Part II Signature Block	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
Sign Here ANN BARBER DOYLE Signature of officer	1-26-10 Date
ANN BARBER DOYLE Type or print name and title TREASURER	
Paid Preparer's Use Only Preparer's signature Steven G. Unruh Firm's name (or yours if self-employed), address, and ZIP + 4 GREENWOOD AND CRIM, PC, CPA'S 510 S. CLINTON, P.O. BOX 2236 IOWA CITY, IA 52244-2236	Date 1/21/2010 Check if self-employed ☐ Preparer's identifying number (see instructions) N/A EIN N/A Phone no. (319) 351-0231

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

SEE SCHEDULE O2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ 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 ☒ 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.

4a (Code: ☐) (Expenses \$ 395,710. including grants of \$ 120,460.) (Revenue \$ 12,378.)TO COLLECT AND PRESERVE HISTORICAL MATERIAL RELATING TO THE LIFE AND TIMES OF HERBERT HOOVER AND TO PROMOTE RESEARCH AND GRANT SCHOLARSHIPS TO WORK TOWARDS THIS GOAL. THERE WERE 24 TOTAL RECIPIENTS OF GRANTS AND SCHOLARSHIPS DURING THE REPORTING PERIOD.4b (Code: ☐) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)4c (Code: ☐) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ► \$ 395,710. (Must equal Part IX, Line 25, column (B).)

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)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		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 reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III		
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		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	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		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
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	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	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U.S.?		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		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		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		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I		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		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	X	
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J		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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,' go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
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		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		X
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		X
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		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a 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)? <i>If 'Yes,' complete Schedule L, Part IV</i>	28a X	
b Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV.</i>	28b X	
c 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? <i>If 'Yes,' complete Schedule L, Part IV</i>	28c X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M.</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI.</i>	37	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	46	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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	7	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
4a	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)? b If 'Yes,' enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Did the organization solicit any contributions that were not tax deductible?		X
6b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
7b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If 'Yes,' indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
7h	For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
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?		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		X
9b	Did the organization make any distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from other members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		

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

For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body.....		
1b Enter the number of voting members that are independent.....		
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? SEE SCHEDULE O.....	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.....		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?.....		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?.....		X
6 Does the organization have members or stockholders?.....		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?.....		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?.....		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.....	X	
b Each committee with authority to act on behalf of the governing body?.....	X	
9a Does the organization have local chapters, branches, or affiliates?.....		X
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?.....		
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. SEE SCHEDULE O.	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.....		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13.....	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?.....	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done. SEE SCHEDULE O.....	X	
13 Does the organization have a written whistleblower policy?.....	X	
14 Does the organization have a written document retention and destruction policy?.....	X	
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: a The organization's CEO, Executive Director, or top management official?.....	X	
b Other officers of key employees of the organization? SEE SCHEDULE O..... Describe the process in Schedule O. (see instructions)		X
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?.....		X
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?.....		

Section C. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE

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 for public inspection. Indicate how you make these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. SEE SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
 ▶ KATHY FREDERICK P.O. BOX 696 WEST BRANCH IA 52358 (319)-643-5327

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.

- 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) or 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.

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RUBY TRIPLETT PRESIDENT	5	X		X				0.	0.	0.
CHARLIE BECKER VICE PRESIDENT	5	X		X				0.	0.	0.
DARREL MORF SECRETARY	5	X		X				0.	0.	0.
ANN BARBER DOYLE TREASURER	5	X		X				0.	0.	0.
JAMES MELSA TRUSTEE	1	X						0.	0.	0.
HELEN COLONY TRUSTEE	1	X						0.	0.	0.
RICHARD ANDERSON TRUSTEE	1	X						0.	0.	0.
JAMES STEIN TRUSTEE	1	X						0.	0.	0.
ROBERT DOWNER TRUSTEE	1	X						0.	0.	0.
JOHN BERGE TRUSTEE	1	X						0.	0.	0.
DAVID BLUDER TRUSTEE	1	X						0.	0.	0.
LORENZ F. BEHRENS TRUSTEE	1	X						0.	0.	0.
ALLAN HOOVER III TRUSTEE	1	X						0.	0.	0.
P. BARRY BUTLER TRUSTEE	1	X						0.	0.	0.
WILLIS BYWATER TRUSTEE	1	X						0.	0.	0.
KENNETH FAWCETT TRUSTEE	1	X						0.	0.	0.
WALDO GEIGER TRUSTEE	1	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont.)

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLOTTE MOHR TRUSTEE	1	X						0.	0.	0.
ANDREW HOOVER TRUSTEE	1	X						0.	0.	0.
HERBERT HOOVER III TRUSTEE	1	X						0.	0.	0.
JOHN FAWCETT TRUSTEE	1	X						0.	0.	0.
SALLY MASON TRUSTEE	1	X						0.	0.	0.
ROBERT J. SWAIN TRUSTEE	1	X						0.	0.	0.
MATT HOWARD III TRUSTEE	1	X						0.	0.	0.
KEN KINSEY TRUSTEE	1	X						0.	0.	0.
ROBERT W. LANGHOLZ TRUSTEE	1	X						0.	0.	0.
KAREN SUCHOMEL TRUSTEE	1	X						0.	0.	0.
HAIG G. MARDIKIAN TRUSTEE	1	X						0.	0.	0.
DONALD F. MASSEY TRUSTEE	1	X						0.	0.	0.
JAMES MILES TRUSTEE	1	X						0.	0.	0.
1 b Total								74,881.	0.	0.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization **0**

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual.

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual.

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person.

Section B. Independent Contractors

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

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a				
	b Membership dues	1 b 51,253.				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e 28,034.				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 669,886.				
	g Noncash contrbns included in lns 1a-1f: \$					
	h Total. Add lines 1a-1f		749,173.			
PROGRAM SERVICE REVENUE	Business Code					
	2 a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f						
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		143,068.			143,068.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
		(i) Real (ii) Personal				
	6 a Gross Rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other	20,320. 40,105.			
	b Less: cost or other basis and sales expenses		21,465.			
	c Gain or (loss)		-1,145. 40,105.			
	d Net gain or (loss)		38,960.			38,960.
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a MAINTENANCE INCOME	531390	17,425.	17,425.			
b EVENTS INCOME/FEES	900099	9,060.	9,060.			
c MISCELLANEOUS INCOME	900099	3,318.	3,318.			
d All other revenue						
e Total. Add lines 11a-11d		29,803.				
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		961,004.	29,803.	0.	182,028.	

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.	86,250.	86,250.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22.	34,210.	34,210.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	79,897.	48,647.	31,250.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7 Other salaries and wages	141,311.	66,971.	21,063.	53,277.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	8,311.	2,317.	3,832.	2,162.
9 Other employee benefits	4,959.		4,959.	
10 Payroll taxes	15,716.	4,113.	7,886.	3,717.
11 Fees for services (non-employees)				
a Management				
b Legal	5,622.	4,254.	1,368.	
c Accounting	7,500.		7,500.	
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17.				
f Investment management fees				
g Other	800.	800.		
12 Advertising and promotion	17,989.	16,713.	1,276.	
13 Office expenses	7,162.	3,509.	3,191.	462.
14 Information technology				
15 Royalties				
16 Occupancy	39,227.	2,732.	34,358.	2,137.
17 Travel	7,025.	3,812.	2,588.	625.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,254.	152.	1,102.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	25,926.		25,926.	
23 Insurance	8,688.	21.	8,667.	
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.)				
a ENTERTAINMENT/FIREWORKS	27,969.	27,645.	324.	
b LIBRARY EXHIBITS AND PROGRAMS	27,842.	27,842.		
c PHOTOCOPIES/PHOTOGRAPHY	19,289.	19,289.		
d PRINTING AND PUBLICATIONS	17,888.	13,427.	2,685.	1,776.
e MISCELLANEOUS	14,201.	5,841.	8,265.	95.
f All other expenses	43,241.	27,165.	14,143.	1,933.
25 Total functional expenses. Add lines 1 through 24f	642,277.	395,710.	180,383.	66,184.
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.				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing	9,913.	1	6,137.
	2 Savings and temporary cash investments	36,105.	2	82,490.
	3 Pledges and grants receivable, net	36,250.	3	315,480.
	4 Accounts receivable, net		4	125.
	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 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	22,842.	9	21,210.
	10a Land, buildings, and equipment: cost basis	10a 841,917.		
	b Less: accumulated depreciation. Complete Part VI of Schedule D	10b 223,066.		
	11 Investments — publicly-traded securities	4,241,611.	11	4,149,998.
	12 Investments — other securities. See Part IV, line 11		12	
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,969,905.	16	5,194,291.	
LIABILITIES	17 Accounts payable and accrued expenses	28,080.	17	18,594.
	18 Grants payable	36,499.	18	72,297.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	64,579.	26	90,891.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets	864,580.	27	613,352.
	28 Temporarily restricted net assets	1,085,940.	28	1,530,106.
	29 Permanently restricted net assets	2,954,806.	29	2,959,942.
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances.	4,905,326.	33	5,103,400.
	34 Total liabilities and net assets/fund balances.	4,969,905.	34	5,194,291.

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b Were the organization's financial statements audited by an independent accountant?	2b	X
c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If 'Yes,' did the organization undergo the required audit or audits?	3b	

BAA

Form 990 (2008)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization **HERBERT HOOVER PRESIDENTIAL LIBRARY
ASSOCIATION, INC.**

Employer identification number
42-0848288

Part I	Reason for Public Charity Status (All organizations must complete this part.) (see instructions)
---------------	---

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I b ☐ Type II c ☐ Type III — Functionally integrated d ☐ Type III— Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box. _____
- g ☐ Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? _____

(i)	a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11 g (i)	Yes	No
(ii)	a family member of a person described in (i) above?	11 g (ii)		
(iii)	a 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)		

h Provide the following information about the organizations the organization supports.

[illegible]**Total**

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

Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	FY 6/30/06 (a) 2004	FY 6/30/07 (b) 2005	FY 6/30/08 (c) 2006	FY 9/30/08 (d) 2007	FY 9/30/09 (e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)	633,994.	674,325.	541,608.	35,853.	445,343.	2,331,123.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						0.
4 Total. Add lines 1-3	633,994.	674,325.	541,608.	35,853.	445,343.	2,331,123.
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).						864,973.
6 Public support. Subtract line 5 from line 4.						1,466,150.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	FY 6/30/06 (a) 2004	FY 6/30/07 (b) 2005	FY 6/30/08 (c) 2006	FY 9/30/08 (d) 2007	FY 9/30/09 (e) 2008	(f) Total
7 Amounts from line 4	633,994.	674,325.	541,608.	35,853.	445,343.	2,331,123.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	155,411.	183,887.	421,158.	33,650.	143,068.	937,174.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 Total support. Add lines 7 through 10.						3,268,297.
12 Gross receipts from related activities, etc. (see instructions)					12	0.

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

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	44.9 %
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	51.9 %

16a **33-1/3 support test – 2008.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop 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. ☐

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr 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 "unusual grants".)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 organization'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, 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.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(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.						
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 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, 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**

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
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 not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ☐**b 33-1/3 support tests – 2007.** If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ☐**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ☐

Part IV

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

This image shows a full page of white paper designed for handwriting practice. It features 20 evenly spaced, horizontal dashed lines that run across the entire width of the page. The lines are thin and black, providing a guide for letter height and placement. There are no margins, text, or other markings on the page.

**SCHEDULE D
(Form 990)**

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, lines 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization

HERBERT HOOVER PRESIDENTIAL LIBRARY

Employer identification number

42-0848288

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if
the organization answered 'Yes' to Form 990, Part IV, line 6.

	(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 advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? ☐ Yes ☐ No

Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

- ☐ Preservation of land for public use (e.g., recreation or pleasure) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of certified historic structure
☐ Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements.	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a).	2c
d Number of conservation easements included in (c) acquired after 8/17/06.	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1. ▶ \$ _____

(ii) Assets included in Form 990, Part X. ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1. ▶ \$ _____

b Assets included in Form 990, Part X. ▶ \$ 8,902.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☒ Public exhibition
b ☐ Scholarly research
c ☒ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. SEE PART XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?..... ☐ Yes ☒ No

Part IV Trust, Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?..... ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance.....	1c
d Additions during the year.....	1d
e Distributions during the year.....	1e
f Ending balance.....	1f

2a Did the organization include an amount on Form 990, Part X, line 21?..... ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance....					
b Contributions.....					
c Investment earnings or losses.....					
d Grants or scholarships.....					
e Other expenditures for facilities and programs.....					
f Administrative expenses.....					
g End of year balance.....					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ _____ %
c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations.....	3a(i)	
(ii) related organizations.....	3a(ii)	
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?.....	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land.....		250,120.		250,120.
b Buildings.....		433,513.	106,246.	327,267.
c Leasehold improvements.....				
d Equipment.....				
e Other.....		158,284.	116,820.	41,464.
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).).....				618,851.

BAA

Schedule D (Form 990) 2008

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	961,004.
2	Total expenses (Form 990, Part IX, column (A), line 25)	642,277.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	318,727.
4	Net unrealized gains (losses) on investments	-120,653.
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net). Add lines 4-8	-120,653.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	198,074.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	840,351.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-120,653.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-120,653.
3	Subtract line 2e from line 1	3	961,004.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	961,004.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	642,277.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	642,277.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	642,277.

Part XIV Supplemental Information

Complete this part to 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; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.

PART III, LINE 4 - DESCRIPTION OF ORGANIZATION'S COLLECTIONS AND HOW FURTHERS EXEMPT PURPOSE

LATE 19TH CENTURY PERIOD COSTUMES - USED IN PUBLIC EXHIBITIONS. THE EXHIBITIONS ARE
PART OF THE HISTORICAL INTERPRETATION EDUCATION PROGRAM OF THE ASSOCIATION.

PART X - FIN 48 FOOTNOTE

ON DECEMBER 30, 2008, THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ISSUED FASB
STAFF POSITION (FSP) FIN 48-3, DEFERRING THE ELECTIVE DATE OF FASB INTERPRETATION
48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES (FIN 48), FOR CERTAIN NONPUBLIC
ENTITIES FOR AN ADDITIONAL YEAR. THE AMENDED EFFECTIVE DATE FOR NONPUBLIC ENTITIES

Part XIV Supplemental Information (continued)**PART X - FIN 48 FOOTNOTE (CONTINUED)**

IS FOR FISCAL YEARS BEGINNING AFTER DECEMBER 15, 2008. THE ASSOCIATION HAS ELECTED TO DEFER ITS ADOPTION OF FIN 48 IN ACCORDANCE WITH FSP FIN 48-3. THE ASSOCIATION IS CURRENTLY EVALUATING THE POTENTIAL IMPACT OF THE ADOPTION OF FIN 48 ON ITS FINANCIAL STATEMENTS BUT DOES NOT BELIEVE THE IMPACT WILL HAVE A MATERIAL EFFECT ON ITS FINANCIAL STATEMENTS. THE PROVISIONS OF FIN 48 AND FSP FIN 48-3 ARE NOW INCLUDED IN ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740-10.

Part XIV	Supplemental Information (continued)
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9/30/09

2008 FEDERAL BOOK DEPRECIATION SCHEDULE

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CLIENT 126-909

HERBERT HOOVER PRESIDENTIAL LIBRARY
ASSOCIATION, INC.

42-0848288

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAGE /BASIS REDUCT.	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 980/990-PF																
BUILDINGS																
3	BUILDING	6/30/72		57,857							57,857	53,141	S/L4	0		1,446
4	IMPROVEMENTS	VARIOUS		811							811	811	S/L1	9		0
5	FURNACE	9/23/89		3,870							3,870	2,588	S/L	31.5		123
6	ROOF	4/25/95		10,475							10,475	3,608	S/L3	9		269
7	IMPROVEMENTS	VARIOUS		6,162							6,162	4,448	S/L3	9		257
8	IMPROVEMENTS	VARIOUS		4,127							4,127	1,122	S/L3	9		106
9	312 W. MAIN	6/24/98	7/01/09	100,083							100,083	26,289	S/L3	9		2,139
10	IMPROVEMENTS-312 W. MAIN	4/30/99	7/01/09	3,102							3,102	753	S/L3	9		67
11	PAVING/SIDEWALK	12/01/99		25,144							25,144	14,805	S/L1	5		1,576
12	IMPROVEMENTS	5/01/00		5,994							5,994	3,747	S/L1	5		333
13	FURNACE/AC/ROOF-312 W. MA	VARIOUS	7/01/09	10,289							10,289	5,516	S/L1	5		661
14	PAINTING	4/10/01		3,760							3,760	2,726	S/L1	0		376
26	STORM WINDOWS	2/15/04		1,829							1,829	448	S/L1	9		96
27	CARPET	4/30/04		1,155							1,155	522	S/L1	0		116
28	EAST ATTIC WINDOWS	4/30/05		1,584							1,584	291	S/L1	9		83
29	BATHROOM REMODELING	6/15/05		3,863							3,863	860	S/L1	5		258
34	1ST FLOOR WINDOWS-YELLOW	7/01/05		603							603	104	S/L1	9		32
39	WOOD FLOOR	8/15/06		7,304							7,304	1,055	S/L1	5		487
40	EDUC CENTER WINDOWS	11/30/06	7/01/09	1,122							1,122	113	S/L1	9		49
41	OFFICE LIGHTS	3/31/07		1,716							1,716	273	S/L1	0		172
44	318 W. MAIN ST	3/01/08		144,443							144,443	2,107	S/L4	0		3,611
47	HOOVERBALL COURTS	7/30/08		5,629							5,629	94	S/L1	5		375
49	328 W. MAIN ST.	9/30/08		147,187							147,187		S/L4	0		3,680
TOTAL BUILDINGS				548,109		0	0	0	0	0	548,109	125,421				16,412

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2008 FEDERAL BOOK DEPRECIATION SCHEDULE

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FURNITURE AND FIXTURES																
15	ARTWORK	8/01/90		1,235							1,235					0
16	OFFICE EQUIP./FURNITURE	VARIOUS		69,293							69,293	69,293	S/L1	5		0
17	OFFICE EQUIPMENT	VARIOUS		548							548	548	S/L1	0		0
18	OFFICE EQUIPMENT	VARIOUS		518							518	518	S/L	5		0
19	OFFICE EQUIPMENT	7/10/96		636							636	636	S/L	7		0
20	SOFTWARE	VARIOUS		8,170							8,170	8,170	S/L	3		0
21	OFFICE FURNITURE	1/31/99		1,585							1,585	1,585	S/L	7		0
22	SOFTWARE	1/20/01		4,515							4,515	4,515	S/L	3		0
23	TAPE BACKUP	1/01/02		1,044							1,044	1,044	S/L	3		0
25	FILESERVER	4/10/03		7,124							7,124	7,320	S/L	3		0
30	WATER SOFTNER	10/28/04		1,065							1,065	427	S/L1	0		107
31	ART WALLS	1/31/05		1,188							1,188	477	S/L1	0		114
35	ART WALLS	2/28/06		429							429	111	S/L	5		43
36	KIOSK COMPUTER/TV	5/15/07		4,634							4,634	1,314	S/L	5		927
37	KIOSK	5/15/07		24,176							24,176	4,894	S/L	7		3,454
38	FILESERVER	5/15/07		18,223							18,223	6,454	S/L	4		4,556
51	WEBSITE DESIGN	6/30/09		5,000							5,000		S/L	4		313
TOTAL FURNITURE AND FIXTURE				149,383		0		0	0	0	149,383	107,306				9,514
LAND																
1	LAND	6/30/72		55,560							55,560					0
2	312 W. MAIN	6/24/98		20,000							20,000					0
24	LAND-308 W. MAIN	VARIOUS		48,000							48,000					0
43	318 W. MAIN ST	3/01/08		15,420							15,420					0

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2008 FEDERAL BOOK DEPRECIATION SCHEDULE

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HERBERT HOOVER PRESIDENTIAL LIBRARY
ASSOCIATION, INC.

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48	328 W. MAIN ST.	9/30/08		18,530							18,530	0				0
50	312 W. MAIN - 2009 DEMOLI	7/01/09		92,610							92,610	0				0
	TOTAL LAND			250,120		0	0	0	0	0	250,120	0				0
	MISCELLANEOUS															
32	COLLECTIBLES	6/30/05		2,022							2,022	0				0
33	COLLECTIBLES	6/30/06		1,628							1,628	0				0
42	COLLECTIBLES	VARIOUS		1,791							1,791	0				0
45	COLLECTIBLES	VARIOUS		224							224	0				0
46	COLLECTIBLES	9/30/08		244							244	0				0
52	COLLECTIBLES	VARIOUS		2,992							2,992	0				0
	TOTAL MISCELLANEOUS			8,901		0	0	0	0	0	8,901	0				0
	TOTAL DEPRECIATION			956,513		0	0	0	0	0	956,513	232,727				25,926
	GRAND TOTAL DEPRECIATION			956,513		0	0	0	0	0	956,513	232,727				25,926
	DEPRECIATION ASSETS SOLD			114,596		0	0	0	0	0	114,596	32,671				2,916
	DEPR REMAINING ASSETS			841,917		0	0	0	0	0	841,917	200,056				23,010

OMB No. 1545-0047

2008

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

Open to Public Inspection

Employer Identification number

HERBERT HOOVER PRESIDENTIAL LIBRARY

Part I	General Information on Grants and Assistance
--------	--

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

SEE PART IV

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Part IV and Schedule I-1 (Form 990) if additional space is needed.

[illegible]

2	Enter total number of section 501(c)(3) and government organizations.		.	.	.	.	.	.	▲	0
3	Enter total number of other organizations		.	.	.	.	.	.	▲	1

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
RESEARCH TRAVEL & SCHOLASTIC AWARDS	22	34,210.			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PART I, LINE 2 - GRANTMAKER'S DESCRIPTION OF HOW GRANTS ARE USED

TRAVEL GRANTS - RECIPIENTS MUST ARRIVE AT THE HERBERT HOOVER PRESIDENTIAL LIBRARY

BEFORE RECEIVING THEIR TRAVEL GRANT CHECKS. RECIPIENTS MUST PROVIDE RECEIPTS FOR

THEIR TRAVEL EXPENSES AND THEY ARE ASKED TO COMPLETE AN EVALUATION FORM WITHIN 30

DAYS AFTER LEAVING THE LIBRARY.

UNCOMMON STUDENT AWARD - EACH FINALIST MAKES A PRESENTATION IN OCTOBER ABOUT HIS OR

HER PROJECT. AFTER THE PRESENTATIONS, EACH STUDENT RECEIVES AN AWARD CHECK FOR

\$1,000.

SCHOLARSHIPS - THREE STUDENTS FROM THE LIST OF WINNERS OF THE UNCOMMON STUDENT AWARD

BAA

PART I, LINE 2 - GRANTMAKER'S DESCRIPTION OF HOW GRANTS ARE USED (CONTINUED)

ARE CHOSEN BY A COMMITTEE AS RECIPIENTS OF A \$5,000 SCHOLARSHIP. THE SCHOLARSHIP CHECKS ARE SENT DIRECTLY TO THE STUDENT'S CHOSEN COLLEGE OR UNIVERSITY. THE FIRST HALF OF THE SCHOLARSHIP IS PAID AT THE BEGINNING OF THE STUDENT'S FRESHMAN YEAR AND THE SECOND HALF OF THE SCHOLARSHIP IS PAID AT THE BEGINNING OF THE STUDENT'S SOPHOMORE YEAR. THE STUDENT MUST BE REGISTERED AT THE COLLEGE OR UNIVERSITY BEFORE THE SCHOLARSHIP CAN BE PAID.

NATIONAL HISTORIC SITE GRANT - AN UNRESTRICTED GRANT OF \$5,000 WAS PAID TO THE NATIONAL HISTORIC SITE. THE NATIONAL HISTORIC SITE PREPARES A NARRATIVE OR REPORT ON HOW THE FUNDS ARE BEING EXPENDED AT THE HERBERT HOOVER NATIONAL HISTORIC SITE. THE BOARD OF TRUSTEES EXECUTIVE COMMITTEE REVIEWS THE PROGRAM ON AN ANNUAL BASIS. THIS GRANT PROGRAM WAS SUSPENDED AS OF DECEMBER 31, 2008.

HERBERT HOOVER PRESIDENTIAL LIBRARY/MUSEUM GRANT - THE HERBERT HOOVER FOUNDATION, INC. CONTRIBUTED \$35,000 TO THE ASSOCIATION FOR HOOVER LIBRARY/MUSEUM PROGRAMS. THE ASSOCIATION MATCHED THE FOUNDATION CONTRIBUTION BY GRANTING \$81,250 TO THE HERBERT HOOVER PRESIDENTIAL LIBRARY/MUSEUM. THE LIBRARY/MUSEUM IS REQUIRED TO PREPARE A QUARTERLY REPORT TO THE ASSOCIATION DETAILING THE EXPENDITURES OF THE GRANT. THE GRANT PROGRAM IS REVIEWED ON AN ANNUAL BASIS BY THE ASSOCIATION AND THE FOUNDATION.

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION

RESEARCH TRAVEL AND SCHOLASTIC AWARDS - 22 RECIPIENTS OF \$34,210

RESEARCH TRAVEL GRANTS:

JOHN D. BOYD, ALEXANDRIA, VA	1,290
GARETH DAVIES, ARLINGTON, VA	1,025
M. HOUSTON JOHNSON V, KNOXVILLE, TN	1,020

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

KATHERINE MANICOM, OTTAWA, ONT, CANADA	1,000
BRIAN J. MCCABE, NEW YORK, NY	875
TOTAL	5,210

UNCOMMON STUDENT AWARDS:

14 AWARDS AT \$1,000 EACH - TOTAL	14,000
-----------------------------------	--------

GRANT BRAGFREDE, ANKENY, IA

RYAN BRASSER, PAULLINA, IA

ADRIANNE BURK, IDA GROVE, IA

EMMA DAVIS, GOWRIE, IA

VANESSA ESPINOZA, CONESVILLE, IA

JOHN FREUDE, DES MOINES, IA

TAYLOR JEPSEN, TERRIL, IA

ANNA MILLER, MT. PLEASANT, IA

TRACY OLDER, FT. MADISON, IA

SARA ROCKOW, FT. DODGE, IA

EMILY ROSE, CONRAD, IA

JUSTIN SCHRAMM, SAC CITY, IA

MALEA SCHULTE, NORWAY, IA

DHROOTI VYAS, URBANDALE, IA

UNCOMMON STUDENT AWARDS SCHOLARSHIPS:

3 SCHOLARSHIPS AT \$5,000 EACH - TOTAL	15,000
--	--------

SAMANTHA BANSER, CEDAR FALLS, IA

MICHAEL BEAVERS, KINGSLEY, IA

2008

SCHEDULE I, PART IV - SUPPLEMENTAL INFORMATION

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HERBERT HOOVER PRESIDENTIAL LIBRARY
ASSOCIATION, INC.

42-0848288

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

JERALYN WESTERCAMP, CEDAR RAPIDS, IA

TOTAL PAYMENTS TO INDIVIDUALS

34,210

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Name of the organization **HERBERT HOOVER PRESIDENTIAL LIBRARY
ASSOCIATION, INC.**

Employer identification number
42-0848288

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ► \$
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. ► \$

Part II Loans to and/or From Interested Persons.
To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ► \$										

Part III Grants or Assistance Benefitting Interested Persons.
To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.
To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction \$	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
DARREL MORF	BOARD SECRETAR	4,419.	LEGAL SERVICES		X
WILLIS BYWATER	BOARD TRUSTEE	3,610.	PRINTING PRODUCTS/MATE		X
GERALD MEIS	BOARD TRUSTEE	14.	HARDWARE SUPPLIES		X
JASON ALLGOOD	SON OF EXECUTI	5,660.	PROP MAINT/REPAIR/LAND		X

BAA 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.

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization **HERBERT HOOVER PRESIDENTIAL LIBRARY
ASSOCIATION, INC.**

Employer identification number
42-0848288

FORM 990, SCHEDULE L, PART IV DETAIL

MR. MORF SERVES AS THE SECRETARY OF THE BOARD OF TRUSTEES OF THE ORGANIZATION AND IS A PARTNER OF THE LAW FIRM, SIMMONS PERRINE PLC, CEDAR RAPIDS, IA, WHICH PROVIDES LEGAL SERVICES TO THE ORGANIZATION. THE TOTAL AMOUNT PAID FOR LEGAL SERVICES TO THE FIRM DURING THE YEAR WAS \$4,419.

MR. BYWATER SERVES AS A DIRECTOR OF THE BOARD OF TRUSTEES OF THE ORGANIZATION AND IS THE OWNER OF TRUE ART COLOR GRAPHICS/ECONOMY ADVERTISING, IOWA CITY, IA, WHICH PROVIDES PRINTING PRODUCTS AND MATERIALS TO THE ORGANIZATION. THE TOTAL AMOUNT PAID FOR THESE PRODUCTS DURING THE YEAR WAS \$3,610.

MR. MEIS SERVES AS A DIRECTOR OF THE BOARD OF TRUSTEES OF THE ORGANIZATION AND IS THE OWNER OF LENOCH AND CILEK TRUE VALUE HARDWARE, IOWA CITY AND CORALVILLE, IA, WHICH PROVIDES HARDWARE PRODUCTS AND MATERIALS TO THE ORGANIZATION. THE TOTAL AMOUNT PAID FOR THESE PRODUCTS DURING THE YEAR WAS \$14.

MR. ALLGOOD IS THE SON OF THE EXECUTIVE DIRECTOR OF THE ORGANIZATION. DURING THE YEAR, HE WAS CONTRACTED WITH TO PROVIDE MAINTENANCE, PAINTING AND LANDSCAPING SERVICES IN MAINTAINING PROPERTIES OWNED BY THE ORGANIZATION. THE TOTAL AMOUNT PAID FOR THESE SERVICES DURING THE YEAR WAS \$5,660.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

TO PERPETUATE THE IDEALS AND PHILOSOPHIES OF HERBERT HOOVER, 31ST PRESIDENT OF THE UNITED STATES; TO PRESERVE FOR THE PURPOSE OF PUBLIC EDUCATION ALL HISTORICAL DOCUMENTS AND MATERIALS RELATING TO THE LIFE AND TIMES OF MR. HOOVER; TO SUPPORT THE DEVELOPMENT OF THE HERBERT HOOVER PRESIDENTIAL LIBRARY/MUSEUM/HISTORIC SITE.

Name of the organization HERBERT HOOVER PRESIDENTIAL LIBRARY
ASSOCIATION, INC.

Employer identification number
42-0848288

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECT**FAMILY RELATIONSHIP - RELATED TRUSTEES:**

ALLAN HOOVER III, ANDREW HOOVER, HERBERT HOOVER III, AND MARGARET HOOVER

KENNETH FAWCETT AND JOHN FAWCETT

AUDREY KOFOED AND KAREN SUCHOMEL

STANLEY BARBER AND ANN BARBER DOYLE

FORM 990, PART VI, LINE 10 - FORM 990 REVIEW PROCESS

THE ORGANIZATION'S TREASURER, THE EXECUTIVE DIRECTOR AND THE FINANCIAL MANAGER WERE PROVIDED A DRAFT COPY OF FORM 990 IN JANUARY 2010 FOR REVIEW PURPOSES. THESE THREE INDIVIDUALS CONDUCT A THOROUGH REVIEW OF THE 990 AND ADVISE THE PREPARER OF ANY CHANGES TO MAKE PRIOR TO COMPLETION OF THE FINAL COPY OF THE 990. FINAL CHANGES WERE MADE IN JANUARY 2010. THE TREASURER OF THE ORGANIZATION THEN DOES A FINAL GENERAL REVIEW OF THE COMPLETED FORM 990 AND APPROVES IT BY HER COMPLETION OF THE APPLICABLE SPACE OF THE SIGNATURE BLOCK ON PAGE 1 OF FORM 990.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF C

COMPLIANCE IS MET BY ANNUALLY DISCLOSING IF THERE ARE ANY INTERESTS THAT COULD LEAD TO A CONFLICT. ALSO, AT ANY TIME DURING THE YEAR WHEN A CONFLICT ARISES, THE OFFICER, TRUSTEE OR KEY EMPLOYEE IS REQUIRED TO IMMEDIATELY NOTIFY THE GOVERNING BODY OF THE NATURE OF THE CONFLICT. IMMEDIATE ACTION IS TAKEN BY THE GOVERNING BODY TO INVESTIGATE THE NATURE OF THE CONFLICT AND TIMELY DETERMINATION OF RESOLUTION OF THE MATTER.

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEES

THE HUMAN RESOURCES COMMITTEE REVIEWS SALARIES BASED ON, BUT NOT LIMITED TO, COMPENSATION PAID BY COMPARABLE ORGANIZATIONS, EMPLOYEE PERFORMANCE EVALUATIONS AND OTHER COMPARABLE DATA OF SIMILAR EXEMPT ORGANIZATIONS. THE HUMAN RELATIONS COMMITTEE THEN MAKES ITS RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE. IF THE EXECUTIVE COMMITTEE APPROVES THE RECOMMENDED SALARIES, THE APPROVED SALARIES ARE INCORPORATED

Name of the organization **HERBERT HOOVER PRESIDENTIAL LIBRARY
ASSOCIATION, INC.**

Employer identification number
42-0848288

FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS FOR OFFICERS & KEY EMPLOYEES

INTO THE BUDGET AND THEN PRESENTED TO THE BOARD OF TRUSTEES FOR FINAL APPROVAL.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FORM
990 AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON SPECIFIC REQUEST. THE
APPLICABLE MATERIALS ARE EITHER MAILED OR EMAILED TO THE REQUESTING PERSON, OR THAT
PERSON CAN INSPECT THE DOCUMENTS AND/OR MATERIALS AT THE OFFICE OF THE ORGANIZATION
DURING NORMAL BUSINESS HOURS.

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

Employer identification number

HERBERT HOOVER PRESIDENTIAL LIBRARY

42-0848288

Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARGARET HOOVER TRUSTEE	1	X						0.	0.	0.
JEANITA MCNULTY TRUSTEE	1	X						0.	0.	0.
MARVIN MOODY TRUSTEE	1	X						0.	0.	0.
GERALD MEIS TRUSTEE	1	X						0.	0.	0.
SALLY NOVETZKE TRUSTEE	1	X						0.	0.	0.
H. EUGENE ANDERSON TRUSTEE	1	X						0.	0.	0.
WILLARD B. SNYDER TRUSTEE	1	X						0.	0.	0.
SCOTT BROOKE TRUSTEE	1	X						0.	0.	0.
STEPHEN WOLKEN TRUSTEE	1	X						0.	0.	0.
ROBERT D. RAY TRUSTEE	1	X						0.	0.	0.
HERBERT A. WILSON TRUSTEE	1	X						0.	0.	0.
CHARLES W. WILSON TRUSTEE	1	X						0.	0.	0.
FRED C. SCHULTE TRUSTEE	1	X						0.	0.	0.
ROBERT SIERK TRUSTEE	1	X						0.	0.	0.
NANCY HAYES TRUSTEE	1	X						0.	0.	0.
REBECKAH ALLGOOD EXEC. DIR./EX-O	40				X			74,881.	0.	0.
STANLEY BARBER TRUSTEE EMERITU	1							0.	0.	0.
D. WYLIE KING TRUSTEE EMERITU	1							0.	0.	0.
THOMAS FIGGE TRUSTEE EMERITU	1							0.	0.	0.
AUDREY KOFOED TRUSTEE EMERITU	1							0.	0.	0.
EDWARD TUBBS TRUSTEE EMERITU	1							0.	0.	0.

Department of the Treasury
Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

2008

Name of the Organization

HERBERT HOOVER PRESIDENTIAL LIBRARY

Employer Identification number

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