Form **990**

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)

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

OMB No. 1545-0047

2009

Open to Public Inspection

For the 2009 calendar year, or tax year beginning 10/01 **, 2009, and ending** 9/30 **, 2010**

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.

C 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 $ 636,663.

F Name and address of principal officer: RUBY TRIPLETT
SAME AS C ABOVE

H(a) Is this a group return for affiliates? [ ] Yes [X] No
H(b) Are all affiliates included? [ ] Yes [ ] No
If 'No,' attach a list. (see instructions)

I Tax-exempt status [X] 501(c) (3)◄ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ► WWW.HOOVERASSOCIATION.ORG

H(c) Group exemption number ►

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ►

L Year of Formation: 1954 **M** State of legal domicile IA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO PROTECT AND PRESERVE HERBERT HOOVER MEMORABILIA AS DESCRIBED IN PART III AND SCHEDULE O.

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	48
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	48
5	Total number of employees (Part V, line 2a)	5	7
6	Total number of volunteers (estimate if necessary)	6	134
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	749,173.	374,538.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	182,028.	121,023.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	29,803.	42,214.
12	Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	961,004.	537,775.
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	120,460.	102,701.
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)	250,194.	270,930.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ► 72,034.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	271,623.	297,556.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	642,277.	671,187.
19	Revenue less expenses. Subtract line 18 from line 12	318,727.	-133,412.

Net Assets or Fund Balances		Beginning of Year	End of Year
20	Total assets (Part X, line 16)	5,194,291.	5,313,741.
21	Total liabilities (Part X, line 26)	90,891.	80,390.
22	Net assets or fund balances. Subtract line 21 from line 20	5,103,400.	5,233,351.

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623
OGDEN, UT
IRS-OSC

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
2-10-11 — Date

► ANN BARBER DOYLE TREASURER
Type or print name and title.

Paid Preparer's Use Only

Preparer's signature ► [signature] Date 1/31/11 Check if self-employed ► [ ] Preparer's identifying number (see instructions) N/A

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

EIN ► N/A
Phone no ► (319) 351-0231

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

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Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 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 $ 348,026. including grants of $ 102,701.) (Revenue $ 16,614.)

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 26 TOTAL RECIPIENTS OF GRANTS, STIPENDS 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 ► 348,026.

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*	1	X	
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 reporting requirement and proxy tax? *If 'Yes,' complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or 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		X
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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If 'Yes,' complete Schedule D, Part V.*	10		X
11	Is the organization's answer to any of the following questions 'Yes'? *If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? *If 'Yes,' complete Schedule D, Part VI*			
	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VII*			
	• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VIII*			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part IX*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If 'Yes,' complete Schedule D, Part X*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organizaiton's liability for uncertain tax positions under FIN 48? If *'Yes,' complete Schedule D, Part X*			
12	Did the organization obtain separate, independent audited financial statement for the tax year? *If 'Yes,' complete Schedule D, Parts XI, XII, and XIII*	12	X	
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? *If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional* — 12 A: Yes [ ] No X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If 'Yes,' complete Schedule E.*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *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		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If 'Yes,' complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If 'Yes,' complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If 'Yes,' complete Schedule G, Part III*	19		X
20	Did the organization operate one or more hospitals? *If 'Yes,' complete Schedule H*	20		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If 'Yes,' complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If 'Yes,' complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If 'Yes,' complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, and that was issued after December 31, 2002? *If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25*	24a		X
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	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If 'Yes,' complete Schedule L, Part I*	25b		X
26	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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? *If 'Yes,' complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	28a	X	
b	A family member of a current or former officer, director, trustee, or key employee? *If 'Yes,' complete Schedule L, Part IV*	28b	X	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? *If 'Yes,' complete Schedule L, Part IV*	28c	X	
29	Did the organization receive more than $25,000 in non-cash contributions? *If 'Yes,' complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If 'Yes,' complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II*	32		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? *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		X
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		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If 'Yes,' complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	X	

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.	1a	47		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	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	2a	7		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return. (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a		X
b	If 'Yes' has it filed a Form 990-T for this year? *If 'No,' provide an explanation in Schedule O*		3b		
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)?		4a		X
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.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		6a		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make any distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from other members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			

Part VI **Governance, Management and Disclosure** *For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a 48		
b	Enter the number of voting members that are independent	1b 48		
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	2	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?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	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?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
12a	Does the organization have a written conflict of interest policy? *If 'No,' go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	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	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	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 SEE SCHEDULE O	15a	X	
b	Other officers of key employees of the organization	15b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If 'Yes,' 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?	16b		

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.

[X] 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, 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. Report compensation for the calendar year ending with or within the organizations's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of 'key employees.'
- 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.

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

(A) Name and Title	(B) Average hours per week	(C) Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
RUBY TRIPLETT PRESIDENT	5	X		X				0.	0.	0.
CHARLIE BECKER VICE PRESIDENT	5	X		X				0.	0.	0.
H. EUGENE ANDERSON 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 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.
NICHOLAS COLANGELO TRUSTEE	1	X						0.	0.	0.
KENNETH FAWCETT 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: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
DAVID DIERKS TRUSTEE	1	X						0.	0.	0.
CHARLOTTE MOHR TRUSTEE	1	X						0.	0.	0.
ANDREW HOOVER TRUSTEE	1	X						0.	0.	0.
WALDO GEIGER TRUSTEE	1	X						0.	0.	0.
JOHN FAWCETT TRUSTEE	1	X						0.	0.	0.
ALEXANDER HOOVER TRUSTEE	1	X						0.	0.	0.
SALLY MASON 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.
DARREL MORF TRUSTEE	1	X						0.	0.	0.
HAIG G. MARDIKIAN TRUSTEE	1	X						0.	0.	0.
DONALD F. MASSEY TRUSTEE	1	X						0.	0.	0.
1b Total ►								77,077.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ► 0

		Yes	No
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*	3		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*	4		X
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*	5		X

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 but not limited to those listed above) 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 1a Federated campaigns	1a					
b Membership dues	1b	47,365.				
c Fundraising events	1c					
d Related organizations	1d					
e Government grants (contributions)	1e					
f All other contributions, gifts, grants, and similar amounts not included above	1f	327,173.				
g Noncash contribns included in lns 1a-1f: $						
h **Total.** Add lines 1a-1f ►			374,538.			
PROGRAM SERVICE REVENUE		Business Code				
2a						
b						
c						
d						
e						
f All other program service revenue						
g **Total.** Add lines 2a-2f ►						
3 Investment income (including dividends, interest and other similar amounts) ►			110,262.			110,262.
4 Income from investment of tax-exempt bond proceeds ►						
5 Royalties ►						
	(i) Real	(ii) Personal				
6a Gross Rents						
b Less: rental expenses						
c Rental income or (loss)						
d Net rental income or (loss) ►						
	(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	109,649.					
b Less: cost or other basis and sales expenses	98,888.					
c Gain or (loss)	10,761.					
d Net gain or (loss) ►			10,761.			10,761.
OTHER REVENUE 8a 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 ►						
9a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities ►						
10a 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				
11a MAINTENANCE INCOME		531390	25,600.	25,600.		
b EVENTS INCOME/FEES		900099	13,416.	13,416.		
c MISCELLANEOUS INCOME		900099	3,198.	3,198.		
d All other revenue						
e **Total.** Add lines 11a-11d ►			42,214.			
12 **Total revenue.** See instructions ►			537,775.	42,214.	0.	121,023.

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).

Do not include amounts reported on lines 6b, 7b, 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 organizations in the U.S. See Part IV, line 21	66,993.	66,993.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	35,708.	35,708.		
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	83,017.	49,817.	33,200.	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	153,585.	20,545.	76,315.	56,725.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	8,227.	2,045.	4,210.	1,972.
9 Other employee benefits	10,669.		10,669.	
10 Payroll taxes	15,432.	4,267.	7,149.	4,016.
11 Fees for services (non-employees)				
a Management				
b Legal	31.		31.	
c Accounting	7,400.		7,400.	
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17				
f Investment management fees				
g Other	77,366.	74,684.	2,682.	
12 Advertising and promotion	7,240.	4,844.	2,396.	
13 Office expenses	4,878.	2,280.	2,545.	53.
14 Information technology	2,190.		2,190.	
15 Royalties				
16 Occupancy	39,947.	3,811.	33,248.	2,888.
17 Travel	16,606.	7,902.	4,918.	3,786.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,636.	1,629.	1,310.	697.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	23,947.		23,947.	
23 Insurance	8,190.		8,190.	
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	27,093.	18,031.	9,062.	
b PHOTOGRAPHY	16,959.	16,638.	321.	
c PRINTING AND PUBLICATIONS	12,273.	6,658.	4,675.	940.
d HONORARIUMS	10,332.	10,332.		
e EQUIPMENT LEASING	10,230.	4,861.	4,991.	378.
f All other expenses	29,238.	16,981.	11,678.	579.
25 Total functional expenses. Add lines 1 through 24f	671,187.	348,026.	251,127.	72,034.
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		6,137.	1	7,253.
	2	Savings and temporary cash investments		82,490.	2	6,519.
	3	Pledges and grants receivable, net		315,480.	3	343,380.
	4	Accounts receivable, net		125.	4	1,458.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 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		21,210.	9	34,458.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 843,263.			
	b	Less: accumulated depreciation	10b 247,013.	618,851.	10c	596,250.
	11	Investments — publicly-traded securities		4,149,998.	11	4,324,423.
	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)		5,194,291.	16	5,313,741.
Liabilities	17	Accounts payable and accrued expenses		18,594.	17	35,097.
	18	Grants payable		72,297.	18	45,293.
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial 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 to unrelated third parties			24	
	25	Other liabilities. Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		90,891.	26	80,390.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ► [X] and complete lines 27 through 29 and lines 33 and 34.**				
	27	Unrestricted net assets		613,352.	27	631,829.
	28	Temporarily restricted net assets		1,530,106.	28	1,635,480.
	29	Permanently restricted net assets		2,959,942.	29	2,966,042.
		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		5,103,400.	33	5,233,351.
	34	Total liabilities and net assets/fund balances		5,194,291.	34	5,313,741.

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
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 line 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	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

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: (For lines 1 through 11, check only one box.)

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).**

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).**

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 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?

		Yes	No
(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?	11g (i)		
(ii) a family member of a person described in (i) above?	11g (ii)		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g (iii)		

h Provide the following information about the supported organizations.

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col. (i) organized in the US?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
Total									

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 6/30/07 (a) 2005	FY 6/30/08 (b) 2006	FY 9/30/08 (c) 2007	FY 9/30/09 (d) 2008	FY 9/30/10 (e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')	674,325.	541,608.	35,853.	445,343.	374,538.	2,071,667.
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-through 3..	674,325.	541,608.	35,853.	445,343.	374,538.	2,071,667.
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)						608,264.
6 **Public support.** Subtract line 5 from line 4						1,463,403.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	FY 6/30/07 (a) 2005	FY 6/30/08 (b) 2006	FY 9/30/08 (c) 2007	FY 9/30/09 (d) 2008	FY 9/30/10 (e) 2009	(f) Total
7 Amounts from line 4	674,325.	541,608.	35,853.	445,343.	374,538.	2,071,667.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	183,887.	421,158.	33,650.	143,068.	110,262.	892,025.
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						2,963,692.

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 2009 (line 6, column (f) divided by line 11, column (f) 14 | 49.4 %

15 Public support percentage from 2008 Schedule A, Part II, line 14 15 | 44.9 %

16a **33-1/3 support test — 2009.** 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 ► [X]

b **33-1/3 support test — 2008.** 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 — 2009** 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 — 2008.** 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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 through 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 amount on line 13 for the year						
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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lns 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 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2008** Schedule A, Part III, line 17	18	%

19a **33-1/3 support tests — 2009.** 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 — 2008.** 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 explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

OMB No. 1545 0047

2009

Open to Public Inspection

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

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 for any other purpose conferring 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)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of certified historic structure

2 Complete lines 2a through 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 tax 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, handling of violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation 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, 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 ► $ 10,248.

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

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

a [X] Public exhibition
b [ ] Scholarly research
c [X] 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 [X] No

Part IV 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 Net investment earnings, gains, and 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) Accumulated Depreciation	(d) Book Value
1a Land		250,120.		250,120.
b Buildings		433,513.	119,742.	313,771.
c Leasehold improvements				
d Equipment				
e Other		159,630.	127,271.	32,359.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ►				596,250.

Part VII Investments—Other Securities See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. *(Column (b) must equal Form 990 Part X, col. (B) line 12.)* ►		

Part VIII Investments—Program Related (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, Col. (B) line 13.)* ►		

Part IX Other Assets (See Form 990, Part X, line 15) N/A

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B), line 15)* ►	

Part X Other Liabilities (See Form 990, Part X, line 25)

(a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25)* ►	

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. SEE PART XIV

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)	537,775.
2	Total expenses (Form 990, Part IX, column (A), line 25)	671,187.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	-133,412.
4	Net unrealized gains (losses) on investments	263,363.
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 through 8	263,363.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	129,951.

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	814,976.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	263,363.		
b	Donated services and use of facilities	2b	13,838.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	277,201.
3	Subtract line 2e from line 1			3	537,775.
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 must equal Form 990, Part I, line 12.)			5	537,775.

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

1	Total expenses and losses per audited financial statements			1	685,025.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	13,838.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	13,838.
3	Subtract line 2e from line 1			3	671,187.
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 must equal Form 990, Part I, line 18.)			5	671,187.

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, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

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

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

THE ORGANIZATION EVALUATES ALL SIGNIFICANT TAX POSITIONS AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES IN THE UNITED STATES. AS OF SEPTEMBER 30, 2010, THE ORGANIZATION DOES NOT BELIEVE THAT IT HAS TAKEN ANY TAX POSITIONS THAT WOULD REQUIRE RECORDING OF ANY ADDITIONAL LIABILITY NOR DOES IT BELIEVE THAT THERE ARE ANY

Part XIV Supplemental Information *(continued)*

PART X - FIN 48 FOOTNOTE (CONTINUED)

UNREALIZED TAX BENEFITS THAT WOULD EITHER INCREASE OR DECREASE WITHIN THE NEXT TWELVE MONTHS. THE ORGANIZATION'S INCOME TAX RETURNS ARE SUBJECT TO EXAMINATION BY APPROPRIATE TAXING JURISDICTIONS. AS OF SEPTEMBER 30, 2010, THE ORGANIZATION'S FEDERAL TAX RETURNS FOR THE YEARS ENDED SEPTEMBER 30, 2009, SEPTEMBER 30, 2008, JUNE 30, 2008 AND JUNE 30, 2007 GENERALLY REMAIN OPEN.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization: HERBERT HOOVER PRESIDENTIAL LIBRARY

Employer identification number: 42-0848288

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? . . . . . [X] Yes [ ] No

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

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered 'Yes' to 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 . . ► [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HERBERT HOOVER PRES. LIBRARY/MUS WEST BRANCH, IA 52358	83-0426548		26,993.	0.			LIBRARY/MUSEUM SUPPORT GRANT
NATIONAL PARK SERVICE WEST BRANCH, IA 52358	53-0197074		40,000.	0.			NATIONAL HISTORIC SITE GRANT

2 Enter total number of section 501(c)(3) and government organizations . . . . ► 2

3 Enter total number of other organizations . . . . ► 0

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and 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, STIPENDS, SCHOLASTIC - SCH. ATT.	24	35,708.			

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

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the Organization: HERBERT HOOVER PRESIDENTIAL LIBRARY

Employer Identification number: 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): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
JAMES MILES TRUSTEE	1	X						0.	0.	0.
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.
PAULINA MUZZIN TRUSTEE	1	X						0.	0.	0.
TOM SCANLAN TRUSTEE	1	X						0.	0.	0.
KAREN SUCHOMEL TRUSTEE	1	X						0.	0.	0.
ROBERT SWAIN TRUSTEE	1	X						0.	0.	0.
ROBERT D. RAY TRUSTEE	1	X						0.	0.	0.
WILLARD SNYDER TRUSTEE	1	X						0.	0.	0.
SCOTT BROOKE 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.
STEPHEN WOLKEN TRUSTEE	1	X						0.	0.	0.
CHARLES WILSON TRUSTEE	1	X						0.	0.	0.
REBECKAH ALLGOOD EXECUTIVE DIREC	40				X			77,077.	0.	0.

9AA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization 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.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

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).
Complete if the organization 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.**
Complete if the organization 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? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
Total			► $							

Part III **Grants or Assistance Benefitting Interested Persons.**
Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

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

Part IV **Business Transactions Involving Interested Persons.**
Complete if the organization 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 TRUSTEE	31.	LEGAL SERVICES		X
WILLIS BYWATER	BOARD TRUSTEE	1,156.	PRINTING PRODUCTS/MATERIA		X
GERALD MEIS	BOARD TRUSTEE	444.	HARDWARE SUPPLIES		X
JASON ALLGOOD	SON OF EXEC. DIREC	3,813.	PROPERTY MAINT/REPAIR		X

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
► Attach to Form 990.

OMB No. 1545 0047

2009

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 SERVED AS THE SECRETARY OF THE BOARD OF TRUSTEES UNTIL MAY 1, 2010. HE REMAINS AS A DIRECTOR OF THE BOARD OF TRUSTEES. HE IS A PARTNER OF THE LAW FIRM, SIMMONS PERRINE PLC, CEDAR RAPIDS, IA, WHICH PROVIDES LEGAL SERVICES TO THE ORGANIZATION. THE TOTAL PAID FOR LEGAL SERVICES TO THE FIRM DURING THE YEAR ENDED SEPTEMBER 30, 2010 WAS $31.

MR. BYWATER SERVES AS A DIRECTOR OF THE BOARD OF TRUSTEES AND IS THE OWNER OF TRU ART COLOR GRAPHICS/ECONOMY ADVERTISING, IOWA CITY, IOWA, WHICH PROVIDES PRINTING PRODUCTS AND MATERIALS TO THE ORGANIZATION. THE TOTAL AMOUNT PAID FOR THESE PRODUCTS DURING THE YEAR AMOUNTED TO $1,156.

MR. MEIS SERVES AS A DIRECTOR OF THE BOARD OF TRUSTEES AND IS THE OWNER OF LENOCH AND CILEK TRUE VALUE HARDWARE, IOWA CITY AND CORALVILLE, IOWA, WHICH PROVIDES HARDWARE PRODUCTS AND MATERIALS TO THE ORGANIZATION. THE TOTAL AMOUNT PAID FOR THESE PRODUCTS DURING THE YEAR AMOUNTED TO $444.

MR. ALLGOOD IS THE SON OF THE EXECUTIVE DIRECTOR OF THE ORGANIZATION. DURING THE YEAR, HE WAS CONTRACTED WITH TO PROVIDE MAINTENANCE AND REPAIR SERVICES IN MAINTAINING PROPERTIES OWNED BY THE ORGANIZATION. THE TOTAL AMOUNT PAID FOR THESE SERVICES DURING THE YEAR AMOUNTED TO $3,813.

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; TO

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

Employer identification number 42-0848288

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION (CONTINUED)

FOSTER PUBLIC EDUCATION BY MEANS OF GRANTS, SCHOLARLY INVESTIGATIONS, CONFERENCES, LECTURES AND EXHIBITIONS.

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECT

FAMILY RELATIONSHIP - RELATED TRUSTEES/TRUSTEES-EMERITUS:

ALLAN HOOVER III, ANDREW HOOVER, ALEXANDER HOOVER, AND MARGARET HOOVER

KENNETH FAWCETT AND JOHN FAWCETT

AUDREY KOFOED AND KAREN SUCHOMEL

STANLEY BARBER AND ANN BARBER DOYLE

FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS

THE ORGANIZATION'S TREASURER, EXECUTIVE DIRECTOR AND FINANCIAL MANAGER ARE PROVIDED A DRAFT COPY OF FORM 990 BY THE PREPARER FOR REVIEW PURPOSES. THESE THREE INDIVIDUALS CONDUCT A THOROUGH REVIEW OF THE DRAFT 990 AND ADVISE THE PREPARER OF ANY CHANGES TO MAKE PRIOR TO COMPLETION OF THE FINAL COPY OF THE 990. FINAL CHANGES ARE THEN MADE BY THE PREPARER. THE TREASURER OF THE ORGANIZATION THEN DOES A FINAL GENERAL REVIEW OF THE COMPLETED FORM 990 AND APPROVES IT BY HIS/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 CONFLICTS

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 15A - COMPENSATION REVIEW & APPROVAL PROCESS FOR CEO, EXEC. DIR., OR TOP MG

THE HUMAN RESOURCES COMMITTEE REVIEWS SALARIES BASED ON, BUT NOT LIMITED TO, COMPENSATION PAID BY COMPARABLE ORGANIZATIONS, PERFORMANCE EVALUATIONS AND OTHER

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

Employer identification number 42-0848288

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS FOR CEO, EXEC. DIR., OR TOP MG

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 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 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.

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 $40,000 WAS PAID TO THE NATIONAL HISTORIC SITE TO FUND THE LONG-RANGE INTERPRETIVE PLAN AND PARTIAL FUNDING FOR THE PERMANENT EXHIBITS DESIGN AND PLANNING. 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 NARRATIVE OR REPORT.

HERBERT HOOVER PRESIDENTIAL LIBRARY/MUSEUM GRANT - THE HERBERT HOOVER FOUNDATION, INC. NORMALLY CONTRIBUTES $40,000 PER YEAR TO THE ASSOCIATION. THE ASSOCIATION NORMALLY MATCHES THE FOUNDATION CONTRIBUTION BY GRANTING $80,000 ANNUALLY 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. DURING THE YEAR ENDED SEPTEMBER 30, 2010, THE FOUNDATION DID NOT MAKE A CONTRIBUTION TO THE ASSOCIATION. THE ASSOCIATION CONTRIBUTED $26,993 TO THE LIBRARY/MUSEUM FROM ITS OWN FUNDS AND FROM OTHER DONOR PASS-THROUGH REQUESTS.

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION

RESEARCH TRAVEL AND SCHOLASTIC AWARDS - 24 RECIPIENTS OF $35,708

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

RESEARCH TRAVEL GRANTS:

KEVIN Y. KIM - MENLO PARK, CA	$685	
MATTHEW J. SMITH - SYRACUSE, NY	925	
CHARLES W. SHARPE, JR. - PHILADELPHIA, PA	1,000	
RICHARD WHITE - BATON ROUGE, LA	1,148	
ANNAH ABETTI KORPI - ATHENS, OH	1,020	
KATHLEEN NEHLS - WINDER, GA	930	
TOTAL		5,708

UNCOMMON STUDENT AWARDS:

15 AWARDS AT $1,000 EACH - TOTAL 15,000

SARAH CRONK - BETTENDORF, IA

ATREYA DEY - FAIRFIELD, IA

AUSTIN EHLERS - STORM LAKE, IA

TYLER FINCHUM - MUSCATINE, IA

RACHEL GOERING - AGENCY, IA

NICHOLAS GOLDSMITH - DES MOINES, IA

JONATHAN O'LEARY - DAVENPORT, IA

MARINA RAMIREZ - CONESVILLE, IA

TUCKER RUPPERT - NORWALK, IA

COLIN RYAN - WEBSTER CITY, IA

D.J. SAVARESE - GRINNELL, IA

DREW SCHRAMM - MOVILLE, IA

ABBEY SMITH - ADEL, IA

ROBERT STARR - CHARLES CITY, IA

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

KENDALL VAN KOOTEN - HARVEY, IA

UNCOMMON STUDENT AWARDS SCHOLARSHIPS:

3 SCHOLARSHIPS AT $5,000 EACH - TOTAL	15,000
VANESSA ESPINOZA - CONESVILLE, IA	
JOHN FREUDE - DES MOINES, IA	
MALEA SCHULTE - NORWAY, IA	
TOTAL PAYMENTS TO INDIVIDUALS	$35,708