DIXON HUGHES GOODMAN, LLP 1410 SPRING HILL ROAD, SUITE 500 TYSONS, VA 22102

> THEODORE ROOSEVELT CONSERVATION PARTNERSHIP 529 14TH STREET NW, NO. 500 WASHINGTON, DC 20045

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CLIENT'S COPY



MAY 10, 2018

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP 529 14TH STREET NW NO. 500 WASHINGTON, DC 20045

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP:

ENCLOSED IS THE ORGANIZATION'S 2017 EXEMPT ORGANIZATION RETURN.

SPECIFIC FILING INSTRUCTIONS ARE AS FOLLOWS.

FORM 990 RETURN:

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. RETURN FORM 8879-EO TO US BY MAY 15, 2018.

WE PREPARED THE RETURNS FROM INFORMATION YOU FURNISHED US WITHOUT VERIFICATION. UPON EXAMINATION OF THE RETURNS BY TAXING AUTHORITIES, REQUESTS MAY BE MADE FOR UNDERLYING DATA. WE THEREFORE RECOMMEND THAT YOU PRESERVE ALL RECORDS WHICH YOU MAY BE CALLED UPON TO PRODUCE IN CONNECTION WITH SUCH AN EXAMINATION.

WE HAVE PROVIDED YOU TAX ADVICE IN CONNECTION WITH THE PREPARATION OF YOUR U.S. FEDERAL TAX RETURN AND ASSOCIATED TAX PLANNING SERVICES WE HAVE FURNISHED. THIS ADVICE IS NOT INTENDED OR WRITTEN TO BE USED BY ANY TAXPAYER FOR THE PURPOSE OF AVOIDING PENALTIES THAT MAY BE IMPOSED ON THE TAXPAYER BY THE INTERNAL REVENUE SERVICE, AND IT CANNOT BE USED BY ANY TAXPAYER FOR SUCH PURPOSE.

COPIES OF THE RETURNS ARE ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THESE COPIES INDEFINITELY.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX RETURNS.

SINCERELY,

DIXON HUGHES GOODMAN LLP



TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

DECEMBER 31, 2017

PREPARED FOR:

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP 529 14TH STREET NW NO. 500 WASHINGTON, DC 20045

PREPARED BY:

DIXON HUGHES GOODMAN, LLP 1410 SPRING HILL ROAD, SUITE 500 TYSONS, VA 22102

AMOUNT DUE OR REFUND:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

NOT APPLICABLE

RETURN MUST BE MAILED ON OR BEFORE:

NOT APPLICABLE

SPECIAL INSTRUCTIONS:

THIS COPY OF THE RETURN IS PROVIDED FOR STATE FILING PURPOSES.

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. RETURN FORM 8879-EO TO US BY MAY 15, 2018.

			** PUBLIC DISCLOSURE COPY	* *				
	0	00	Return of Organization Exempt Fro	om Ir	ncome Tax	OMB No. 1545-0047		
For	mУ	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Cod			2017		
Depa	artment	of the Treasury	Do not enter social security numbers on this form as it	e made public.	Open to Public			
		enue Service	Go to www.irs.gov/Form990 for instructions and the	latest i	information.	Inspection		
Α	For th	e 2017 calend	ar year, or tax year beginning and end	ing				
B	Check if applicab		f organization DORE ROOSEVELT CONSERVATION		D Employer identification	ation number		
	Addre							
		ge PART	NERSHIP					
	chang	ge Doing b	usiness as		04-370	06385		
	returr Final	Number		m/suite	E Telephone number			
	returr termii		14TH STREET NW 500	0		$\frac{39-8727}{6}$		
_	ated ⊐Amer		own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	6,163,796.		
	returr Appli	WASH	INGTON, DC 20045		H(a) Is this a group retu			
	tion pendi		nd address of principal officer: PIETER FOSBURGH AS C ABOVE					
	Tax av	empt status:		527	H(b) Are all subordinates inclu			
			TRCP.COM		If "No," attach a lis H(c) Group exemption r			
				I Vear o	of formation: 2002 M S			
	art I	Summary						
	1		e the organization's mission or most significant activities: SEE PAR	RT I	II. LINE 1.			
e	1.	Drieffy deserte			,			
nan	2	Check this bo	x x if the organization discontinued its operations or disposed of the organization discontinued its operations or disposed of the organization discontinued its operations of the organization dits operation disco	of more	than 25% of its net asset	s.		
ver	3		ting members of the governing body (Part VI, line 1a)			25		
පී	4		lependent voting members of the governing body (Part VI, line 1b)			25		
ې مې	5		of individuals employed in calendar year 2017 (Part V, line 2a)			30		
/itie	6		of volunteers (estimate if necessary)			10		
Activities & Governance	7 a		d business revenue from Part VIII, column (C), line 12			0.		
_	b	Net unrelated	business taxable income from Form 990-T, line 34	<u></u>	7b	0.		
					Prior Year	Current Year		
Ð	8	Contributions	and grants (Part VIII, line 1h)		2,842,738.	5,653,440.		
Revenue	9	Program servi	ce revenue (Part VIII, line 2g)		0.	0.		
ěč	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)		4,763.	4,981.		
	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		406,746.	328,159.		
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,254,247.	5,986,580.		
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		200,000.	0.		
	14	-	to or for members (Part IX, column (A), line 4)		0.	0.		
es	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)		2,426,938.	2,753,685. 0.		
ens	16a	Professional f	undraising fees (Part IX, column (A), line 11e) ing expenses (Part IX, column (D), line 25) \blacktriangleright 357,955.		0.	0.		
Expenses	. D				1,623,131.	1,680,736.		
_	1		es (Part IX, column (A), lines 11a-11d, 11f-24e) s. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,250,069.	4,434,421.		
	18		expenses. Subtract line 18 from line 12		-995,822.	1,552,159.		
		neveriue less	expenses. Subtract line to nonnine 12		ginning of Current Year	End of Year		
ets o	20	Total assets (F	Part X, line 16)		2,543,271.	4,137,622.		
tt Assets or od Balances	21		(Part X, line 26)		291,647.	333,839.		
Net /	22		fund balances. Subtract line 21 from line 20		2,251,624.	3,803,783.		
_	art II			<u> </u>	, , , , ,			
Unc	er pen		I declare that I have examined this return, including accompanying schedules and	stateme	nts, and to the best of mv kr	nowledge and belief, it is		
			. Declaration of preparer (other than officer) is based on all information of which p			_ , .		

Sign	Signature of officer		Date
Here	PIETER FOSBURGH, PRESI	DENT & CEO	
	Type or print name and title		
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid	TAMARA VINEYARD	TAMARA VINEYARD	05/10/18 self-employed P01775208
Preparer	Firm's name DIXON HUGHES GOO	DMAN, LLP	Firm's EIN ► 56-0747981
Use Only	Firm's address 🕨 1410 SPRING HILL	ROAD, SUITE 500	
	TYSONS, VA 22102		Phone no. $703 - 970 - 0400$
May the II	RS discuss this return with the preparer shown abo	ve? (see instructions)	X Yes No
			- 000 (

732001 11-28-17 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2017)

	990 (2017) PARTNERSHIP	04-3706385	Page
_	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	IN ORDER TO GUARANTEE ALL AMERICANS QUALITY PLACES TO HU		
	WE STRENGTHEN LAWS, POLICIES AND PRACTICES AFFECTING FIS		FE
	CONSERVATION BY LEADING PARTNERSHIPS THAT INFLUENCE DECI	ISION MAKERS.	
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	XNo
	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	XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	• •	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	ers, the total expenses, a	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 3,630,629. including grants of \$ 0.) (Reve		
	CENTER FOR WESTERN LANDS (CWL): RESPONSIBLE MANAGEMENT		
	PUBLIC-LANDS AND CONSERVATION OF IMPORTANT BACKCOUNTRY A MAIN REASONS SPORTSMEN EXPERIENCE HIGH-QUALITY HUNTING A		
	THESE AREAS. THESE INTACT PUBLIC LANDS OFFER KEY HABITA		
	FISH AND WILDLIFE SPECIES, INCLUDING WILD TROUT AND SALM		
	BIRDS, MULE DEER, ELK, PRONGHORN AND WILD SHEEP. DESPITE		
	IMPORTANCE, HOWEVER, THESE PLACES AND THE RESOURCES THEY		
	FACING MOUNTING DEVELOPMENT PRESSURES ACROSS THE WEST FR		
	AND RENEWABLE ENERGY DEVELOPMENT, TRANSMISSION CORRIDORS		
	MANAGED OFF-ROAD VEHICLE USE.		
	THESE ISSUES FORM THE CORE OF THE TRCP'S CENTER FOR WEST	TERN LANDS. T	HE
4b	(Code:) (Expenses \$ including grants of \$) (Reve	nue \$	
4c	(Code:) (Expenses \$ including grants of \$) (Reve	nue \$	
4d	Other program services (Describe in Schedule O.)		
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)	
4d 4e)	
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 3,630,629.		990 (2017
4e	(Expenses \$ including grants of \$) (Revenue \$		990 (2017

04-3706385	Page 3
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	990 (2017) PARTNERSHIP 04-3706	385	Р	age 3
Pa	t 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
-	during the tax year? If "Yes," complete Schedule C, Part II	4	х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
Ū	similar amounts as defined in Revenue Procedure 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	L		
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
'		7		х
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	⊢ ′−		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			х
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			77
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
IZa		100	х	
L	Schedule D, Parts XI and XII	12a	21	
a		104		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X 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		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	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		Х
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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes."			
	complete Schedule G. Part III	19		х
-			000	

Form **990** (2017)

Form	990 (2017) PARTNERSHIP 04-37	06385	Р	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	. 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government 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 or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	. 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	. 27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	. 28 a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28 b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 29	Х	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	. 30		<u> </u>
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		<u> </u>
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		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1			X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. <u>35a</u>		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			—
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		<u>x</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O		X	
		Form	990	(2017)

Form	990 (2017) PARTNERSHIP		04-3706	385	P	_{age} 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance					
-	Check if Schedule O contains a response or note to any line in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	11			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portat	ole gaming			
	(gambling) winnings to prize winners?			1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	30			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	າs?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions	s)				
				3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthori	ty over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccour	it)?	4a		X
b	If "Yes," enter the name of the foreign country:					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad	coun	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	tion?		5b		X
с	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	nization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontrac	t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	e			
				8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:		I			
а	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:	1	I			
а	Gross income from 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				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1			
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule	eO		14b		

Form **990** (2017)

PARTNERSHIP

Form 990 (2017)

X

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.

Check if Schedule O contains a response or note to any line in this Part VI	
Section A. Governing Body and Management	

	terra. devening body and management					
			25		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	20			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		25			
-	Enter the number of voting members included in line 1a, above, who are independent	-				
2						х
~	officer, director, trustee, or key employee?			2		
3	Did the organization delegate control over management duties customarily performed by or under the			~		х
	of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 9		filedO	3 4		X
4 5	Did the organization become aware during the year of a significant diversion of the organization's as			4 5		X
5 6				6		X
	Did the organization have members or stockholders?			0		
74				7a		х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, s			74		
	persons other than the governing body?			7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye			15		
	The governing body?			8a	Х	
	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
-	organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>			9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R					
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such c					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befor	e filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			12b	Х	
с	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe					
	in Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approv	al by ine	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange					37
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		•			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga					
800	exempt status with respect to such arrangements?			16b		
	List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, C	יז גי		TT.	VC	vv
17 10						<u><u><u></u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u><u></u></u>
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-		011 50 1 (C)(S)S 0111y) av	allable	;	
	for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website X Upon request Other (explain	n in Ori				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co		,	financi	al	
13	statements available to the public during the tax year.		interest policy, and	manu	a	
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks and	t records:			
	PIETER FOSBURGH - 202-639-8727					
	529 14TH STREET NW, NO. 500, WASHINGTON, DC 20045					
732006	S 11-28-17 SEE SCHEDULE O FOR FULL LIST OF STATES			Form	990	(2017)

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	THEODORE ROOSEVELT CONSERVATION							
Form 990 (2	2017) PARTNERSHIP	04-3706385	Page 7					
Part VII	Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated							
Employees, and Independent Contractors								
	Check if Schedule O contains a response or note to any line in this Part VII							
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.								

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received report-able 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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			_ ((C)			(D)	(E)	(F)
Name and Title	Average hours per week	box offic	not cl , unles	ss pei	more rson i	than o s both r/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ROD NELSON	1.00								0	0
CHAIRMAN	1 0 0	X		X				0.	0.	0.
(2) JAMES A. BAKER	1.00							0	0	0
VICE CHAIR	1 00	Х		X				0.	0.	0.
(3) PAUL VIGANO	1.00			77				0	0	0
TREASURER	1 00	Х		Х				0.	0.	0.
(4) KATIE DISTLER	1.00	x		x				0.	0.	0
SECRETARY (5) F. WELDON BAIRD	0.50	<u> </u>		<u> </u>				0.	0.	0.
DIRECTOR	0.50	x						0.	0.	0.
(6) SCOTT BLACKWELL	0.50							0.	0.	0.
DIRECTOR	0.50	x						0.	0.	0.
(7) GEORGE COOPER	0.50							0.	0.	
DIRECTOR	0.50	х						0.	0.	0.
(8) WILLIAM DEMMER	0.50									
DIRECTOR		x						0.	0.	0.
(9) MATT ECHOLS	0.50									
DIRECTOR		х						0.	Ο.	0.
(10) JOHN GRIFFIN	0.50									
DIRECTOR		х						0.	0.	0.
(11) ROBERT HAYES	0.50									
DIRECTOR		Х						0.	0.	0.
(12) FRANK HUGELMEYER	0.50									
DIRECTOR		Х						0.	0.	0.
(13) LESLIE KETNER	0.50									
DIRECTOR		Х						0.	0.	0.
(14) MEGAN MORRIS	0.50									
DIRECTOR		Х						0.	0.	0.
(15) J. MICHAEL NUSSMAN	0.50	_						_		_
DIRECTOR		Х				<u> </u>		0.	0.	0.
(16) DAVID D. PERKINS	0.50									
DIRECTOR		Х						0.	0.	0.
(17) RON REGAN	0.50								^	^
DIRECTOR 732007 11-28-17		Х						0.	0.	0. Form 990 (2017)

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	990 (2017) PARTNERSH	IIP								04-3706	<u>;38</u>	<u>5</u>	Page 8
Par	VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	d Hig	ghes	t C	ompensated Employee	s (continued)			
	(A)	(B)				C)	•		(D)	(E)	Τ	(F)	
	Name and title	Average			Pos	itior			Reportable	Reportable		Estimat	ed
		hours per					than o is both		compensation	compensation		amount	
		week					or/trus		from	from related		other	
		(list any	tor						the	organizations		ompens	
		hours for	direc				-		organization	(W-2/1099-MISC)		from th	
		related	ee or	stee			nsate		(W-2/1099-MISC)	(l c	organiza	
		organizations	trust	al tru		yee	mpe					and rela	
		below	ndividual trustee or director	nstitutional trustee	-	old m	est cc	er			0	rganizat	ions
		line)	Indiv	In stit	Office	Key employee	Highest compensated employee	Former					
(18)	THEODORE SEDGWICK	0.50											
DIRE	CTOR		х						0.	0.			Ο.
(19)	LIZ STORER	0.50									+		
DIRE			x						0.	0.			0.
	JERRY STRITZKE	0.50									+		<u> </u>
DIRE		0.30	x						0.	0.			0.
	RICH TRUMKA	0.50	^						0.	0.	+		0.
		0.50	v						0	0			0
DIRE		0.50	Х				_		0.	0.	–		0.
	PAUL R. VAHLDIEK, JR.	0.50								_			
DIRE			Х						0.	0.			0.
(23)	HOWARD VINCENT	0.50											
DIRE	CTOR		Х						0.	0.			0.
(24)	K.C. WALSH	0.50											
DIRE	CTOR		X						0.	0.			0.
(25)	ALSTON WATT	0.50									+		
DIRE	CTOR		x						0.	0.			0.
	PIETER FOSBURGH	40.00					-				+		
	IDENT/CEO				х				226 600	٥		20 E	77
					Λ				226,699.	0.		$\frac{38,5}{20}$	
	Sub-total								226,699.	0.		38,5	
С	Total from continuation sheets to Part VI	I, Section A							310,527.	0.			
d	Total (add lines 1b and 1c)								537,226.	0.		65,3	04.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wh	o re	eceived more than \$100,	000 of reportable			
	compensation from the organization												3
												Yes	No
3	Did the organization list any former officer,	director. or tru	ustee	e. ke	v er	olan	vee.	or l	highest compensated en	nplovee on			
	line 1a? If "Yes," complete Schedule J for s					•	•		•		3		X
4	For any individual listed on line 1a, is the su										-		
-											4	X	
F	and related organizations greater than \$150												
5	Did any person listed on line 1a receive or a										-		X
Cool	rendered to the organization? If "Yes," com	plete Schedule	e J fo	or su	ich į	bers	on .				5		
	ion B. Independent Contractors												
1	Complete this table for your five highest co	•	•							•	ation	from	
	the organization. Report compensation for	the calendar ye	ear e	endin	ig w	vith c	or wi	thin	the organization's tax ye	ear.			
	(A)	- dalue			_				(B)			(C)	
	Name and business	address	NC	ONE	5				Description of s	ervices	Comp	pensatio	on
								Ţ					
_													

Total number of independent contractors (including but not limited to those listed above) who received more than 2 0 \$100,000 of compensation from the organization ► 0 SEE PART VII, SECTION A CONTINUATION SHEETS

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Form 990 PARTNE	DRE ROOSEVI ERSHIP	ELI	' C	ON	ISE	RV	ЪΤ	ION	04-370	6385
	rs, Trustees, Key E (B)	mplo	yee		nd H C)	ligh	est (Compensated Employe (D)	es <u>(continued)</u> (E)	(F)
Name and title	Average hours per week (list any hours for related organizations below line)	tee or director	Institutional trustee	Pos	ition		Former (K	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(27) GEOFFREY MULLINS CHIEF OPERATIONS OFFICER	40.00			x				149,894.	0.	13,025
(28) CHRISTY PLUMER	40.00	-						149,094.	0.	13,023
CHIEF CONSERVATION OFFICER					x			160,633.	0.	13,702.
		-								
		-								
		$\frac{1}{1}$								
Total to Part VII, Section A, line 1c								310,527.		26,727

THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

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Pa	rt VII	Statement of Reven	ue					
		Check if Schedule O conta	ains a response	or note to any lin	e in this Part VIII (A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under
						revenue	revenue	sections 512 - 514
nts	1 a	Federated campaigns						
Gra		Membership dues						
ts, (Arr		Fundraising events		55,630.				
ilar İlar		Related organizations						
ns, Sin		Government grants (contributi						
utio	Ť	All other contributions, gifts, gran		507 810				
Oth	-	similar amounts not included abov Noncash contributions included in lines		<u>597,810.</u> 62,315.				
Contributions, Gifts, Grants and Other Similar Amounts	-	Total. Add lines 1a-1f			5,653,440.			
0 %				Business Code				
đ	2 a			Dusiness Oode				
Program Service Revenue	b							
Ser	c							
	d							
Be	е							
P	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f		►				
	3	Investment income (including	,	,				
		other similar amounts)		►	4,981.			4,981.
	4	Income from investment of tax		•				
	5	Royalties		>				
			(i) Real	(ii) Personal				
		Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
	h	assets other than inventory						
	D	Less: cost or other basis and sales expenses						
	~	Gain or (loss)						
		Net gain or (loss)						
		Gross income from fundraising						
Other Revenue		including \$ 55,6						
eve		contributions reported on line	1c). See					
ñ		Part IV, line 18	а	505,375.				
the	b	Less: direct expenses	b	177,216.				
0	с	Net income or (loss) from fund	raising events	►	328,159.			328,159.
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gam		····· •				
	10 a	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold						
	C	Net income or (loss) from sales Miscellaneous Revenue		Business Code				
	11 🤉							
	n a b							
	c							
		All other revenue						
		Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			5,986,580.	0.	0.	333,140.
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THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

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) Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses **(D)** Fundraising (A) (B) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, 602,530. 421,771. 60,252. 120,507. trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,674,652. 1,463,717. 80,030. 130,905. Other salaries and wages 7 8 Pension plan accruals and contributions (include 54,960. 50,428. 5,444. -912. section 401(k) and 403(b) employer contributions) 271,749. 22,181. 234,663. 14,905. Other employee benefits 9 149,794. 129,844. 3,425. 16,525. 10 Payroll taxes 11 Fees for services (non-employees): Management а b Legal 33,440. 176. 33,264. С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g 242,902. 237,902. 5,000. column (A) amount, list line 11g expenses on Sch 0.) 258,521. 161,393. 174. 96,954. Advertising and promotion 12 89,221. 53,007. 25,619. 10,595. Office expenses 13 132,489. 53,946. 52,762. 25,781. Information technology 14 15 Royalties 177,375. 10,800. 166,575. 16 Occupancy 350,324. 317,566. 17,259. 15,499. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 240,418. 199,033. 15,198. 26,187. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 16,645. 16,645. Depreciation, depletion, and amortization 22 20,994. 17,924. 3,070. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 48,373. 48,373. MEDIA SUMMIT а DUES AND SUBSCRIPTIONS 23,730. 12,572. 3,298. 7,860. h 20,250. 17,750. 2,500. DONATIONS TO OTHER ORGA С 16,026. 13,765. 2,261. d BANK SERVICE CHARGES 217,688. -121,038. 10,028. -86,622. e All other expenses 4,434,421. 3,630,629. 445,837. 357,955. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

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Form 990 (2017)

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Form 990 (2017)

Form 990 (2017)
Part X Balance Sheet

PARTNERSHIP

		Check if Schedule O contains a response or not	e to any l	ine in this Part X			
			_		(A)		(B)
					Beginning of year		End of year
	1				500.	1	400.
	2	Savings and temporary cash investments			1,906,021.	2	2,229,324
	3	Pledges and grants receivable, net			435,528.	3	1,732,808
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation	ated empl	oyees. Complete			
	_	Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect		•			
ets	_	employees' beneficiary organizations (see instr).		Г		6	
Assets	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use		116,984.	8	97,108	
	9	Prepaid expenses and deferred charges	110,904.	9	97,100		
	10a	Land, buildings, and equipment: cost or other	10-	103 533			
	h	basis. Complete Part VI of Schedule D	10a	<u>193,533</u> . 156,029.	43,760.	10c	37,504
		Less: accumulated depreciation	45,700.	11	57,5040		
	11 12	Investments - publicly traded securities			12		
	12	Investments - program-related. See Part IV, line			13		
	13 14			14			
	15	•		40,478.	15	40,478	
	16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equ			2,543,271.	16	4,137,622
	17	Accounts payable and accrued expenses			261,023.	17	164,303
	18	Grants payable			201/0231	18	101/0000
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
	22	Loans and other payables to current and former					
tie		key employees, highest compensated employee					
Liabilities						22	
Lia	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines					
		Schedule D			30,624.	25	169,536
	26	Total liabilities. Add lines 17 through 25			291,647.	26	169,536 333,839
		Organizations that follow SFAS 117 (ASC 958), check	here 🕨 🗴 and			
o		complete lines 27 through 29, and lines 33 an					
e	27	Unrestricted net assets			549,033.	27	718,920
alar	28			1,702,591.	28	3,084,863	
а р	29	Permanently restricted net assets		29			
<u>n</u>		Organizations that do not follow SFAS 117 (A					
Net Assets or Fund Balances		and complete lines 30 through 34.					
ŝ	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or ed				31	
°t A	32	Retained earnings, endowment, accumulated in				32	
ž	33	Total net assets or fund balances			2,251,624.	33	3,803,783
	34				2,543,271.	34	4,137,622.

Form **990** (2017)

THEODORE	ROOSEVELT	CONSERVATION
DADWNEDCL	атр	

	990 (2017) PARTNERSHIP	<u>04-3</u> 7	06385	Page 12			
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,580.			
2	Total expenses (must equal Part IX, column (A), line 25)	2		,421.			
3	Revenue less expenses. Subtract line 2 from line 1	3		,159.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,251	,624.			
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	<u>3,803</u>	<u>,783.</u>			
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,					
	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.						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle 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	red audit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				

Form **990** (2017)

SCHEDULE A			Dublic Cha	rity Status an	d Duk	slia Qu	innort		OMB No. 1545-0047
(Fo	rm 990 or 990-EZ)			rity Status an					2017
_		•	494	47(a)(1) nonexempt cha	ritable tru	ıst.			
	tment of the Treasury I Revenue Service			Attach to Form 990 or F //Form990 for instruction			nformation.		Open to Public Inspection
Nam	e of the organizati	-		VELT CONSERVA				• •	identification number
			NERSHIP					0	4-3706385
Pa				All organizations must co			e instructions	S.	
	<u> </u>	-		For lines 1 through 12, cl	•		\/ A \/:\		
1 2				n of churches described Attach Schedule E (Form			l)(A)(I).		
2				anization described in se			i)		
4	·		i î	njunction with a hospital)(iii). Enter	the hospital's name,
	city, and stat	-		, , , ,					· /
5	An organizati	on operated f	or the benefit of a co	llege or university owned	or operat	ed by a go	vernmental u	nit describe	d in
	section 170	(b)(1)(A)(iv). (Complete Part II.)						
6			-	nental unit described in					
7			•	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general p	ublic described in
8			Complete Part II.)	(1)(A)(ui) (Complete Der	. 11.)				
о 9	·			(1)(A)(vi). (Complete Pari in section 170(b)(1)(A)(i	-	ed in coniu	nction with a	land-grant	college
5	-		-	ulture (see instructions).		-		-	-
	university:		5 5 5	,				5	
10	An organizati	on that norma	ally receives: (1) more	than 33 1/3% of its supp	port from a	contributio	ns, membersł	nip fees, an	d gross receipts from
	activities rela	ted to its exer	npt functions - subjec	ct to certain exceptions,	and (2) no	more than	1/3% of it	ts support f	rom gross investment
				(less section 511 tax) fro	m busines	sses acquii	red by the org	anization a	íter June 30, 1975.
			mplete Part III.)	and the stand for a shift of the			0(-)(4)		
11 12	·	-	-	vely to test for public sat vely for the benefit of, to	•			rny out the	ourposes of one or
12	-	-	-	d in section 509(a)(1) o	-			•	-
			-	f supporting organization					
а		-		upervised, or controlled		-		-	jiving
	the suppor	ted organizati	on(s) the power to reg	gularly appoint or elect a	majority c	of the direc	tors or truste	es of the su	pporting
			complete Part IV, Se						
b				or controlled in connect		• •	0		•
		-		anization vested in the sa	ame perso	ns that coi	ntrol or manag	ge the supp	orted
с	ĭ	. ,	st complete Part IV,	g organization operated	in connect	tion with a	and functional	ly integrate	d with
C		-). You must complete I				ly integrate	u with,
d		0		porting organization oper			-	ted organiz	ation(s)
				ation generally must sat					
	requiremen	t (see instruct	tions). You must cor	nplete Part IV, Sections	A and D,	and Part	V .		
е				written determination from			Туре I, Туре	II, Type III	
				nally integrated supporting					
t	Enter the number		organizations n about the supporte	d organization(c)					
<u> </u>	(i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed	(v) Amount of	fmonetary	(vi) Amount of other
	organization	I		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
Tota		duction Act h	Notico coo the last	uctions for Form 990 or	000 EZ	700004 15		dulo A (Ee-	m 990 or 990-EZ) 2017
LINA	. or i aper work he	addition Act I	touce, see the math		550-EZ.	102021 10-	Jo-n Julie		1 330 01 330-EZJ 2017

Schedule A	(Form 990 or 990-EZ) 2017 PARTNERSHIP	04-3706385 Pa
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 or if the organization	failed to qualify under Part III. If the organization

fails to qualify under the tests listed below, please complete Part III.)

260	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3913996.	4056407.	5106742.	3249484.	5981599.	22308228.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	2012006	4056405	5106840	2040404	5001500	0000000
	Total. Add lines 1 through 3	3913996.	4056407.	5106742.	3249484.	5981599.	22308228.
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,						0521050
~	column (f)						<u>9531050.</u> 12777178.
	Public support. Subtract line 5 from line 4.						μζ///1/0.
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(a) 2015	(d) 2016	(a) 2017	(f) Total
	Amounts from line 4	3913996.	(b) 2014 4056407.	(c) 2015 5106742.	(d) 2016 3249484.	(e) 2017 5981599	22308228.
	Gross income from interest,	5515550.	4050407.	51007420	5215101.	33013333.	22300220.
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	3,240.	4,092.	4,181.	4,763.	4,981.	21,257.
9	Net income from unrelated business	0,2101	1,0020	1,1011			
5	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11							22329485.
12	Gross receipts from related activities,	etc. (see instructio	ons)			12	
	First five years. If the Form 990 is for	,	,				
	organization, check this box and stop	0	, ,	, ,	,	()()	
Sec	ction C. Computation of Publi	c Support Per	centage				·
14	Public support percentage for 2017 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	57.22 %
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	60.03 %
16a	33 1/3% support test - 2017. If the o	organization did no	t check the box or	n line 13, and line ⁻	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				►X
b	33 1/3% support test - 2016. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation			
17a	10% -facts-and-circumstances test	-					
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organizat	ion qualifies as a p	publicly supported	organization		
b	10% -facts-and-circumstances test	- 2016. If the org	anization did not c	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the						e
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	ly supported organ	nization	▶∐
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	s ►
					Sche	dule A (Form 990) or 990-EZ) 2017

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Schedule A (Form 990 or 990-EZ) 2017 PARTNERSHIP Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 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.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiz	zation,
	check this box and stop here						
Sec	ction C. Computation of Public	c Support Per	centage				
15	Public support percentage for 2017 (I	ine 8, column (f) di	vided by line 13, o	column (f))		15	%
16	Public support percentage from 2016	Schedule A, Part	III, line 15			16	%
Sec	ction D. Computation of Invest	stment Income	Percentage				
17	Investment income percentage for 20	017 (line 10c, colur	nn (f) divided by li	ine 13, column (f))		17	%
18	Investment income percentage from	2016 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2017. If the	organization did r	ot check the box	on line 14, and lin	e 15 is more than 3	33 1/3%, and line ⁻	17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2016. If the	-	-				
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	23 10-06-17						0 or 990-EZ) 2017
			16	5			,

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Schedule A (Form 990 or 990-EZ) 2017 PARTNERSHIP Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and *if you checked 12a or 12b in Part I, answer (b) and (c) below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

17

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 10a

 10b

 10b

 Schedule A (Form 990 or 990-EZ) 2017

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

Yes No

THEODORE ROOSEVELT CONSERVATION Schedule A (Form 990 or 990-EZ) 2017 PARTNERSHIP

Pai	Supporting Organizations (continued)			
	_		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
	_		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		1
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instru	(ctions)		
2	Activities Test. Answer (a) and (b) below.	00.01.0/	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
a	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b		Ja		
D	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		
732025	5 10-06-17 Schedule A (Form 99		0-F7)	2017
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Schedule A (Form 990 or 990-EZ) 2017 PARTNERSHIP Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All 1 other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 1 2 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 5 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 **3** Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 4 see instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1 2 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 3 Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 6

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

Schedule A (Form 990 or 990-EZ) 2017

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THEODORE ROOSEVELT CONSERVATION 000 FZ 0017 DARTNER CHTD

Sche	dule A (Form 990 or 990-EZ) 2017 PARTNERSHIP		0	4-3706385 Page 7
Par	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	1
Secti	ion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	3		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
_	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a	,			
	From 2013			
	From 2014			
	From 2015			
	From 2016			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
•	line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
-	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
-	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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	THEODORE ROOSEVELT CONSERVATIO	N
Schedule A	(Form 990 or 990-EZ) 2017 PARTNERSHIP	04-3706385 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10 Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; F Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this	/, Section B, lines 1 and 2; Part IV, Section C, Part V, line 1; Part V, Section B, line 1e; Part V,
	(See instructions.)	
732028 10-06-1	17	Schedule A (Form 990 or 990-EZ) 2017
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Schedule B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service

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Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2017

Employer identification number

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THEODORE ROOSEVELT CONSERVATION

PARTNERSHIP	
Organization type (check one):	

04-3706385

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

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

General Rule

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

Special Rules

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

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions $e_{xclusively}$ for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an $e_{xclusively}$ religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year $e_{xclusively} = 1000 \text{ more}

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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

Employer identification number

04-3706385

PARIN	CKONIF	04	-3700303
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>1,750,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,190,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>220,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$204,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$152,845.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$150,233.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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2017.03040 THEODORE ROOSEVELT CONSER 30012871

Name of organization THEODORE ROOSEVELT CONSERVATION PARTNERSHIP

Employer identification number

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Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>150,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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2017.03040 THEODORE ROOSEVELT CONSER 30012871

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Part II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
	• • • • • • • • • • • • • • • • • • • •		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I		(See instructions.)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I			
		\$	

Name of organization

Employer identification number

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2017.03040 THEODORE ROOSEVELT CONSER 30012871

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Schedule B	(Form 990,	990-EZ,	or 990-PF)	(2017)
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Name of org			Employer identification number		
	DRE ROOSEVELT CONSERVAT	ION	04.0506005		
PARTNE		ributions to organizations described in s	04-3706385 section 501(c)(7), (8), or (10) that total more than \$1,000 for		
i art m	the year from any one contributor Complete	columns (a) through (e) and the followir	10 line entry. For organizations		
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if addition		s for the year. (Enter this into: once.) ••• •		
(a) No. from			(d) Dependention of how with in hold		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
F		(e) Transfer of gift			
F	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
		[
(a) No. from	(b) Purpose of gift	(a) Lios of gift	(d) Description of how gift is hold		
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
			—		
		(e) Transfer of gift			
F	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
		[
		[
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I	(2)	(0) 000 01 g	(
			—		
		(e) Transfer of gift			
			_		
F	Transferee's name, address, a		Relationship of transferor to transferee		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
Part I					
			_		
Ļ					
		(e) Transfer of gift			
	Transforce's name address a	nd 7 ID + 4	Polationship of transforms to transforms		
ŀ	Transferee's name, address, a		Relationship of transferor to transferee		
723454 11-01-	-17		Schedule B (Form 990, 990-EZ, or 990-PF) (2017)		

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SCHEDULE C		Political Campaign and Lobbying Activities			545-0047		
(Fo	(Form 990 or 990-EZ) For Organizations Exempt From Income Tax Under section 501(c) and section 527				17		
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.				Open to Inspec			
lf th	the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then						
٠	Section 501(c)(3) org	anizations: Complete Parts I-A and B. Do not complete Part I-C.					
٠	Section 501(c) (othe	than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Par	t I-B.				
٠	Section 527 organiza	ations: Complete Part I-A only.					
lf th	e organization ansv	vered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Act	ivities), the	n			
•	Section 501(c)(3) org	anizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do r	not complet	e Part II-B.			
•	Section 501(c)(3) org	anizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B	. Do not co	mplete Part II	-A.		
lf th	e organization ansv	vered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form	990-EZ, P	art V, line 35	ic (Proxy		
Tax) (see separate insti	ructions), then					
•	Section 501(c)(4), (5)	, or (6) organizations: Complete Part III.					
Nan	ne of organization	THEODORE ROOSEVELT CONSERVATION		identificatio			
		PARTNERSHIP		<u>4-37063</u>	85		
Pa	rt I-A Comple	ete if the organization is exempt under section 501(c) or is a section 52	27 organi	ization.			
2	Political campaign	on of the organization's direct and indirect political campaign activities in Part IV. activity expenditures political campaign activities					
Pa	rt I-B Comple	ete if the organization is exempt under section 501(c)(3).					
		f any excise tax incurred by the organization under section 4955	▶\$				
		f any excise tax incurred by organization managers under section 4955					
3		ncurred a section 4955 tax, did it file Form 4720 for this year?		Yes	No		
4a		ade?		Yes			
	If "Yes," describe ir						
		ete if the organization is exempt under section 501(c), except section {	501(c)(3).				
1	Enter the amount d	irectly expended by the filing organization for section 527 exempt function activities	▶\$				
		f the filing organization's funds contributed to other organizations for section 527	· · ·				
		tivities	▶\$				
3		on expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL.	· ·				
			▶\$				
4				Yes	No		
5							

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

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

Schedule C (Form 990 or 990-EZ) 2017

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Schedule C (Form 990 or 990-EZ) 2017	Schedule C (Form 990 or 990-EZ) 2017 PARTNERSHIP 04-3706385 Page 2						
Part II-A Complete if the org	anization is exer	npt under section	501(c)(3) and file	ed Form 5768 (ele	ction under		
section 501(h)).							
A Check 🕨 📃 if the filing organiza	tion belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,		
expenses, and shar	e of excess lobbying (expenditures).					
B Check ▶ if the filing organiza	tion checked box A a	nd "limited control" pro	visions apply.	[Γ		
	ts on Lobbying Expe litures" means amou	nditures Ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals		
1a Total lobbying expenditures to influ	ience public opinion (arass roots lobbying)		47,948.			
b Total lobbying expenditures to influ				218,718.			
c Total lobbying expenditures (add lir	-	• • • •		266,666.			
d Other exempt purpose expenditure				4,167,755.			
e Total exempt purpose expenditures				4,434,421.			
f Lobbying nontaxable amount. Ente	r the amount from the	e following table in both	n columns.	371,721.			
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable amo	ount is:				
Not over \$500,000	20% of	the amount on line 1e.					
Over \$500,000 but not over \$1,000	,000 \$100,00	00 plus 15% of the exce	ess over \$500,000.				
Over \$1,000,000 but not over \$1,50	00,000 \$175,00	00 plus 10% of the exce	ess over \$1,000,000.				
Over \$1,500,000 but not over \$17,	000,000 \$225,00	00 plus 5% of the exces	ss over \$1,500,000.				
Over \$17,000,000	\$1,000,	000.					
g Grassroots nontaxable amount (en	ter 25% of line 1f)			92,930.			
h Subtract line 1g from line 1a. If zero or less, enter -0-				0.			
i Subtract line 1f from line 1c. If zero				0.			
j If there is an amount other than zer		line 1i, did the organiza	tion file Form 4720	-			
reporting section 4911 tax for this					Yes No		
(Some organizations th	nat made a section 5	eraging Period Under 01(h) election do not I ate instructions for lin	nave to complete all o	of the five columns be	low.		
	Lobbying Expe	nditures During 4-Yea	r Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total		
2a Lobbying nontaxable amount	366,699.	354,885.	362,503.	371,721.	1,455,808.		
b Lobbying ceiling amount (150% of line 2a, column(e))					2,183,712.		
c Total lobbying expenditures	7,185.	16,705.	121,462.	266,666.	412,018.		
d Grassroots nontaxable amount	91,675.	88,721.	90,626.	92,930.	363,952.		
e Grassroots ceiling amount (150% of line 2d, column (e))					545,928.		
f Grassroots lobbying expenditures	755.	7,841.	19,320.	47,948.	75,864.		

Schedule C (Form 990 or 990-EZ) 2017

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Schedule C (Form 990 or 990-EZ) 2017 PARTNERSHIP

04-3706385 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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

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

Schedule C (Form 990 or 990-EZ) 2017

				OMP No. 1545-0047		
SC		Ital Financial Statements		OMB No. 1545-0047		
(Forn	rm 990) Complete if the of Part IV line 6, 7, 8, 9	organization answered "Yes" on Form 990, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		201/		
	rtment of the Treasury	Attach to Form 990.		Open to Public Inspection		
		m990 for instructions and the latest information.	F aran	loyer identification number		
Nam	ne of the organization THEODORE ROOSEVEL PARTNERSHIP					
Par		sed Funds or Other Similar Funds or Ac	coun	04-3706385 ts. Complete if the		
	organization answered "Yes" on Form 990, Part IV					
	-	(a) Donor advised funds (I	b) Fun	ds and other accounts		
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors	-				
	are the organization's property, subject to the organization			Yes No		
6	Did the organization inform all grantees, donors, and dono					
	for charitable purposes and not for the benefit of the dono	· · · · ·	0			
Dar				Yes No		
		organization answered "Yes" on Form 990, Part IV,	line 7.			
1	Purpose(s) of conservation easements held by the organiz			and love a sure of		
	Preservation of land for public use (e.g., recreation of		•			
	Protection of natural habitat	Preservation of a certified his	storic s	structure		
0	Preservation of open space	ulified concernation contribution in the form of a con		ion accoment on the last		
2	Complete lines 2a through 2d if the organization held a qu	alined conservation contribution in the form of a cor	Iserval	Held at the End of the Tax Year		
•	day of the tax year.		2a	HEIU AL LIE EIIU OI LIE TAX FEAT		
a b	 Total number of conservation easements Total acreage restricted by conservation easements 		2a 2b			
b		structure included in (a)	20 2c			
	Number of conservation easements included in (c) acquire		20			
u	listed in the National Register		2d			
3	Number of conservation easements modified, transferred,			during the tax		
Ū	year	released, exanguished, or terminated by the erganiz	Lucion			
4	Number of states where property subject to conservation	easement is located				
5	Does the organization have a written policy regarding the					
	violations, and enforcement of the conservation easement			Yes No		
6	Staff and volunteer hours devoted to monitoring, inspecti					
	▶					
7	Amount of expenses incurred in monitoring, inspecting, h	andling of violations, and enforcing conservation eas	ement	s during the year		
	▶\$					
8	Does each conservation easement reported on line 2(d) al	pove satisfy the requirements of section 170(h)(4)(B)(i)			
	and section 170(h)(4)(B)(ii)?			Yes No		
9	In Part XIII, describe how the organization reports conserv	vation easements in its revenue and expense stateme	ent, an	d balance sheet, and		
	include, if applicable, the text of the footnote to the organ	ization's financial statements that describes the orga	anizatio	on's accounting for		
Der	conservation easements.	of Art Historical Traceures or Other Si	mile	Acceto		
Par		of Art, Historical Treasures, or Other Si	milai	Assels.		
	Complete if the organization answered "Yes" on Fo					
1 a	If the organization elected, as permitted under SFAS 116					
	historical treasures, or other similar assets held for public			service, provide, in Part XIII,		
	the text of the footnote to its financial statements that des					
b						
	treasures, or other similar assets held for public exhibition relating to these items:	, equivation, or research in furtherance of public serv	ice, pr	ovide the following attourits		
	(i) Revenue included on Form 990, Part VIII, line 1			8		
	···· · · · · · · · · · · · · · · · · ·			\$\$		
2	If the organization received or held works of art, historical		rovide	¥		
-	the following amounts required to be reported under SFA					
а		· · · ·		6		
	Assets included in Form 990, Part X					
	For Paperwork Reduction Act Notice, see the Instructi			- Schedule D (Form 990) 2017		
	51 10-09-17			, , ,		

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2017.03040	THEODORE	ROOSEVELT	CONSER	30012871

THEODORE	BOOSEVELT	CONSERVATION
THEODOKE	TOODD A TTT	CONDERVATION

Schedule () from seq) 2017 PARTINESHIP 0.4 - 370 6335 Page 10.10	Caba		GRID GRID			TTON		01-	370639	35	2
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 at that apply): a				Hist	orical Tre	asures o	r Other 9	Similar Ass	sets (and		age Z
check all that apply: d Lean or exchange programs e Other Other ching the sendbition d Lean or exchange programs e Other Other ching the sendbition d Other e Other Other Provide description of the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid the organization soliciton answered "Yes" on Form 990, Part IV, line 5, or reported an amount on Form 990, Part X, line 21. Ta Is the organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Yes, "explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1a Amount 1a d Datatorio dung the year 1a 1a Id d Datatorio dung the year 1a 1a 1a 1a Datatorio dung the year 1a 1a <td< td=""><td></td><td>-</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>,</td><td></td></td<>		-								,	
a Public exhibition d Lean or exchange programs d Char Prevade a description of the organization's avernpt purpose in Part XIII. b Diving the year, did the organization sciolections and explain how they further the organization's avernpt purpose in Part XIII. b Diving the year, did the organization sciolections of at t, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part K, line 9, or reported an amount on Form 990, Part X, line 21. l Is the organization and the treatment in Part XIII and complete if the organization answered "Yes" on Form 990, Part K, line 9, or reported an amount on Form 990, Part X, line 21. l Is the organization and explain the arrangement in Part XIII and complete the following table:	5	6 6 1 <i>i</i>		, checr	any or the l	ionowing tha	ale a sign	incant use of		in itema	•
b Scholarly research e Other	а		Ч		Loan or exc	hange progr	ame				
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization's collection? Yes No Part IV Escrew and Custodial Arrangements. Complete if the organization answered "Yes" on Form 900, Part IV, line 9, or reported an amount on Form 900, Part X, line 21. 1a Is the organization anagement in Part XIII and complete the following table: C Beginning balance C Beginning of year balance C Beginning balance C Beginning balance C Beginning bading balance C Begin											
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, dd the organization scole receive donations of art, historical ressures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part W Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 900, Part IV, line 9, or reported an amount on Form 900, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 900, Part X? Beginning balance C Beginning balance Intermediary for contributions or custodial account liability? Ves No If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XII Port W Endowment Funds. Complete if the organization insolement of Part XIII. Beginning of year balance Account is a part XIII. Check here if the explanation has been provided on Part XIII. Part W Endowment Funds. Complete if the organization incomered "Yes" on Form 900, Part X, line 21. Account is a colorable of the organization incomered 'Yes' on Form 900, Part XII. Beginning of year balance Account is a colorable of the organization answered 'Yes' on Form 900, Part XII. Beginning of year balance Account is a colorable of the organization answered 'Yes' on Form 900, Part XII. Beginning of year balance Account is a colorable of the organization answered 'Yes' on Form 900, Part XII. Beginning of year balance Account is a colorable of the organization answered 'Yes' on Form 900, Part XII. Beginning of year balance Account is a colorable of the organization answered 'Yes' on Form 900, Part XII. Beginning of year balance Account is a colorable of the organization answered 'Yes' on Form 900, Part XII. Account is a colorable organization answ			C								
During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection? Part V Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X (line 21. Is the organization angent. It trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X (Part X) If 'Yes,' explain the arrangement in Part XIII and complete the following table: Is de angent. In Part XII. Additions during the year Id Additions during the year Id Additions during the year Id Distributions during the year Id Distributions during the year If 'Yes,' explain the arrangement in Part XII. Check here if the explanation has been provided on Part XII Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. If 'Yes,' explain the arrangement in Part XII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. If 'Yes,' explain the arrangement in Part XII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. If 'Yes' explain the arrangement in Part XII. Check here if the explanation has been provided on Part XIII for the expenditures to realities Id of Current year end balance (line 19, column (a)) held as: Beginning of year balance Id of Current year end balance (line 19, column (a)) held as: Beard designated or quasiandowment \% Permanert endowment \% Permanert endowment \% Permanert endowment \% Permaner endowment \% Permanere endowment \% Permanert and progra			alloctions and ovalain	how th	ov furthor th	o organizativ	on'e ovomr	ot purposo in [Port VIII		
to be sold to raise funds rather than to be maintained as part of the organization scollection? Yes No. Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X. line 21. 14 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. No. bit "Yes," explain the arrangement in Part XIII and complete the following table: Amount 16 c Baginning balance 16 14 d Additions during the year 16 14 14 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No bit "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Image: Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. Part V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. Image: Part Part Part Part Part Part Part Part									art Ani.		
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b If "Yes," explain the arrangement in Part XII and complete the following table:	iu										No
c Beginning balance Id d Additions during the year Id e Distributions during the year Id 2 Did the explanation include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Ves No 2 Did the granization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? Ves No b I'''yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Image: Check here if the organization answered 'Yes' on Form 990, Part X, line 10. Fant V Endowment Funds. Complete if the organization answered 'Yes' on Form 990, Part X, line 10. 1a Beginning of year balance Image: Check here if the explanation has been provided on Part XIII. b Contributions Image: Check here if the explanation has been provided on Part XIII. Image: Check here explanation has been provided on Part XIII. c Not investment examings, gains, and losses Image: Check here explanation has been provided in Part XIII. Image: Check here explanation has been provided in Part XIII. Image: Check here explanation has been provided on part XIII. c Other expenditures for facilities Image: Check here explanation has been provided explanation has been provided in Part XIII. Image: Check here explanation has been provi	h									L	
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d Additions during the year 1d e Distributions during the year 1d 1 Ending balance 1t 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No Part V Endowment Funds. Complete if the organization nawered 'Yes' on Form 990, Part IV, line 10. Image: State in the arrangement in Part XIII. Check here if the explanation nawered 'Yes' on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back a Grants or scholarships 1 <td>~</td> <td>Paginning balance</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>10</td> <td>Amou</td> <td>1110</td> <td></td>	~	Paginning balance						10	Amou	1110	
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(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance											
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		Complete							ack (a) Fr	ur vears	hack
b Contributions	19	Beginning of year balance		(6) 1	nor your	(0) 1 W0 you				ur youro	buok
c Net investment earnings, gains, and losses											
d Grants or scholarships											
e Other expenditures for facilities and programs											
and programs											
f Administrative expenses	e										
g End of year balance											
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Temporarily restricted endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment Imuds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (ii) related organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations isted as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b) Cost or other (c) Accumulated depreciation 1a Land											
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b Permanent endowment ▶% c Temporarily restricted endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) urelated organizations 3a(i) (iii) related organizations 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. 0 Description of property (a) Cost or other (b) Cost or other (c) Accumulated 4 Description of property (a) Cost or other (b) Cost or other (c) Accumulated 4 Land				(line I	g, column (a)) neid as:					
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4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation 1a Land Land (d) Book value b Buildings Leasehold improvements 152,345. 125,631. 26,714. e Other 41,188. 30,398. 10,790.	_	(ii) related organizations									
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land	b										
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	4 Dar	t VI I and Buildings and Equipm	organization's endov	vment f	unds.						
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land	1 41			Dout IV	/ line 11e C						
basis (investment) basis (other) depreciation 1a Land											
1a Land		Description of property			• • •				(u) bu	JOK VAIU	e
b Buildings	19	Land			240.0		3001				
c Leasehold improvements											
d Equipment 152,345. 125,631. 26,714. e Other 41,188. 30,398. 10,790.											
e Other					15	2.345	1	25.631		26 7	14.
		O 11					<u> </u>	30,398.		10.7	90.
				(colun		-				37,5	04.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 PARTNERSHIP

Complete if the organization	answered "Ves" o	n Form 990 F	Part IV line 11h	See Form 990	Part X line 12
Complete if the ordanization	answered "Yes" o	n Form 990. F	art IV. line IID.	See Form 990.	Part X. line I

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

Part VIII Investments - Program Related.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. col. (B) line 15.)	

(b) Book value

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability

<u> </u>	
(1) Federal income taxes	
(2) DEFERRED RENT	169,536.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 000 Part V col (P) line 25)	169.536

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

732053 10-09-17

1.

	THEODORE ROOSEVELT CONS	ERVATION				
Sche	dule D (Form 990) 2017 PARTNERSHIP				3706385	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Re	evenue per Retu	'n.		
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	6,163,	796.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d		2	?e		0.
3	Subtract line 2e from line 1			3	6,163,	796.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b	-177,216.			
С	Add lines 4a and 4b			c	,	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12		5	5,986,	580.	
Pa	t XII Reconciliation of Expenses per Audited Financial St	atements With E	xpenses per Ret	urn	1-	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.		<u> </u>		
1	Total expenses and losses per audited financial statements			1	4,611,	637.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2 a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2 d				
е	Add lines 2a through 2d			?e		0.
3	Subtract line 2e from line 1			3	4,611,	<u>637.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b					
b	Other (Describe in Part XIII.)	4b	-177,216.			
с	Add lines 4a and 4b			c	-177,	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I, line 1	8.)		5	4,434,	421.
Pa	rt XIII Supplemental Information.					

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

PART X, LINE 2:

TRCP IS EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(C)(3)
OF THE INTERNAL REVENUE CODE (IRC). TRCP QUALIFIES FOR THE CHARITABLE
CONTRIBUTION DEDUCTION UNDER SECTION 170 AND HAS BEEN CLASSIFIED AS AN
ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(1).
THERE IS NO MATERIAL NET UNRELATED BUSINESS INCOME TAX LIABILITY FOR 2017.
TRCP FOLLOWS ACCOUNTING STANDARDS FOR DEALING WITH UNCERTAINTY IN
ACCOUNTING FOR INCOME TAX PROVISIONS. TRCP HAS DETERMINED THAT IT DOES
NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF
DECEMBER 31, 2017. YEARS ENDING ON OR AFTER DECEMBER 31, 2014 REMAIN
SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES.
732054 10-09-17 Schedule D (Form 990) 2017 34

THEODORE ROOSEVELT CONSERVATION	
Schedule D (Form 990) 2017 PARTNERSHIP Part XIII Supplemental Information (continued)	04-3706385 Page 5
(continued)	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
FUNDRAISING - DIRECT EXPENSE REFLECTED ON PART VIII, LINE	
<u>8B</u>	-177,216.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
FUNDRAISING - DIRECT EXPENSE REFLECTED ON PART VIII, LINE	
<u>8B</u>	-177,216.
	Schedule D (Form 990) 2017

dule D (Form 990) 2

732055 10-09-17

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	raisi	ng or Gaming A	ctivi	ties	OMB No. 1545-0047		
(Form 990 or 990-EZ)	Complete if the	e organization answered "Yes" on organization entered more than \$1	Form	990, F	Part IV, line 17, 18, o			2017		
Department of the Treasury Internal Revenue Service		Open to Public Inspection								
Name of the organization	Employer id	dentification number								
	PARTNER						04-370			
Part I Fundrais required to	complete this part	Complete if the organization answe	ered "Y	es" or	n Form 990, Part IV, I	ine 17	'. Form 990-E	EZ filers are not		
 a X Mail solicitat b X Internet and c Phone solicitat d X In-person so 2 a Did the organization key employees list 	ions email solicitations tations licitations on have a written o ed in Form 990, Pa highest paid indiv	f X Solicita g X Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (includ	non-g gover iising ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Y	es X No be		
(i) Name and addres or entity (func	s of individual	(ii) Activity	(iii) fundr have c or con contribu	ustody trol of	(iv) Gross receipts from activity	tò (o f	Amount paid r retained by undraiser ed in col. (i)	y) to (or retained by)		
			Yes	No		1151				
Total					au haa haan natifiad	:• :				
or licensing.	ch the organization	n is registered or licensed to solicit o	ontrio	utions	or has been notified	it is e	exempt from			
LHA For Paperwork Re	eduction Act Noti	ce, see the Instructions for Form 9	990 or	990-E	Z. S	Sched	lule G (Form	990 or 990-EZ) 2017		

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04-3706385 Page 2

THEODORE ROOSEVELT CONSERVATION Schedule G (Form 990 or 990 EZ) 2017 PARTNERSHIP Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events CAPITAL NONE (add col. (a) through CONSERVATION col. (c)) (event type) (total number) (event type) Revenue 561,005. 561,005. Gross receipts 1 55<u>,630</u>. 2 Less: Contributions 55,630. 505,375. Gross income (line 1 minus line 2) 505,375. 3 4 Cash prizes 5 Noncash prizes Direct Expense: 72,172. 72,172. Rent/facility costs 6 79,255. 79,255. 7 Food and beverages 8,546. 8,546. 8 Entertainment 17,243. 17,243. 9 Other direct expenses 177,216. **10** Direct expense summary. Add lines 4 through 9 in column (d) ► 328,159. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 1 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 4 Other direct expenses 5 % Yes Yes % Yes % 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) ► 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? Yes No **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No **b** If "Yes," explain: Schedule G (Form 990 or 990-EZ) 2017 732082 09-13-17

THEODORE	ROOSEVELT	CONSERVATION
1112020112	1.00001001	0010011011111011

Sch	edule G (Form 990 or 990-EZ) 2017 PARTNERSHIP	04-3706385 Page 3
	Does the organization conduct gaming activities with nonmembers?	
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
	to administer charitable gaming?	Yes 📃 No
13	Indicate the percentage of gaming activity conducted in:	
а	The organization's facility	13 a %
	An outside facility	
	Enter the name and address of the person who prepares the organization's gaming/special events books and record	
	Name	
	Address	
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue received by the organization > \$	ount
	of gaming revenue retained by the third party ▶\$	
С	If "Yes," enter name and address of the third party:	
	Name	
	Address	
16	Gaming manager information:	
	Name	
	Gaming manager compensation 🕨 \$	
	3 3 1 2 1	
	Description of services provided 🕨	
	Director/officer Employee Independent contractor	
	Mandatory distributions:	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes No
	retain the state gaming license?	
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent i	n the
Pa	organization's own exempt activities during the tax year s rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and F	Dart III, linaa 0, 0h, 10h, 15h
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
73208	33 09-13-17 Schedule	G (Form 990 or 990-EZ) 2017

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r 990-EZ)	PARTNERSE	HIP						
	THEODORE	ROOSEVELT	CONSERVATION					

Schedule G	à (Form 990 or 990-EZ)	PARTNERSHIP		04-3706385	Page 4
Part IV	G (Form 990 or 990-EZ) Supplemental Inform	mation (continued)			
		· · ·			
-					
				chedule G (Earm 990 a	000 EZ

Schedule G (Form 990 or 990-EZ)

SC	HEDULE J	Compensation	n Information		OMB No. 1	545-004	47		
(Fo	(Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest				0017				
•	Compensated Employees					2017			
Dene	terrant of the Treasury	Complete if the organization answered Attach to F			Open to	Publ	ic		
	tment of the Treasury al Revenue Service	Go to www.irs.gov/Form990 for ins			Inspection				
Nam	e of the organizatio		SERVATION	Employer id	loyer identification numbe				
		PARTNERSHIP		04-3	70638	5			
Pa	rt I Question	s Regarding Compensation							
						Yes	No		
1a	Check the appropr	ate box(es) if the organization provided any of the fol	llowing to or for a person listed on Form	990,					
	Part VII, Section A,	ine 1a. Complete Part III to provide any relevant info	prmation regarding these items.						
	First-class or o	harter travel H	lousing allowance or residence for perso	nal use					
	Travel for com	panions Pa	ayments for business use of personal res	sidence					
	Tax indemnific	ation and gross-up payments	ealth or social club dues or initiation fees	6					
	Discretionary	pending account Pe	ersonal services (such as, maid, chauffe	ur, chef)					
b	•	on line 1a are checked, did the organization follow a							
	reimbursement or p	rovision of all of the expenses described above? If "I	No," complete Part III to explain		1 b	Х			
2	Did the organizatio	require substantiation prior to reimbursing or allowi	ing expenses incurred by all directors,						
	trustees, and office	s, including the CEO/Executive Director, regarding t	he items checked on line 1a?		2	Х			
3	Indicate which, if a	y, of the following the filing organization used to esta	ablish the compensation of the organizat	tion's					
	CEO/Executive Dire	ctor. Check all that apply. Do not check any boxes for	or methods used by a related organization	on to					
		tion of the CEO/Executive Director, but explain in Pa	art III.						
	X Compensation		/ritten employment contract						
	Independent of		ompensation survey or study						
	Form 990 of o	her organizations	pproval by the board or compensation c	ommittee					
4		any person listed on Form 990, Part VII, Section A, I	line 1a, with respect to the filing						
	organization or a re	-							
а							X		
b		eive payment from, a supplemental nonqualified reti					X		
С		eive payment from, an equity-based compensation a			4c		X		
	If "Yes" to any of li	es 4a-c, list the persons and provide the applicable a	amounts for each item in Part III.						
	Only as all 50 ff								
-)(3), 501(c)(4), and 501(c)(29) organizations must c	-	-					
5		n Form 990, Part VII, Section A, line 1a, did the orga	anization pay or accrue any compensatio	11					
-	contingent on the r				5a		x		
a b	Any related ergeniz	tion?			. <u>Ja</u>		X		
n		ation? r 5b, describe in Part III.			5 b				
6		n Form 990, Part VII, Section A, line 1a, did the orga	prization pay or accrue any compensatio	n					
0	contingent on the r	· · · · · · · · · ·	anzation pay of accide any competisatio						
2	•	et earnings of.			6a		x		
							X		
5		ation? r 6b, describe in Part III.							
7		n Form 990, Part VII, Section A, line 1a, did the orga	anization provide any nonfixed payments						
'		es 5 and 6? If "Yes," describe in Part III			7		x		
8		reported on Form 990, Part VII, paid or accrued purs							
5		ption described in Regulations section 53.4958-4(a)		6	8		x		
9		d the organization also follow the rebuttable presum							
5		53.4958-6(c)?			9				
LHA		eduction Act Notice, see the Instructions for Form			ule J (Forn	n 990)	2017		

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THEODORE ROOSEVELT CONSERVATION

Schedule J (Form 990) 2017

PARTNERSHIP

04-3706385

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(I)-(D)	reported as deferred on prior Form 990
(1) PIETER FOSBURGH	(i)	191,699.	35,000.	0.	8,784.	29,793.	265,276.	0.
PRESIDENT/CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) GEOFFREY MULLINS	(i)	141,894.	8,000.	0.	5,320.	7,705.	162,919.	0.
CHIEF OPERATIONS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) CHRISTY PLUMER	(i)	152,633.	8,000.	0.	6,200.	7,502.	174,335.	0.
CHIEF CONSERVATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

TRCP PAYS FOR HEALTH CLUB FEES FOR THE PRESIDENT, CHIEF CONSERVATION

OFFICER AND CHIEF OPERATIONS OFFICER. THE PAYMENTS FOR 2017, WERE \$393,

\$581 AND \$600, RESPECTIVELY. ALL PAYMENTS ARE INCLUDED IN EACH INDIVIDUAL'S

TOTAL COMPENSATION.

Schedule J (Form 990) 2017

_			-	answered "Yes" o	n Form 990, Part IV, lines 2	9 or 30.	20		
	ment of the Treasury I Revenue Service	Attach to Form 990					Open To Inspe		IIC
Name	e of the organization	► Go to www.irs.gov/ THEODORE ROO				Employe	identificati		mher
Nam	of the organization	PARTNERSHIP	1001001	CONSERVA			4-3706		
Par	tl Types of F						- J/00	505	
			(a)	(b)	(c)		(d)		
			Check if applicable	Number of contributions or	Noncash contribution amounts reported on Form 990, Part VIII, line 1g		d of determin ontribution a	•	S
1	Art - Works of art								
2	Art - Historical treasu	ıres							
3		ests							
4		ons							
5		old goods							
6		les							
7									
8									
9		traded	X	3	6,685.	FAIR MAR	KET VA	LUE	
10		neld stock							
11	Securities - Partnersl	hip, LLC, or							
12		neous							
13	Qualified conservation								
	Historic structures								
14		on contribution - Other							
15		ntial							
16		ercial							
17									
18									
19									
20		upplies							
21									
22									
23									
24	Archeological artifac	ts LENT AUCTIO)	x	57	55 630	FAIR MAR	עביש געא.	ד דדסי	
25 00				57	55,050.	FAIR MAR	.KEI VA.		
26 07)							
27 20	Other ()							
<u>28</u> 29	Other (I	l a tha tax year for a					
29		zation completed Form 82							
	for which the organiz	cation completed Form 62	.00, Fait IV, I		23			Yes	No
302	During the year did	the organization receive h	w contributio	n any property ren	orted in Part I, lines 1 throug	h 28 that it		165	
30a		-	-	•••••	which isn't required to be us				
		•					202		x
h		e arrangement in Part II.	۱				<u>30a</u>		- 21
ы 31	•	•	nolicy that re	ouires the review	of any nonstandard contribut	ions?	31		x
	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?								<u> </u>
JZd				•			32a	х	
h	If "Yes," describe in	Part II					528		
33			column (c) for	r a type of property	/ for which column (a) is cheo	ked			
	describe in Part II.	an eropore an amount in c							

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

Schedule M (Form 990) 2017

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Noncash Contributions

OMB No. 1545-0047

7 2

SCHEDULE M	
(Form 990)	

	THEODORE	ROOSEVELT	CONSERVATION
Schedule M (Form 990) 2017	PARTNERS	HIP	

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Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

TRCP UTILIZES THE SERVICE OF A FINANCIAL ADVISOR THROUGH A BROKERAGE

FIRM TO PROCESS NON-CASH GIFTS OF SECURITIES, WHICH ARE SOLD UPON

RECEIPT.

Schedule M (Form 990) 2017

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on OMB No. 1545-0047

Open to Public

Inspection

/

Employer identification number

04-3706385

Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. THEODORE ROOSEVELT CONSERVATION

PARTNERSHIP

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

TRCP'S BACKCOUNTRY WORKING GROUP IS WORKING WITH INDIVIDUAL SPORTSMEN,

LOCAL GROUPS AND BUSINESSES, WESTERN GOVERNORS AND NATIONAL DECISION

MAKERS TO ENSURE THAT SPORTSMEN'S PRIORITIES ARE CONSIDERED AS THE

FUTURE CONSERVATION AND MANAGEMENT OF OUR BACKCOUNTRY AREAS ARE

DETERMINED.

IN 2017, TRCP WAS FORCED TO DEFEND MANY OF THE GAINS MADE IN THE RECENT

PAST AS A NEW ADMINISTRATION AND NEW CONGRESS SOUGHT TO REDEFINE OR

UNDO MANY FEDERAL LANDS MANAGEMENT POLICIES. ON ISSUES SUCH AS BLM LAND

USE PLANNING, ENERGY, FOREST MANAGEMENT, AND SAGE-GROUSE.

LAND USE PLANNING

IN THE SPRING OF 2017, THE SAME DAY THAT PRESIDENT TRUMP SIGNED A

CONGRESSIONAL REVIEW ACT RESOLUTION OF DISAPPROVAL THAT NULLIFIED THE

BLM'S REVISED LAND USE PLANNING RULE, DOI SECRETARY RYAN ZINKE ISSUED A

MEMORANDUM TO BLM LEADERSHIP DIRECTING THE AGENCY TO DEVELOP A REPORT

THAT OUTLINED STEPS THAT THE BLM COULD TAKE TO MODERNIZE ITS LAND USE

PLANNING PROCESS. PRIORITIES OUTLINED INCLUDE STREAMLINING, WORKING

WITH STATE AND LOCAL GOVERNMENTS, INCREASING TRANSPARENCY, AND

RIGHT-SIZING ENVIRONMENTAL DOCUMENTS. THE TRCP SUBMITTED

RECOMMENDATIONS TO THE BLM BOTH INDIVIDUALLY AND COLLECTIVELY THROUGH

THE SPORTSMEN FOR RESPONSIBLE ENERGY DEVELOPMENT CAMPAIGN. THE BLM WAS

REQUIRED TO SUBMIT THEIR REPORT TO SECRETARY ZINKE BY SEPTEMBER 2017.

WHILE THE REPORT IS NOT PUBLIC, WE BELIEVE IT INCLUDED RECOMMENDATIONS

AND OPTIONS FOR ACHIEVING THE PLANNING GOALS OUTLINED IN THE MEMO.

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2017)

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 09-07-17

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Schedule O (Form 990 or 990-EZ) (2017)	Page 2		
Name of the organization THEODORE ROOSEVELT CONSERVATION PARTNERSHIP	Employer identification number 04-3706385		
AT THE LOCAL LAND USE PLAN LEVEL, THE TRCP WESTERN FIELD T	EAM CONTINUES		
TO WORK TO ADVANCE THE CONSERVATION OF INTACT BACKCOUNTRY	AREAS AND		
MIGRATION CORRIDORS, AND COMPREHENSIVE ENERGY DEVELOPMENT	PLANS THROUGH		
BLM INDIVIDUAL RESOURCE MANAGEMENT PLANS IN COLORADO, OREG	ON, NEVADA,		
IDAHO, MONTANA, WYOMING AND NEW MEXICO. THE TRCP IS ALSO W	ORKING TO		
INFLUENCE THE OUTCOMES OF INDIVIDUAL NATIONAL FOREST PLAN	REVISIONS IN		
IDAHO, COLORADO, ARIZONA, AND MONTANA. WHILE TIMELINES FOR	THESE PLANS		
HAVE BEEN DELAYED, WE REMAIN ON TRACK TO ACHIEVE OUR GOALS			
ENERGY			
IN OCTOBER 2017, THE DEPARTMENT OF THE INTERIOR RELEASED I	TS		
LONG-AWAITED ENERGY BURDENS REPORT THAT "IDENTIFIES AGENCY	ACTIONS THAT		
POTENTIALLY BURDEN THE DEVELOPMENT OR USE OF DOMESTICALLY	PRODUCED		
ENERGY RESOURCES, " AND MAKES RECOMMENDATIONS FOR ELIMINATING OR			
ALLEVIATING THOSE BURDENS. AS PART OF THE RECOMMENDATIONS,	DOI IS		
RECOMMENDING THAT THE MASTER LEASING PLAN POLICY A KEY PR	OVISION OF		
THE 2010 OIL AND GAS LEASING REFORMS BE ELIMINATED. THE R	EPORT ALSO		
INCLUDES RECOMMENDATIONS TO EVALUATE THE FEDERAL SAGE GROU	ISE PLANS,		
MODIFY OR RESCIND MITIGATION POLICIES, AND REVIEW BLM DESI	GNATIONS.		
THE TRCP EXPRESSED OUR DISAPPOINTMENT IN THE FINDINGS OF T	HE REPORT AND		
WE ARE WORKING TO INFLUENCE THE REPORT IN DIFFERENT WAYS:			
1- MASTER LEASING PLANS: WE DO NOT BELIEVE THAT WE CAN STO	P THE		
UNRAVELING OF THE MLP POLICY, AND WE ARE CURRENTLY WORKING	TO ADVANCE		
MLPS IN THREE DISTINCT LOCATIONS OF THE WEST WHERE ENERGY	DEVELOPMENT		
IS LIKELY TO OCCUR IN AREAS WITH HIGH-VALUE WILDLIFE HABIT	AT. WE ARE		
FOCUSED ON CONVINCING THE ADMINISTRATION TO ALLOW THOSE CO	MPREHENSIVE		
ENERGY DEVELOPMENT PLANNING PROCESS TO CONTINUE, BUT UNDER	DIFFERENT		
NOMENCLATURE AND INDEPENDENT OF THE MLP POLICY.			
2- SAGE GROUSE: SEE BELOW.			

2- SAGE GROUSE: SEE BELOW.

Schedule O (Form 990 or 990-EZ) (2017)	Page
Name of the organization THEODORE ROOSEVELT CONSERVATION PARTNERSHIP	Employer identification number 04-3706385
3- MITIGATION: THE TRCP IS ESTABLISHING A DEVELOPMENT AND	MITIGATION
WORKING GROUP THAT WILL ADDRESS POLICY AND MANAGEMENT ACT	IONS
SURROUNDING EXISTING MITIGATION POLICY AND ENERGY, TRANSM	ISSION, AND
OTHER DEVELOPMENT.	
4- DESIGNATIONS REVIEW: WE ARE WORKING TO ENSURE THAT THE	BACKCOUNTRY
CONSERVATION AREA DESIGNATION IS NOT TARGETED THROUGH THE	DESIGNATION
REVIEW BY ORGANIZING A SUPPORT LETTER FROM REPUBLICAN MEMI	BERS OF
CONGRESS AND BY DELIVERING SUPPORT FROM CONSERVATIVE INTER	RESTS.
SAGE GROUSE	
IN JUNE 2017, DOI SECRETARY ZINKE ISSUED SECRETARIAL ORDER	R 3353, WHICH
INITIATED A REVIEW OF THE FEDERAL SAGE GROUSE PLANS THAT A	AMENDED 98
INDIVIDUAL RESOURCE MANAGEMENT PLANS, CONSERVED 67 MILLION	N ACRES OF
SAGEBRUSH STEPPE, AND HELPED KEEP THE GREATER SAGE GROUSE	OFF OF THE
THREATENED/ENDANGERED SPECIES LIST. IN AUGUST, THE REVIEW	TEAM ISSUED
THEIR REPORT, WHICH INCLUDED DIRECTION FOR THE BLM TO WORK	K WITH THE
SAGE GROUSE TASK FORCE TO CONSIDER MAKING CHANGES TO SAGE	GROUSE
MANAGEMENT IN A WAY THAT COULD AFFECT ENERGY DEVELOPMENT,	GRAZING
PRACTICES, MITIGATION STRATEGIES, AND MINERAL WITHDRAWALS	IN FOCAL
AREAS. WHILE THIS DIRECTION MAY LEAD TO NEGATIVE OUTCOMES	FOR SAGE
GROUSE AND THE SAGE GROUSE PLANS, NO CONCLUSIVE DECISIONS	HAVE YET BEEN
MADE BY THE ADMINISTRATION. THE TRCP HAS ALSO WORKED TO PH	REVENT ANY
LEGISLATION FROM ROLLING BACK OR UNDERMINING THE FEDERAL S	SAGE GROUSE
CONSERVATION PLANS.	
AIGRATION	
THE TRCP HAS LONG BEEN WORKING TO PERSUADE THE BLM TO ADO	PT TOOLS FOR
THE CONSIDERATION AND CONSERVATION OF WILDLIFE MIGRATION (CORRIDORS AND
STOPOVER HABITAT. WE ARE PURSUING THIS OBJECTIVE AT THE NA	ATIONAL AND
LOCAL LEVELS. NATIONALLY, THE BLM IS NEARING COMPLETION OF	
32212 09-07-17 Sche 47	edule O (Form 990 or 990-EZ) (2017

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 Schedule O (Form 990 or 990-E2) (2017)
 Page 2

 Name of the organization
 THEODORE ROOSEVELT CONSERVATION PARTNERSHIP
 Employer identification number 04-3706385

 WILDLIFE MANUAL, AND WE HAVE BEEN INFORMED BY THE AGENCY THAT WILDLIFE
 MIGRATION CORRIDORS ARE HEAVILY COVERED IN THE MANUAL, WHICH WILL BE A

 MANAGEMENT TOOL USED BY THE AGENCY ONCE COMPLETED IN LATE 2017 OR EARLY
 2018. THE TRCP ALSO RECENTLY COMPLETED A PROJECT WITH THE WILDLIFE

 MANAGEMENT INSTITUTE THAT LISTED AN INVENTORY AND REPORT ON MIGRATION
 CORRIDORS IN WESTERN STATES. THE REPORT IDENTIFIES KNOWN CORRIDORS AND

 INFORMATION GAPS, AND IT WILL BE AN IMPORTANT TOOL FOR US TO USE TO
 BOLSTER ADVOCACY AND PROVIDE TECHNICAL INPUT ON RMPS, FOREST PLANS AND

 OTHER LAND USE PLANNING EFFORTS.
 OTHER LAND USE PLANNING EFFORTS.

FORM 990, PART III, LINE 4A (CONTINUED):

CENTER FOR AGRICULTURAL AND PRIVATE LANDS (CAL): THE TRCP CENTER FOR AGRICULTURE AND PRIVATE LANDS IS FOCUSING ON BOTH ENSURING STRONG TITLE II CONSERVATION FUNDING AND ADVANCING SPORTSMEN'S PRIORITIES IN THE 2018 FARM BILL, PARTICULARLY THROUGH OUR 24-MEMBER AGRICULTURE AND WILDLIFE WORKING GROUP (AWWG). THIS SPRING, THE AWWG COMPLETED THE "SPORTSMEN'S PRIORITIES FOR CONSERVATION AND ACCESS IN THE 2018 FARM BILL". WE WENT FINAL WITH THIS POLICY PLATFORM IN OCTOBER AND HAVE SHARED THE DOCUMENT WITH NEARLY ALL 67 MEMBERS OF THE HOUSE AND SENATE AGRICULTURE COMMITTEES.

SINCE SEPTEMBER, THE TRCP HAS BEEN WORKING TO SHIFT THE AWWG 9-PAGE POLICY DOCUMENT INTO AN EASILY DISPENSABLE FORMAT FOR USE BY THE AWWG AND TRCP'S POLICY COUNCIL PARTNERS FOR HILL AND ADMINISTRATION ADVOCACY. WE HAVE DEVELOPED 8 INDIVIDUAL PROGRAM FACT SHEETS AND ONE GENERAL FACT SHEET. THE TRCP WILL BE WORKING TO FINALIZE THESE FACT SHEETS, CURRENTLY UNDER REVIEW BY THE 7 AWWG SUBCOMMITTEES, BY MID-DECEMBER. THESE PROGRAM FACT SHEETS, ALONG WITH THE AWWG PLATFORM, 732212 09-07-17 48

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Schedule O (Form 990 or 9	90-EZ) (2017)	Page 2
Name of the organization	THEODORE ROOSEVELT CONSERVATION PARTNERSHIP	Employer identification number $04 - 3706385$
WILL BE SHOWCA	ASED ON A NEW TRCP FARM BILL WEBSITE LANDING P	AGE SLATED
TO BE UNVEILE	D IN EARLY JANUARY AS PART OF OUR 2018 FARM BI	LL PUSH.

THE AWWG WAS ONE OF THE FIRST COALITIONS TO DEVELOP ITS FARM BILL

PRIORITIES AND TRCP CONTINUES TO WORK TO INCLUDE MANY OF OUR

RECOMMENDATIONS AS PART OF OTHER CONSENSUS-BUILDING EFFORTS, INCLUDING

THROUGH THE AGRICULTURE CONSERVATION COALITION, FORESTS IN THE FARM

BILL, WETLAND CONSERVATION POLICY COALITION, CLEAN WATER FOR ALL, THE

COLORADO RIVER COLLABORATIVE, AND A

WILDLIFE-AGRICULTURE-CONSERVATION-CROP INSURANCE COALITION. THIS IS A

STRONG START TO COALITION-BUILDING AROUND KEY CONSERVATION ISSUES. MANY

OF OUR PARTNER ORGANIZATIONS HAVE ALSO MIRRORED OUR LANGUAGE IN THEIR

OWN PLATFORMS TO ENSURE A CONSISTENT APPROACH WITH CONGRESS.

THE TRCP HOSTED OUR 15TH ANNUAL (MID) WESTERN SUMMIT AT THE END OF AUGUST IN MINNEAPOLIS, MN. THE MEDIA SUMMIT FOCUSED ON THE WAYS THE FARM BILL INFLUENCES HABITAT AND WATER CONSERVATION, RECREATIONAL ACCESS, AND RURAL ECONOMIES, AS WELL AS HOW PRIVATE AND PUBLIC LANDS (AND PUBLIC INFRASTRUCTURE) INTERSECT AND INTERACT TO CREATE A LANDSCAPE OF CONSERVATION. DURING THE SUMMIT WE ALSO HOSTED A FARM TOUR FOR OUR MEDIA CONTACTS AND PARTNERS WITH A FOCUS ON LAND ENROLLED IN THE CONSERVATION RESERVE PROGRAM (CRP), AS WELL AS WORKING LANDS WHERE FARM BILL PRACTICES SUCH AS NO-TILL FARMING AND COVER CROPS ARE BEING UTILIZED TO IMPROVE WATER QUALITY. WE ALSO VISITED A DAIRY FARM, WHERE ROBOTIC INNOVATIONS AND MANURE STORAGE AND SEPARATION EQUIPMENT ARE DESIGNED TO HELP WITH THE STATE'S WATER QUALITY CHALLENGES WHICH HAVE IMPACTS DOWN TO THE GULF OF MEXICO.

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 Name of the organization
 THEODORE ROOSEVELT CONSERVATION
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 IN OCTOBER 2017, THE TRCP, WITH KEY PARTNERS INCLUDING THE NATIONAL
 BOBWHITE CONSERVATION INITIATIVE, IZAAK WALTON LEAGUE OF AMERICA,

 PHEASANTS FOREVER, IOWA DEPARTMENT OF NATURAL RESOURCES, AND THE IOWA
 NATURAL RESOURCES CONSERVATION SERVICE, HOSTED A FARM TOUR FOR

 CONGRESSIONAL STAFF FROM THE STATE'S DELEGATION OFFICES. THE TOUR
 INCLUDED STAFF FROM BOTH SENATE OFFICES AND THE LOCAL CONGRESSIONAL

 DISTRICT OFFICE AND INCLUDED FARMS NEAR DES MOINES WITH FARM BILL
 CONSERVATION PROJECTS BENEFITTING WILDLIFE HABITAT AND CONTRIBUTING TO

 WATER QUALITY AND NUTRIENT POLLUTION REDUCTION.
 Page 2

IN NOVEMBER 2017, THE TRCP HELD A RETREAT FOR OUR POLICY COUNCIL IN BURAS, LA. OVER TWO DAYS, USING THE MISSISSIPPI RIVER BASIN AS A PRIMARY LENS FOR POLICY DISCUSSION, WE DEVELOPED NEXT STEPS FOR A COMMUNITY-WIDE, COORDINATED FARM BILL CAMPAIGN, AND ALSO TOUCHED ON INFRASTRUCTURE POLICY, COASTAL RESTORATION, AND CLEAN WATER CAMPAIGN TACTICS.

CENTER FOR WATER RESOURCES (CWR): THE CWR HAS A POLICY AGENDA DEVELOPED IN COOPERATION WITH THE WATER WORKING GROUP, THROUGH STAKEHOLDER OUTREACH, AND WITH FEEDBACK FROM THE TRCP POLICY COUNCIL. THE TWO MAIN PILLARS OF THE CENTER AGENDA ARE (1) TO PROMOTE FEDERAL WATER CONSERVATION FUNDING; (2) TO IMPROVE THE ENGAGEMENT OF THE SPORTING COMMUNITY IN FEDERAL DECISION MAKING RELATED TO WATER RESOURCES MANAGEMENT AND, SPECIFICALLY, AROUND SOLUTIONS TO CURRENT AND IMPENDING WATER SUPPLY CHALLENGES; AND 3) EDUCATE AND GENERATE SUPPORT FOR RESTORING PROTECTIONS THAT HAVE BEEN LOST FOR OUR NATION'S WETLANDS, STREAMS, LAKES AND HEADWATERS.

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 Page 2

 Name of the organization
 THEODORE ROOSEVELT CONSERVATION
 Employer identification number 04-3706385

 TRCP'S CENTER FOR WATER RESOURCES CONTINUES TO PLAY A KEY ROLE IN
 Advocating For Policy Changes and PROGRAMS THAT RESTORE AND CONSERVE

 FISH AND WILDLIFE HABITAT
 AS WELL AS ACCESS FOR HUNTERS AND ANGLERS

 ACROSS THE COUNTRY. ALREADY A LEADING ORGANIZATION IN COLORADO RIVER

 BASIN WATER MANAGEMENT AND THE SPORTSMEN AND CONSERVATION COMMUNITIES'

 RESPONSE TO THE ADMINISTRATION'S EFFORTS TO REPLACE THE CLEAN WATER

 RULE, WE CONTINUE TO EXPAND OUR CENTER'S EFFORTS IN PENNSYLVANIA AND IN

 THE SOUTHEAST.

CLEAN WATER ACT

IN 2017, WE SAW THE TRUMP ADMINISTRATION CONTINUING ITS ATTEMPT TO REPEAL AND REPLACE THE CLEAN WATER RULE. IN THE FALL, THE EPA AND THE ARMY CORPS CONDUCTED A SERIES OF LISTENING SESSIONS AND OPENED AN INTERIM DOCKET WHERE INTERESTED STAKEHOLDERS COULD SUBMIT COMMENTS BEFORE THE STEP 2 COMMENT PERIOD BEGAN. TRCP TOOK FULL ADVANTAGE OF THIS OPPORTUNITY BY SPEAKING ON THE HUNTER AND ANGLERS LISTENING SESSION AND SUBMITTING TWO COMMENT DOCUMENTS.

MEANWHILE, THE ADMINISTRATION IS HOPING THAT CONGRESS WILL ALLOW THEM TO REPEAL THE RULE WITHOUT FURTHER PROCESS. THEY RECEIVED OVER 500,000 COMMENTS ON THEIR REPEAL PROPOSAL, MOST OF THEM OPPOSED. BOTH CHAMBERS OF CONGRESS HAVE PROPOSED ALLOWING THE ADMINISTRATION TO REPEAL THE RULE WITHOUT COMPLYING WITH THE ADMINISTRATIVE PROCEDURES ACT. AND THE AGENCIES HAVE NOW OPENED ANOTHER LINE OF ATTACK PROPOSING TO DELAY THE EFFECTIVE DATE OF THE 2015 CLEAN WATER RULE FOR TWO YEARS. THE TRCP WILL CONTINUE TO ENGAGE IN THE PROCESS.

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COLORADO RIVER BASIN

WE NEED TO SOLVE THE IMBALANCE BETWEEN WATER SUPPLY AND DEMAND ACROSS THE COLORADO RIVER BASIN TO PROTECT THE REGION'S HUNTING AND FISHING OPPORTUNITIES FOR THE LONG-TERM. OFTEN, THIS CAN MEAN WORKING ON AGREEMENTS THAT ARE NOT IMMEDIATELY RELATED TO SPORTSMEN INTERESTS. ONE OF THREE SUCH IMPORTANT DEALS WAS SIGNED IN LATE SEPTEMBER AN AMENDMENT TO THE US MEXICO TREATY FOR SHARING COLORADO RIVER RESOURCES. IN ADDITION, CALIFORNIA MADE A ROBUST COMMITMENT TO SAVE THE SALTON SEA, AN IMPORTANT STOP ON THE PACIFIC FLYWAY FOR MIGRATORY BIRDS (ALTHOUGH IT WILL NEED VOTERS TO APPROVE A WATER BOND IN 2019). THESE TWO MILESTONES PAVE THE WAY FOR ARIZONA, CALIFORNIA AND NEVADA TO SIGN A DROUGHT CONTINGENCY PLAN, AND FOR ARIZONA TO SETTLE ITS INTERNAL WATER DISPUTES AND MOVE TOWARDS A FUTURE OF USING LESS WATER. THE "DCP" SHOULD TAKE PRESSURE OFF ICONIC FISHERIES IN COLORADO AND WYOMING, AND MAY EVEN ENABLE THOSE STATES, ALONG WITH UTAH AND NEW MEXICO, TO CONSERVE AND THEN "BANK" THE CONSERVED WATER IN WAYS THAT BOTH TAKE PRESSURE OFF THE NEED FOR NEW DAMS AND PIPELINES, BUT ALSO ACTUALLY IMPROVE SOME STREAM FLOWS. TRCP AND ITS ALLIES ARE WORKING TO GET THE PARTIES TO FINALIZE THIS ARRANGEMENT AND MOVE TOWARDS IMPLEMENTATION.

CENTER FOR MARINE FISHERIES (CMF): THE CENTER FOR MARINE FISHERIES CONTINUES TO PLAY A LEADING ROLE IN THE SPORTFISHING AND CONSERVATION COMMUNITY IN ADVOCATING NATIONALLY FOR FISHERIES LAWS AND POLICIES THAT BETTER RECOGNIZE THE NEEDS, CULTURE AND VITAL ECONOMIC ACTIVITY OF RECREATIONAL SALTWATER FISHING AND IN RESTORING THE HABITATS AND IMPROVING WATER QUALITY IN SOUTH FLORIDA AND THROUGHOUT THE GULF OF MEXICO REGION. THE CENTER AND TRCP POLICY STAFF WORK CLOSELY WITH OUR 732212 09-07-17 52

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Name of the organization THEODORE ROOSEVELT CONSERVATION PARTNERSHIP	Employer identification number $04 - 3706385$
PARTNERS AND OTHER ORGANIZATIONS IN THE SPORTFISHING AND E	OATING
COMMUNITY TO ADVANCE LEGISLATION ON THE NATIONAL LEVEL THA	Т
INCORPORATES THE RECOMMENDATIONS MADE BY THE COMMISSION ON	SALTWATER
FISHERIES MANAGEMENT IN THE REPORT "A VISION FOR MANAGING	AMERICA'S
RECREATIONAL SALTWATER FISHERIES."	

TRCP WORKED WITH ITS PARTNERS AND THE RECREATIONAL FISHING COMMUNITY AT LARGE CONSISTENTLY THROUGHOUT 2017 IN A WORKING GROUP TO HELP DEVELOP AND WRITE LEGISLATION AIMED AT AMENDING THE MAGNUSON-STEVENS FISHERY CONSERVATION AND MANAGEMENT ACT. CALLED THE "MODERNIZING RECREATIONAL FISHING ACT OF 2017" THE BILL WAS INTRODUCED IN EARLY APRIL IN THE HOUSE AND IN JULY IN THE SENATE AND ENJOYS BROAD, BI-PARTISAN SUPPORT. THE BILL SEEKS TO ADDRESS SEVERAL SHORTCOMINGS IN THE MAGNUSON ACT RELATED TO RECREATIONAL FISHING INCLUDING REQUIRING NOAA TO DEVELOP SPECIFIC GUIDELINES ON EXAMINING ALLOCATIONS BETWEEN COMMERCIAL AND RECREATIONAL FISHING, ALLOWING NOAA FISHERIES TO EXPLORE ALTERNATIVE MANAGEMENT APPROACHES THAT BETTER FIT RECREATIONAL FISHING AND ALLOW FOR MORE CONSISTENT SEASONS YEAR TO YEAR, CURBS THE CREATION OF INDIVIDUAL FISHING QUOTAS IN MIXED SECTOR FISHERIES AND EXPANDS DATA COLLECTION EFFORTS ON FISH STOCKS AND RECREATIONAL HARVEST.

FORM 990, PART III, LINE 4A (CONTINUED):

TRCP CENTER FOR MARINE FISHERIES DIRECTOR CHRIS MACALUSO TESTIFIED IN

SUPPORT OF THE "MODERN FISH ACT" BEFORE THE HOUSE SUBCOMMITTEE ON WATER

POWER AND OCEANS IN SEPTEMBER. HIS TESTIMONY WAS WELL-RECEIVED BY

COMMITTEE MEMBERS AND APPLAUDED BY TRCP PARTNERS. MACALUSO AND TRCP

POLICY STAFF HAVE CONTINUED TO MEET WITH CONGRESSMEN AND STAFF TO

ADVANCE THE LEGISLATION IN BOTH THE HOUSE AND SENATE AND EXPECT VOTES
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IN HOUSE AND SENATE COMMITTEES BY LATE THIS YEAR OR IN EARLY SPRING OF 2018.

THE TRCP CONTINUES TO FOCUS HEAVILY ON THE RESTORATION OF THE MISSISSIPPI RIVER DELTA AND THE EVERGLADES, WORKING WITH PARTNERS AND OTHER SPORTSMEN GROUPS, THE CONSERVATION COMMUNITY AT LARGE AND STATE AND FEDERAL LAWMAKERS AND POLICY MAKERS TO ADVANCE RESTORATION EFFORTS, ORGANIZE GRASSROOTS SUPPORT AND HELP EXPEDITE PASSAGE OF CRITICAL LEGISLATION AND FEDERAL PERMITS ASSOCIATED WITH ADVANCING RESTORATION IN BOTH AREAS. THE TRCP HOSTED ITS POLICY COUNCIL RETREAT IN EARLY NOVEMBER IN BURAS, LOUISIANA NEAR THE MOUTH OF THE MISSISSIPPI RIVER AND HAD SEVERAL DISCUSSIONS WITH LOUISIANA OFFICIALS AND PARTNER ORGANIZATIONS ABOUT FEDERAL PERMITTING ISSUES DELAYING CONSTRUCTION OF CRITICAL COASTAL RESTORATION EFFORTS IN IN THE MISSISSIPPI RIVER DELTA.

THE TRCP ALSO AUTHORED A LETTER SIGNED BY A DOZEN ANGLING AND CONSERVATION GROUPS URGING HOUSE AND SENATE LEADERSHIP TO INCLUDE FUNDING FOR KEY PROJECTS IN EVERGLADES RESTORATION BE INCLUDED IN HURRICANE RECOVERY PACKAGES FOR AREAS DEVASTATED BY HURRICANE IRMA.

THE TRCP ALSO WORKED EXTENSIVELY WITH THE SPORTFISHING AND CONSERVATION COMMUNITY TO ADVANCE CONSERVATION-BASED MANAGEMENT OF ATLANTIC MENHADEN THROUGH CHANGES IN MENHADEN MANAGEMENT BY THE ATLANTIC STATES MARINE FISHERIES COMMISSION. THOUGH THE VOTE IN NOVEMBER DID NOT TURN OUT EXACTLY THE WAY THE SPORTFISHING AND CONSERVATION COMMUNITY WANTED, THE COMMISSION DID VOTE TO WORK TOWARDS ESTABLISHING ECOLOGICAL BASED MANAGEMENT OVERT THE COMING YEARS, GIVING THE TRCP THE CHANCE TO CONTINUE TO LEAD THE SPORTFISHING COMMUNITY IN ADVANCING 732212 09-07-17

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ECOSYSTEM-BASED FORAGE FISH MANAGEMENT.

CONSERVATION FUNDING: THE TRCP HELPS LEAD A COALITION OF SPORTSMEN AND CONSERVATION ORGANIZATIONS ON THE CROSS-CUTTING ISSUE OF CONSERVATION FUNDING. IN RECENT YEARS, THE BUDGET DEFICIT HAS TAKEN CENTER STAGE WITH POLICY MAKERS, AND THE TREND TO CUT FEDERAL SPENDING HAS TAKEN A DRAMATIC AND DISPROPORTIONATE EFFECT ON CONSERVATION PROGRAMS SUPPORTED BY THE FEDERAL GOVERNMENT. PROGRAMS THAT HELP CONSERVE INTACT HABITAT OR PROVIDE CLEAN WATER PROTECTIONS HAVE ALL BEEN TARGETED FOR LARGE CUTS OR ELIMINATION. THROUGH THE WORK WITHIN OUR COMMUNITY AND AMONG OTHER ALLIES WE HAVE SEEN SOME TURN AROUND IN RECENT BUDGET REQUESTS. WHILE THERE REMAINS GREAT UNCERTAINTY BOTH IN CONGRESS AND THE ADMINISTRATION IN TERMS OF PRIORITIES AND THE POTENTIAL FOR ACTION OF ANY KIND ON FEDERAL APPROPRIATIONS BILLS OR FEDERAL LEGISLATION, THE TRCP HAS IDENTIFIED THREE KEY AREAS OF CONSERVATION FUNDING THAT WARRANT ENGAGEMENT IN 2017-2018: DEFENSE OF THE FEDERAL CONSERVATION BUDGET; DISASTER ASSISTANCE; AND INFRASTRUCTURE. WE HAVE ALSO RECENTLY ENGAGED IN SETTING PRIORITIES FOR DISASTER ASSISTANCE AS WELL AS FORMED A NEW WORKING GROUP TO ENGAGE ON INFRASTRUCTURE FUNDING AND POLICY. ALL THREE AREAS OF CONSERVATION FUNDING WILL REMAIN OF IMPORT AS WE ROUND OUT 2017 AND HEAD INTO 2018 AND THE SECOND SESSION OF THE 115TH CONGRESS.

DURING 2017, THE TRCP HAS LED REGULAR AVCRP CALLS TO PROVIDE A FORUM FOR THE DEVELOPMENT OF A MULTI-STAKEHOLDER CONSERVATION FUNDING CAMPAIGN. THIS CAMPAIGN HAS FOCUSED ON OUTREACH TO BUDGET AND APPROPRIATIONS COMMITTEE STAFF TO GATHER INTEL AND DISCUSS NEXT STEPS TO ENSURE FEDERAL CONSERVATION FUNDING FOR FY2018 DOES NOT WITNESS CUTS 732212 09-07-17 55

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IN ORDER TO OFFSET INCREASED SPENDING IN OTHER AREAS OF TH	E BUDGET SUCH
AS FOR DEFENSE. THE TRCP LED FOUR APPROPRIATIONS LETTERS T	HIS YEAR IN
CLOSE COORDINATION WITH OUR POLICY COUNCIL PARTNERS WITH A	FOCUS ON THE
U.S. DEPARTMENT OF INTERIOR, U.S. DEPARTMENT OF AGRICULTUR	E, NOAA
FISHERIES, U.S. ARMY CORPS OF ENGINEERS AND U.S. ENVIRONME	NTAL
PROTECTION AGENCY. WE ALSO LED AVCRP LETTERS REQUESTING ST	RONG FUNDING
FOR FUNCTION 300 - THE NATURAL RESOURCES AND ENVIRONMENT PO	ORTION OF THE
FEDERAL BUDGET. THESE LETTERS WERE SENT TO THE PRESIDENT A	ND HOUSE AND
SENATE LEADERSHIP.	

SIMILAR TO WHAT WAS ACCOMPLISHED VIA THE HURRICANE SANDY SUPPLEMENTAL IN 2013 WITH \$100 MILLION DEDICATED TO A COASTAL RESILIENCY COMPETITIVE GRANT PROGRAM, THE TRCP IS SUPPORTING EFFORTS BY PARTNERS SUCH AS THE NATIONAL FISH AND WILDLIFE FOUNDATION TO ENSURE THE NEXT HURRICANE SUPPLEMENTAL INCLUDES A DIRECTIVE AND/OR COMPETITIVE FUNDING STREAM FOR PROJECTS FOCUSING ON NON-STRUCTURAL SOLUTIONS OR BLENDED NATURAL/BUILT INFRASTRUCTURE PROJECTS (WETLANDS BUFFERS ADJACENT TO HIGHWAYS TO REDUCE STORM SURGES; FLOODPLAIN CONSERVATION COMBINED WITH BUILT SOLUTIONS TO ADDRESS FLOODING IN COMMUNITIES). ADDITIONALLY, THE TRCP BELIEVES THE NEXT SUPPLEMENTAL SHOULD INCLUDE TARGETED FUNDING FOR "SHOVEL-READY" PROJECTS SUCH AS THOSE IDENTIFIED BY STATE COASTAL MASTER PLANS OR AS PART OF THE COMPREHENSIVE EVERGLADES RESTORATION PLAN. AS PART OF THE NEXT DISASTER ASSISTANCE SUPPLEMENTAL PACKAGE AND BUDGET DEAL NEGOTIATIONS, WE HAVE WORKED WITH OUR PARTNERS TO PRESS FOR A DEAL ON FIRE FUNDING TO ADDRESS FIRE BORROWING THAT WOULD ALSO INCLUDE PROVISIONS ON FOREST MANAGEMENT REFORM.

TRCP BEI	IEVES THE	SPORTSMEN,	CONSERVATION	AND	OUTDOOR	RECREATION	
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Name of the organization THEODORE ROOSEVELT CONSERVATION PARTNERSHIP	Employer identification number 04-3706385		
	04 3700303		
COMMUNITY HAS AN IMPORTANT ROLE TO PLAY IN THE DEVELOPMENT	OF LANGUAGE		
TO PRIORITIZE AND FUND SOLUTIONS THAT ENCOMPASS BLENDED NA	TURAL AND		
TRADITIONAL INFRASTRUCTURE (WETLANDS BUFFERS ADJACENT TO H	IGHWAYS TO		
REDUCE STORM SURGES; FLOODPLAIN CONSERVATION COMBINED WITH	BUILT		
SOLUTIONS TO ADDRESS FLOODING IN COMMUNITIES). ADDITIONALL	Y, SHOULD THE		
TRUMP ADMINISTRATION DECIDE TO PROMOTE A MORE COMPREHENSIV	E		
INFRASTRUCTURE PACKAGE, OUR COMMUNITY WILL NEED TO ENGAGE	IN		
INFRASTRUCTURE NEGOTIATIONS ON THE HILL AND WITHIN THE ADMINISTRATION			
IN AN ORGANIZED AND STRATEGIC WAY AND IDENTIFY KEY CONGRESSIONAL			
CHAMPIONS IN ORDER TO ADVANCE ANY PROVISIONS WE WOULD LIKE	TO SEE IN A		
FINAL INFRASTRUCTURE PACKAGE THAT WOULD COVER NON-TRADITIO	NAL		
INFRASTRUCTURE (I.E., TRAILS, RECREATIONAL FACILITIES, BOAT RAMPS) AS			
WELL AS BLENDED INFRASTRUCTURE SOLUTIONS.			
TO ACHIEVE THESE PRIORITIES, TRCP ESTABLISHED A NEW TRCP I	NFRASTRUCTURE		
WORKING GROUP IN 2017. WE HAVE ALSO BEEN WORKING CLOSELY W	ITH NFWF,		

OIA, NWF, TNC, AFWA AND DU THROUGH AN INFRASTRUCTURE STEERING COMMITTEE

TO IDENTIFY AREAS OF FOCUS FOR DEVELOPING A SET OF RECOMMENDATIONS ON

PROGRAMMATIC REQUESTS, INNOVATIVE FINANCING MECHANISMS, SUCH AS

PUBLIC-PRIVATE PARTNERSHIPS, AND POLICY CHANGES. OUR GROUP IS CLOSELY

TRACKING COMMONSENSE PERMIT STREAMLINING THAT WOULD ENABLE

INFRASTRUCTURE PROJECTS TO MOVE MORE QUICKLY WITHOUT SACRIFICING

EFFECTIVE STEWARDSHIP OF OUR NATURAL RESOURCES. THROUGH THIS STEERING

COMMITTEE, THE TRCP FINALIZED A LETTER AND SUBMITTED THIS TO THE

PRESIDENT AND CONGRESSIONAL LEADERS SETTING THE STAGE FOR OUR

COMMUNITY'S PRIORITIES DURING A CONGRESSIONAL INFRASTRUCTURE DEBATE.

THIS LETTER INCLUDED 38 MEMBER ORGANIZATIONS OF TRCP'S POLICY COUNCIL.

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

THE TAX RETURN WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY

SENIOR MANAGEMENT. THE DRAFT 990 WAS PROVIDED TO THE AUDIT COMMITTEE FOR

REVIEW AND COMMENT. A FINAL COPY OF 990 WAS SENT TO THE ENTIRE BOARD FOR

REVIEW AND APPROVAL BEFORE IT WAS FILED WITH IRS.

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

EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH GOVERNING

BOARD DELEGATED POWERS ANNUALLY SIGNS A STATEMENT WHICH AFFIRMS SUCH

PERSON:

A. HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY,

B. HAS READ AND UNDERSTANDS THE POLICY,

C. HAS AGREED TO COMPLY WITH THE POLICY, AND

D. UNDERSTANDS THE ORGANIZATION IS CHARITABLE AND THAT, IN ORDER TO

MAINTAIN ITS FEDERAL TAX EXEMPTION, IT MUST ENGAGE PRIMARILY IN ACTIVITIES

WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.

PROCEDURES FOR ADDRESSING THE CONFLICT OF INTEREST:

A. AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE GOVERNING BOARD OR

COMMITTEE MEETING, BUT AFTER THE PRESENTATION, HE/SHE LEAVES THE MEETING

DURING THE DISCUSSION OF, AND THE VOTE ON, THE TRANSACTION OR ARRANGEMENT

INVOLVING THE POSSIBLE CONFLICT OF INTEREST.

B. THE CHAIRPERSON OF THE GOVERNING BOARD OR COMMITTEE, IF APPROPRIATE,

APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO

THE PROPOSED TRANSACTION OR ARRANGEMENT.

C. AFTER EXERCISING DUE DILIGENCE, THE GOVERNING BOARD OR COMMITTEE

DETERMINES WHETHER THE ORGANIZATION CAN OBTAIN WITH REASONABLE EFFORTS A

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MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT FROM A PERSON	OR ENTITY THAT
WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST.	
D. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NO	T REASONABLY
POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A CONFLICT OF I	NTEREST, THE
GOVERNING BOARD OR COMMITTEE DETERMINES BY A MAJORITY VOTE	OF THE

DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE

ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT, AND WHETHER IT IS FAIR

AND REASONABLE. IN CONFORMITY WITH THE ABOVE DETERMINATION, IT MAKES ITS

DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT.

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

AT THE DISCRETION OF THE CHAIRPERSON OF THE BOARD OF DIRECTORS, THE EXECUTIVE COMMITTEE OF THE BOARD WILL OBTAIN THIRD PARTY ASSISTANCE IN DETERMINING THE APPROPRIATE COMPENSATION FOR THE PRESIDENT/CEO. THE PROCESS USED WILL BE CONDUCTED BY THE EXECUTIVE COMMITTEE, AND DOCUMENTED IN THE BOARD MINUTES. COMPARABILITY DATA WAS NOT USED IN 2017 SINCE THIS IS NOT NECESSARY TO DO EVERY YEAR.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990: AL,AK,AZ,AR,CA,CO,CT,FL,GA,IL,KS,KY,ME,MD,MA,MI,MN,MO,NH,NJ,NM,NY,NC,ND,OH OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI

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

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST

POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

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FORM 990, PART XII, LINE 2C:

THE PROCESS HAS NOT CHANGED FROM PREVIOUS YEARS.

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	PARTNERSHIP	04-3706385
		0-b- tule 0 /F-mm 000 - 000 FT (00 /
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2017 DEPRECIATION AND AMORTIZATION REPORT

FORM 9	ORM 990 PAGE 10 990														
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
1	COMPUTER EQUIPMENT	VARIOUS	SL	5.00		16	152,345.				152,345.	125,631.		0.	125,631.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						152,345.				152,345.	125,631.		0.	125,631.
	MANAGEMENT AND GENERAL														
2	FURNITURE & FIXTURES * 990 PAGE 10 TOTAL	VARIOUS	SL	7.00		16	41,188.				41,188.	30,398.		٥.	30,398.
	MANAGEMENT AND GENERAL * GRAND TOTAL 990 PAGE 10						41,188.				41,188.	30,398.		0.	30,398.
	DEPR						193,533.				193,533.	156,029.		0.	156,029.

728111 04-01-17

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

(Rev. January 2017)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the

forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit

Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic

filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number							
Type or print	Name of exempt organization or other filer, see instru THEODORE ROOSEVELT CONSERVA PARTNERSHIP	Employe	Employer identification number (EIN) or $04 - 3706385$						
File by the due date fo filing your return. See		Social security number (SSN)							
instructions									
Enter the	e Return Code for the return that this application is for (fil	e a separa	te application for each return)	<u></u>					
Application Return Application						Return			
ls For		Code	Is For		Code				
Form 990 or Form 990-EZ			Form 990-T (corporation)		07				
Form 99	0-BL	02	Form 1041-A		08				
Form 47	20 (individual)	03	Form 4720 (other than individual)	09					
Form 99	0-PF	04	Form 5227	10					
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11					
Form 99	0-T (trust other than above) PIETER FOSBURGI	06	Form 8870	12					
 If this box 1 In for 	organization does not have an office or place of business is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box \blacktriangleright equest an automatic 6-month extension of time until r the organization named above. The extension is for the X calendar year 2017 or tax year beginning	Group Exe <u>and atta</u> <u>NOVEI</u> organizatic	mption Number (GEN), . ch a list with the names and EINs of MBER 15, 2018 , to file	f this is fo all memb	r the whole g	group, check this asion is for.			
2 If 1	the tax year entered in line 1 is for less than 12 months, c	heck reaso	on: Initial return	Final retur	n				
	this application is for Forms 990-BL, 990-PF, 990-T, 4720 Inrefundable credits. See instructions.	, or 6069, e	enter the tentative tax, less any	3a	\$	0.			
	this application is for Forms 990-PF, 990-T, 4720, or 6069 timated tax payments made. Include any prior year overp	\$	0.						
c Ba									
Caution instruction	: If you are going to make an electronic funds withdrawal	(direct del	bit) with this Form 8868, see Form 84		d Form 8879	0 • -EO for payment 3868 (Rev. 1-2017)			