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DLN: 93493045008463

Form 990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2011

OMB No 1545-0047

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

Open to Public Inspection

Internal Revenue	l l	rte reporting	requirement	Inspection
	2011 calendar year, or tax year beginning 10-01-2011 and ending 09-30-2012 C Name of organization	1	D Employer	identification number
Check if a Address cl	THE HARRY'S TRUMAN LIBRARY INSTITUTE		43-6042	632
Name cha	Doing Business As	- I	E Telephone	
_		_	(816)268	8-8248
Initial retu	FOR WEST HE LICEUMAY 24			ots \$ 2,651,341
Terminate -	a	_		
Amended	INDEPENDENCE, MO 640501798			
Application	n pending			
	F Name and address of principal officer	H(a) Is this	s a group ret	
	MARY HUNKELER 500 WEST US HIGHWAY 24	affilia	tes?	ΓYes Γ No
	INDEPENDENCE, MO 640501798	H(b) Are all	affiliates incl	uded?
				st (see instructions)
Tax-exen	npt status	H(c) Grou	p exemption	number ►
Website	∷► WWW TRUMANLIBRARY ORG			
C Form of or	ganization	Year of for	mation 1957	M State of legal domicile
		E rear or for	madon 1337	MO
Part I	Summary			
	Briefly describe the organization's mission or most significant activities	N AMEDIC	V ,C 33DU DI	DECIDENT
	TO PRESERVE AND PROMOTE THE ENDURING LEGACY OF HARRY S TRUM	AN, AMERIC	A 5 33KD PI	KESIDENI
ŧ				
2	Check this box 🔰 if the organization discontinued its operations or disposed of	more than 2	5% of its net	assets
2 3 4 5 6 70	Number of voting members of the governing body (Part VI, line 1a)		3	32
4	Number of independent voting members of the governing body (Part VI, line 1b)		4	3:
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a) .		5	14
6	Total number of volunteers (estimate if necessary)		6	30
- /a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	a (
Ь	Net unrelated business taxable income from Form 990-T, line 34		71	
		Prio	r Year	Current Year
a 8	Contributions and grants (Part VIII, line 1h)		1,966,647	
Ĕ 9	Program service revenue (Part VIII, line 2g)		65,129	· · · · · · · · · · · · · · · · · · ·
en 10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	451,358		
_ 11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-7,983		-33,088
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,475,151	1,395,858
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		91,388	
14	Benefits paid to or for members (Part IX, column (A), line 4)		0	
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines			
&	5-10)		607,017	613,398
EXD HOSE BENEAR	Professional fundraising fees (Part IX, column (A), line 11e)		0	0
<u>ੜ</u> ੀ ਮ	Total fundraising expenses (Part IX, column (D), line 25) ►203,975			
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		460,333	630,288
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,158,738	1,406,565
19	Revenue less expenses Subtract line 18 from line 12		1,316,413	-10,707
8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9			of Current	End of Year
9 4 2	Tabel access (Doub V. Line 1C)	Y	ear	10 047 451
がで 20 (数	Total labelities (Part X, line 16)		9,143,755	
	Total liabilities (Part X, line 26)		9,143,755	
	Net assets or fund balances Subtract line 21 from line 20		9,143,733	10,047,431
Part II	Signature Block			
	lties of perjury, I declare that I have examined this return, including accompanying sch and belief, it is true, correct, and complete. Declaration of preparer (other than officer)			
nowledge.				
	<u> </u>			
Sian.	****** Signature of officer	20 Da	13-02-09 te	
Sign Here		24		
	ROGER NOVAK TREASURER Type or print name and title			
	Data Ch	ook if	Drono	vnavor identification in the
nate!	signature JIM RITTS se		(see instruction	kpayer identification number ons)
Paid		nployed 🕨 🦵	P00362910	
Preparer's	Firm's name (or yours if self-employed),	EIN • 43-076	55316	
Jse Only	address, and ZIP + 4 10975 GRANDVIEW SUITE 600			
	OVERLAND PARK, KS 66210		Phone no 🕨	(913) 491-4144
 1ay the IR	S discuss this return with the preparer shown above? (see instructions)			✓ Yes No
1ay the IR	S discuss this return with the preparer shown above? (see instructions)			✓ Yes No

	990 (· · · · · · · · · · · · · · · · · · ·							Page 2
Par	t III	Statement of Progr Check if Schedule O cor				II			. IZ
ADV PRES PUBI ENRI PRO	HARR' ANCEI SIDEN IC PA ICH TH VIDES	y describe the organization of the second of	on's mission NSTITUTE, A NON ACTIVITIES OF T EEN BY THE NATI IBRARY INSTITUT NDING OF HISTO	PROFIT 50 HE HARRY ONAL ARC E PRESERV RY, THE PR	11(C)(3) ORGANS TRUMAN LIE HIVES AND REVES THE ENDU ESIDENCY, PU N LIBRARY AN	NIZATION, IS DED BRARY AND MUSEU CORDS ADMINIST RING LEGACY OF A BLIC POLICY, AN	JM, ONE OF OU FRATION TOGE AMERICA'S 33R D CITIZENSHIP	R NATIO THER W D PRES THE IN	ERVATION, DN'S 13 /ITH ITS IDENT TO ISTITUTE
2	the pr	ne organization undertake rior Form 990 or 990-EZ? s," describe these new se	·		es during the ye	ear which were not li		es 「N	0
3	Did th	e organization cease con	ducting, or make si		anges in how it	conducts, any prog	ram Г Y	es 🔽 N	o
4	Desci	s," describe these change ribe the organization's pro ises Section 501(c)(3) a s and allocations to other	gram service acco nd 501(c)(4) orgar	izations and	d section 4947(a)(1) trusts are req	uired to report th		
4a	AND HIS P DOCUMENT OF THE CONTROL OF	CHEDULE OEDUCATIONAL OUT L,000 YEARS OF EFFORT ON THE RESIDENTIAL LIBRARY WAS TO MENTS FROM HIS ADMINISTRA DRY AND NATURE OF THE PRES UTE CONTINUES TO PROVIDE A PREPARE FOR A LIFETIME OF A ICIPATED IN THE TRUMAN LIBR TUTE'S FLAGSHIP EDUCATION OF SERS OF THE MEDIA DESIGNED REMATION GATHERING AND ANA DRY AND GOVERNMENT DURIN SION CENTER SUMMER TEACH CLONG TEACHER CONFERENCE RINIZATION, INTERNATIONAL A CLASSROOM AND WERE ALSO PO NIKING SCHOOL DISTRICT BUDG SE HERE" SCHOLARSHIP FUNDIN RRY INSTITUTE'S ACCLAIMED EE GUIDED MUSEUM TOURS - 7,1 RSE STUDENTS IN A HISTORY OF LAR HANDS-ON CLASSROOM RI MPANIED BY AGE APPROPRIATI JAN'S LIFE NATIONAL HISTORY VE STUDENTS FROM GREATER NE THIS WAS THE LARGEST CO LATION ADDITIONAL EDUCATION ASSROOM PRESENTATIONS, 4,4 EDUCATORS GRANTS AND AW INUES TO FACILITATE THE IMP NEARLY SIXTY YEARS AGO RE EEL TO THE TRUMAN LIBRARY TO SENIOR SCHOLARS TIME AWAY AWARDED THIRTEEN RESEARCH IAN BOOK AWARD - THIS BIENN ING PRIMARILY AND SUBSTANT RESIDENCY ACCLAIMED MILLT 1951 THEY CAME FROM THE AS CITY PUBLIC LIBRARY ON SE ATION COMMITTEE SAID MILLE RESTUDIES OF THE KOREAN CO LOR BOOK AWARD - THIS BIENN ING PRIMARILY AND SUBSTANT RESIDENCY ACCLAIMED MILLT 1951 THEY CAME FROM THE AS CITY PUBLIC LIBRARY ON SE ATION COMMITTEE SAID MILLE RESTUDIES OF THE KOREAN CO LOR BOOK FOCUSED ON ISSUES RAC COMPONENTS WILL INCLUDE AND CAMBRIDGE UNIVERSITY AND SUBSTANT RESIDENCY ACCLAIMED MILLE AS CITY PUBLIC LIBRARY ON SE ATION COMMITTEE SAID MILLE RESTUDIES OF THE KOREAN CO LOR BOOK FOCUSED ON ISSUES RAC COMPONENTS WILL INCLUDE AND CAMBRIDGE UNIVERSITY AND SUBSTANT RESIDENCY ACCLAIMED MILLE AND CAMBRIDGE UNIVERSITY AND SUBSTANT RESIDENCY FOR THE WILL AND SUBSTANT RESIDENCY FOR THE WILL AND SUBSTANT RE	REACH "YOUNG PEOPLE HE PART OF GREAT THIE HE STOOD PRESIDENT TRU SIDENCY AND THE GOVE A WIDE RANGE OF NATI ACTIVE AND INFORMED HATTORY INSTITUTE'S EDUC PROGRAM MARKED ITS ADULT LEARNERS HAVE WING OF THE WHITE HE LYSIS, PROBLEM SOLVII HE TO SCHOOLS THAT OF HE AT THE TRUMAN LIBRA HE AT THE TRUMAN POSTER HE AT THE TRUMAN DESIGN HE SOURCE FILLED WITH HE LESSON PLANS DESIGN DAY - ON MARCH 3, 20 HE AND SOCIETAL RED HONTINGENT FROM THE HONAL RESOURCES PROV TS, LESSON PLANS AND HE SOURCE FILLED WITH HE AS TUDENTS, TEACH HONTINGENT FROM THE HONAL RESOURCES PROV TS, LESSON PLANS AND HE SOURCE FILLED WITH HE SOURCES PROV HE SOURCES PROV TS, LESSON PLANS AND HE SOURCE PROV THE RESOURCES HE ONGOING NATIONAL LE HE SOOD WAS ESTAI HALLY WITH SOME ASPE HE GRANTS, ONE DISSER HILLY WITH SOME ASPE HE THE TRUMAN LIBRAR HORTH "MORE THAN 2 HE THE TRUMAN LIBRAR HORTH "MORE THAN 2 HE THE TRUMAN LIBRAR HORTH "MORE THAN 2 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 2 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 2 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 2 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 2 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 2 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 2 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 2 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 2 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 3 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 3 HE SOOK WAS THE CI HE TRUMAN LIBRAR HORTH "MORE THAN 3 HORTH "MORE THAN 3 HORTH "MORE	MUST UNDEF MERS REVO ENVISIONED A MAN WANTED RIMMENT OF T CONALLY ACCLA CITIZENSHIP ATIONAL PROC 10TH ANNIVEI EXPERIENCEI CUSE AND INT DRY LAB, THE ORS, DECISION L YEAR, 4,739 E LEGACY OF ARY, JULY 9-1 ONSTRUCTION N LIBRARY'S W AL YEARS OF OTHERWISE WI 4,107 STUDEN PATED IN THE WITH INTERA PRESIDENCY REPLICAS OF WITH INTERA PRESIDENCY REPLICAS OF OTHERWISE WI 12, THE TRUI TIRST OR SEC KANSAS CITY IDED TO ALLOW OF WORKSHO EN WORKSHO EN WORKSHO EN GENERAL DISSE DISCOURSE ON SSENTIAL TO EARCH DISSE OMPLETE THEI TATION YEAR BLISHED IN 19 CT OF THE LIF C MILLETT WA ON PEOPLE AT ANNOUNCID OT TRUMAN-K, Y INSTITUTE'S RILLETT WA ON PEOPLE AT ANNOUNCID OT TRUMAN-K, Y INSTITUTE'S RILLETT WA ON PEOPLE AT ANNOUNCID OTHE MOST PROJECT, CUR WAN LIBRARY' UNLIBRARY' LEVER, STUDE WAN LIBRARY' LEVER, STUDE	LUTIONS AND SACE IN "CLASSROOM FOR A PLACE WHERE YC HE UNITED STATES IMED EDUCATIONA DURING THE 2011 GRAMS MORE SPECE REARY ON MAY 22, THIS HANDS-ON HOTHER OTHE SHOES OF PER WHITE HOUSE DEC! 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4b	MUSE TELEV LIBRA CAPA AWAF 2011 FEATU COUN JUST: ATTE PRES LEADU ANNU) (EXP CHEDULE OPUBLIC OUTREACH UM'S PUBLIC OUTREACH PROG VISION AND RADIO RE-BROADC RY RAN FROM MARCH 13 THRE CITY AND WERE STANDING ROE DED TO ALLAN H MELTZER FO JERED PANELISTS WERE FORME ICIL ON FOREIGN RELATIONS P CE STEPHEN BREYER SPEAKINE NDEES MARCH 27, 2012 - BOO ENTED BY THE KANSAS CITY PLE ERSHIP AWARD KEYNOTE SPEA AL MEMBERS NIGHT AT THE MU Y," 202 ATTENDEES	PROGRAMS THE TRUM GRAMS TENS OF THOUS ASTS "HAIL TO THE CHOUGH NOVEMBER 27, 2 OM ONLY, SEVERAL WE RE EXTRAORDINARY ACI IRGINIA BENNETT FORU R U S SECRETARY OF RESIDENT EMERITUS LI G ON "MAKING OUR DE DIK EVENT WITH NOAH F JBLIC LIBRARY, 307 AT AKER AND AWARD RECI	AN LIBRARY IN ANDS OF PEO IEFS," A 15-P. 012 WAS ATTE RE TAPED FOR IM ON THE PR STATE MADELE ESLIE GELB, 69 MOCRACY WO ELDMAN SPEA FINDEES APR PIENT FORME	PLE WERE REACHEI ART PRESIDENTIAL ENDED BY MORE TH ENDED BY MORE TH THE FORMATION A ESIDENTCY PRESEN EINE ALBRIGHT, FOR S ATTENDEES DEC RK A JUDGE'S VIE KING ON "SCORPIO IL 5, 2012 - "WILD R SECRETARY OF D	FUNDING AND SUPPOR THROUGH LIVE AUDIE LECTURE SERIES CO-PI AN 6,000 PEOPLE MAN' SPAN OCTOBER 19, 203 ND CONDUCT OF ECON ITED "PRESIDENTIAL PO RMER U S SENATORS BO EMBER 8, 2011 - BOOK W " CO-PRESENTED BY INS THE BATTLE AND TH ABOUT HARRY" AND TH EFENSE ROBERT M GA'	NCE EXPERIENCE, W RESENTED BY THE KA Y OF THE PROGRAMS IL - TRUMAN MEDAL OMIC POLICY, 185 A' WER ABROAD FROM DB KERREY AND CHU EVENT WITH ASSOC THE KANSAS CITY PI TEL WATER STREEN E 2012 HARRY S TR TES, 644 ATTENDEES	S TRUMAN TEB CASTS ANSAS CIT FOR ECON TTENDEES TRUMAN TO THE SUPPOSITION LEG TO THE SUPPOSI	, AND Y PUBLIC D SEATING NOMIC POLICY G OCTOBER 29, TO OBAMA " , AND THE REME COURT RARY, 750 GTRICES " CO- SACY OF 2012 - FIFTH
4c	TRUM PROG EXHIE MADE OF HA SCHO POLIT ARE A ACTIN	CHEDULE OEXHIBITIONS ONGO IAN'S PRESIDENCY ARE HIGHLIGH RAMS, AND INTERACTIVE ELEMBITION DURING THE 2012 PERIOR BY U.S. PRESIDENTS JOHN KEIT ARRY TRUMAN IS EXPLORED IN OL. TO HIS LATER EXPERIENCES ICAL CAREER AS A COUNTY JUNISO EXPLORED THE EXHIBITION OF THE LIFE OF HARRY THE LIFE OF HARRY THE RESTED TO THE LIFE OF HARRY THE PRESIDENCE OF THE LIFE OF HARRY THE PRESIDENCE OF THE LIFE OF HARRY THE PRESIDENCE OF THE LIFE OF T	DING - "HARRY S TRUM GHTED IN THIS 10,500 IENTS, THIS EXHIBITIOI OD INCLUDED MODERN NNEDY THROUGH BARA THIS 4,500 SQUARE-FI S AS AN ENTREPRENEU DGE, U S SENATOR, VI DIN FEATURES FOUR DIS RRY TRUMAN ONGOIN	IAN THE PRES SQUARE-FOOT N FORMS THE IZING THE "W CK OBAMA OF DOT PERMANE R AND A FARM CE PRESIDEN' ICOVERY AREA G - "TRUMAN	CORE EXHIBITION CENTERPIECE OF T HO'S QUOTING TRU IGOING - "HARRY S NT EXHIBITION TH ER, AS A WORLD W T AND PRESIDENT S AND AN INTERAC WORKING OFFICE"	PERMANENT EXHBITTION FEATURING TWO DEC! HE TRUMAN LIBRARY'S IMAN" VIDEO PRODUCT! TRUMAN HIS LIFE AN E EXHIBITION FOLLOWS VAR I SOLDIER, AND A H TRUMAN'S POST PRESIE TIVE QUIZ WHERE CHIL PERMANENT EXHIBITIO	ISION THEATERS, EN PERMANENT EXHIBIT ION EXCLUSIVELY FE. ID TIMES" PERMANEI TRUMAN'S LIFE FRO ABERDASHER IT ALS DENTIAL YEARS AND IDREN CAN PARTICIP OF FROM THE TIME	HANCED A TIONS UPC ATURING T ATURING T AN EXHIBI AN HIS EAF BO CHRON HIS CLOSE ATE IN EN	NUDIO AND VIDEO PATES TO THIS FRUMAN QUOTES FION THE LIFE RLY YEARS IN ICLES HIS FAMILY TIES IGAGING AN LIBRARY AND

MUSEUM OPENED IN 1957, HARRY TRUMAN MAINTAINED AN OFFICE WITHIN THE LIBRARY, OFTEN WORKING FIVE TO SIX DAYS A WEEK WRITING HIS MEMOIRS, ARTICLES, LETTERS AND MEETING WITH DIGNATARIES AND CELEBRITIES FOLLOWING MR TRUMAN'S DEATH IN 1972, THE OFFICE BECAME AN EXHIBIT THAT COULD BE VIEWED BY THE PUBLIC IN 2008-2009, THE EXHIBIT UNDERWENT A \$1 4 MILLION RENOVATION WITH FUNDS RAISED BY THE TRUMAN LIBRARY INSTITUTE THE RENOVATION INCLUDED CONSTRUCTION OF A NEW PAVILION, ADJACENT TO THE OFFICE, BUILT TO HOUSE STATE-OF-THE-ART VIDEO AND INTERACTIVE STATIONS AND PHOTOGRAPHIC WALL PANELS EXPLAINING THE OFFICE'S RICH HISTORY AND CONTENTS THE SPECIAL EXHIBITION, "TRACING THE TRUMANS AN AMERICAN STORY," EXPLORED THE ANCESTORS OF HARRY AND BESS - THE TRUMANS, WALLACES, YOUNGS, GATES AND WILLOCKS - WHO CAME TO MISSOURI, LIKE SO MANY OTHERS, LOOKING FOR OPPORTUNITY AND THE PROMISE OF A BETTER LIFE AMONG THE NEVER-BEFORE-DISPLAYED ARTIFACTS WERE HARRY TRUMAN'S 1914 BUGGY AND ITEMS FROM THE MARGARET TRUMAN DANIEL ESTATE THE EXHIBITION WAS ON DISPLAY MARCH 8, 2012 THROUGH JANUARY 6, 2013 TOTAL ATTENDANCE WAS 57,138

(Code) (Expenses \$	290,026	including grants of \$) (Revenue \$)					
PUBLIC RELATIONS AND A	PUBLIC RELATIONS AND ADVERTISING, DOCUMENTARY ACCESS, VOLUNTEER & INTERN PROGRAM, AND PREVENTATIVE MAINTENANCE									

Other program services (Describe in Schedule O)

290,026 including grants of \$) (Revenue \$ (Expenses \$ 978,468 Total program service expenses►\$

Part IV	Checklist	of Rea	uired	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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	2	Yes	
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		N o
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? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
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 $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a		No
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		No
c	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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	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, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16	Yes	
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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II $\textcircled{\textbf{5}}$	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		N o
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	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 owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		Νo
b	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	35b		No
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		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2011)

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V $$			
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
С	gaming (gambling) winnings to prize winners?	1c	Yes	
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			
L	return			
D	That least one is reported on line 2a, did the organization line all required lederal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year ⁹	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities			
	account)?	4a		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
,	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	7a	Yes	
	services provided to the payor?	<u> </u>	· ·	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
	· · · · · · · · · · · · · · · · · · ·			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			NI -
£	Contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.	0		
•	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
.О	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12			
,	facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
_	the states in which the organization is needed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14b		•

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
Ia	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	9		No	
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17				
10	Section 6104 requires an organization to make its Form 1022 (or 1024 if applicable) 999, and 999 T (501/c)			

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization LISA SULLIVAN 500 W US HWY 24

INDEPENDENCE, MO 64050 (816) 268-8248

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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 or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	mor unles an	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

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

see Additional Data Table See Additional Data Table 1b Sub-Total		(A) Name and Title						x, oth)		(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W- 2/1099- MISC)		(F) Estima mount o compens from t	ited f other sation the on and
1b Sub-Total			for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)			
c Total from continuation sheets to Part VII, Section A	See A	ddıtıonal Data Table													
c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A															
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c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A															
c Total from continuation sheets to Part VII, Section A															
d Total (add lines 1b and 1c)							•								
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►1 Yes N Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual					• •				_		180,570		0		38,923
Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	2	Total number of individuals (inc	luding but not lin	nited to	thos	e lıs	ted	above) who	o receive	d more tha	an			
on line 1a? If "Yes," complete Schedule J for such individual														Yes	No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	3						ey e	mploy •	ee, d	or highes	t compens	ated employee	3		No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	4	organization and related organiz	zatıons greater th	nan \$15	50,00	002	If "Y	'es," co	and mple	other cor ete Schedi	mpensatio ule J for su	n from the <i>ch</i>			
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	5								• unre	· · lated ora	anızatıon (or individual for	4		No_
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)										_			5		No
\$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C)	Se														
	1	\$100,000 of compensation from	m the organizatio												
		Na		dress							Desc				
													\pm		
													\pm		
2 Total number of independent contractors (including but not limited to those listed above) who received more than		Total number of independent con	tractors (include	na but -	ot li-	nıta	l to	these	licto	d above)	who rese:	ved more than	-		

Part V		Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$\$	1a	Federated campaigns 1a					
医黄	b	Membership dues 1b	252,925				
్జ్	С	Fundraising events 1c	284,092				
Contributions, gifts, grants and other similar amounts	d	Related organizations 1d					
5 €		Government grants (contributions)					
띃	е						
e E	f	All other contributions, gifts, grants, and similar amounts not included above	326,560				
έ€	g	Noncash contributions included in					
뒫		lines 1a-1f \$					
ပိုင်း	h	Total. Add lines 1a-1f	. ►	863,577			
an a		Busin	ess Code				
Ĭ	2a	WHITE HOUSE DECISION C	900099	68,487	68,487		
9 <u>.</u>	ь		300033	55,151	55,157		
Œ.							
Š	С						
Ž.	d						
Ξ	e						
Program Serwce Revenue	f	All other program service revenue					
<u>ک</u>	_	Total Add lines 25, 25	b.	68,487			
	g 3	Total. Add lines 2a-2f		68,487			
	3	Investment income (including dividends, inter	rest	222,190			222,190
	_	and other similar amounts)	[]	222,130			222,130
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties	▶				
	6-	.,	Personal				
	6a _	Gross rents Less rental					
	Ь	expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	🕨				
		(ı) Securities (ii)) O ther				
	7a	Gross amount 1,429,201					
		from sales of assets other					
		than inventory					
	Ь	Less cost or 1,154,509 other basis and					
	_	sales expenses Gain or (loss) 274,692					
	С .	` '	▶	274,692			274,692
	d	Net gain or (loss)		274,092			274,092
Other Revenue	8a	Gross income from fundraising events (not including \$ 284,092 of contributions reported on line 1c) See Part IV, line 18					
Œ		a	45,080				
重	ь	Less direct expenses b	100,974				
ŏ	С	Net income or (loss) from fundraising events		-55,894			-55,894
	9a	Gross income from gaming activities See Part IV, line 19	-				
	ь	Less direct expenses b					
	c	Net income or (loss) from gaming activities .					
	10a	Gross sales of inventory, less returns and allowances .					
	b c	Less cost of goods sold b Net income or (loss) from sales of inventory					
			ess Code				
	11a	MISCELLANEOUS INCOME	900099	22,806	22,806		
	b						
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d		22,806			
	12	Total revenue. See Instructions	•	1,395,858	91,293	0	440,988

Part IX Statement of Functional Expenses

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

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

	heck if Schedule O contains a response to any question in this Part IX ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	144,723	144,723		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	18,156	18,156		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	249,582	83,358	108,647	57,577
7	Other salaries and wages	228,840	168,909	3,877	56,054
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	19,263	13,821	383	5,059
9	Other employee benefits	34,187	22,039	893	11,255
10	Payroll taxes	81,526	52,863	393	28,270
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,675		1,675	
c	Accounting	22,145		22,145	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	36,328		36,328	
g	Other	9,373		9,373	
12	Advertising and promotion	49,235	49,235		
13	Office expenses	19,429		19,429	
14	Information technology	43,051	43,051		
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	12,670		12,670	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	7,207		7,207	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	PUBLIC PROGRAMS	138,627	138,627		
b	EXHIBITS	109,639	109,639		
c	EDUCATION	49,072	49,072		
d	FUNDRAISING OTHER DIREC	36,644			36,644
e					•
f	All other expenses	95,193	84,975	1,102	9,116
25	Total functional expenses. Add lines 1 through 24f	1,406,565	978,468	224,122	203,975
26	Joint costs. Check here ► if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	,,	-,		rm 990 (2011)

_ Pa	irt X	Balance Sheet				
			Begin	(A) ning of year		(B) End of year
	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		758,550	2	514,807
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, key e highest compensated employees Complete Part II of	mployees, and			
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4 persons described in section 4958(c)(3)(B). Complete Part II of	958(f)(1)) and			
		Schedule L			6	
Assets	7	Notes and loans receivable, net			7	
8	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>				
	ь	Less accumulated depreciation 10b			10c	
	11	Investments—publicly traded securities		8,385,205	11	9,532,644
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		9,143,755	16	10,047,451
	17	Accounts payable and accrued expenses .			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
10	21	Escrow or custodial account liability Complete Part IV of Schedule D .			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified				
흕		persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third and other liabilities not included on lines 17-24) Complete Part X of S			25	
	26	D		0	25	0
	26	Total liabilities. Add lines 17 through 25	27		26	
φ		through 29, and lines 33 and 34.	es 27			
ž	27	Unrestricted net assets		4,077,507	27	4,785,290
<u>15</u>	28	Temporarily restricted net assets		1,613,100	28	1,809,013
	29	Permanently restricted net assets		3,453,148		3,453,148
r Fund Balance		Organizations that do not follow SFAS 117, check here ► and complines 30 through 34.	lete	<u> </u>		· · ·
ō	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
3 S	32	Retained earnings, endowment, accumulated income, or other funds	· · ·		32	
	33	Total net assets or fund balances	 	9,143,755		10,047,451
Ŋĕţ	34	Total liabilities and net assets/fund balances		9 143 755	-	10,047,451

Par	Check if Schedule O contains a response to any question in this Part XI			.┏		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1 3	395,858	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,406,56			
3	Revenue less expenses Subtract line 2 from line 1	3			-10,70	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4					
5	Other changes in net assets or fund balances (explain in Schedule O)	5		g	14,403	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		10,0	047,45	
Par	T XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			দ		
1	Accounting method used to prepare the Form 990			Yes	No	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No	
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes		
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		2c	Yes		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued				
	▼ Separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b			

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As Filed Data -

DLN: 93493045008463

OMB No 1545-0047

2011

Open to Public
Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

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

Employer identification number

THE HARRY S TRUMAN LIBRARY INSTITUTE 43-6042632 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		organızatı col (ı) of	(v) d you notify the irganization in col (i) of your support? (vi) Is the organization in col (i) organized in the U S?		on in anized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

Support Schedule for Organizations Described in IRC 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.)

	under Part III. If the	e organization f	ails to qualify ι	ınder the tests	listed below, ple	ase co	<u>mplete F</u>	art III.)
	ection A. Public Support		,	_				
Cal	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,183,675	1,887,96	824,416	1,966,647		863,577	6,726,275
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4 5	Total. Add lines 1 through 3 The portion of total contributions	1,183,675	1,887,96	824,416	1,966,647		863,577	6,726,275
	by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							1,707,226
6	Public Support. Subtract line 5 from line 4							5,019,049
S	ection B. Total Support		1		,			
Cal	endar year (or fiscal year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	011	(f) Total
7	beginning in) A mounts from line 4	1,183,675	1,887,960	824,416	1,966,647		863,577	6,726,275
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	256,567	154,536	172,578	213,585		222,190	1,019,456
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	19,332	39,950	31,263	66,400		67,886	224,831
11	Total support (Add lines 7 through 10)							7,970,562
12	Gross receipts from related activiti					12		
13	First Five Years If the Form 990 is check this box and stop here	for the organization	on's first, second	, thırd, fourth, or f	ıfth tax year as a !	501(c)(3	;) organız	ration, ▶┌
	ection C. Computation of Pub							
14	Public Support Percentage for 201:			11 column (f))		14		62 970 %
15	Public Support Percentage for 2010) Schedule A , Pai	rt II, line 14			15		61 780 %
	33 1/3% support test—2011. If the and stop here. The organization qua 33 1/3% support test—2010. If the box and stop here. The organization	ilifies as a publicl organization did	y supported orga not check the bo	nization x on line 13 or 16				► ▽
17a	10%-facts-and-circumstances test- is 10% or more, and if the organiza in Part IV how the organization mee organization	–2011. If the orga tion meets the "fa	anization did not a acts and circums	check a box on lin tances" test, che	ck this box and st	op here.	Explain	ed ▶厂
b	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organiza	nization meets the	e "facts and circu	mstances" test, o	check this box and	stop he	ere.	
18	supported organization Private Foundation If the organizat instructions	ion did not check	a box on line 13	. 16a, 16b, 17a oı	r 17b, check this I	box and	see	►□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).								
	Facts And Circumstances Test								
	Explanation								

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493045008463

OMB No 1545-0047

Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number THE HARRY S TRUMAN LIBRARY INSTITUTE 43-6042632 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶_ Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year -

- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

Part	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	<u>easur</u>	<u>es, or 0</u>	<u>ther</u>	Similar	Asse	ts (cc	ntınued)
3	Using the organization's accession and other items (check all that apply)	r records, check ar	y of th	ne foll	lowing t	hat are	a significa	ant us	e of its co	llection	1	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams				
b	Scholarly research		e	Γ	Other							
С	Preservation for future generations											
4	Provide a description of the organization's c Part XIV	ollections and expla	aın hov	w the	y furthe	r the or	ganızatıon	's exe	empt purpo	se in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								lar	Г	Yes	□ No
Par	Part IV, line 9, or reported an ar	ements. Compl	ete ıf	the	organı	zation			es" to For	m 990),	•
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						other ass	ets n	ot	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ving t	able		Г			Amou	ınt	
c	Beginning balance						F	1c		Aillou		
d	Additions during the year						 	1d				
e	Distributions during the year						 	1e				
f	Ending balance						 	1f				
2a	Did the organization include an amount on F	orm 000 Dort V !	LA 717				L				Yes	□ No
	-	•	ie Zīr							,	165	1 140
	If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete		n 200		od "Vo	a" to Ec	rm 000	Dart	TV line	10		
Pa	Endowment Funds. Complete	(a)Current Year)Prior \			Years Back		Three Years E		:)Four Y	ears Back
1a	Beginning of year balance	5,347,124	<u> </u>		276,067	(-)	4,877,32	_	4,520		7	
ь	Contributions	7,526			200,848			0	276	,254		
c	Investment earnings or losses	865,586		-	108,655		478,68	1	171	,169		
d	Grants or scholarships											
e	Other expenditures for facilities and programs	104,341					60,91	0	75	,981		
f	Administrative expenses	21,418			21,136		19,02	6	14	,701		
g	End of year balance	6,094,477		5,	347,124		5,276,06	7	4,877	,322		
2	Provide the estimated percentage of the year	r end balance held	as							<u> </u>		
а	Board designated or quasi-endowment 🕨	22 030 %										
b	Permanent endowment > 56 660 %											
c	Term endowment ► 21 310 %											
3a	Are there endowment funds not in the posse	ssion of the organiz	zation	that a	are held	and ad	ministere	d for t	he			
	organization by								_		Yes	No
	(i) unrelated organizations									3a(i)	Yes	
	(ii) related organizations								ļ	3a(ii)	<u> </u>	No
	If "Yes" to 3a(II), are the related organization	•						•	[3b		
4	Describe in Part XIV the intended uses of the											
Par	t VI Land, Buildings, and Equipmo	ent. See Form 99	€0, Pa	art X	, line 1	0.	1				1	
	Description of property				a) Cost o		(b) Cost or basis (ot		(c) Accum deprecia		(d) B	ook value
1a	Land											
b	Buildings											
c	Leasehold improvements											
d	Equipment											
e	Other	<u> </u>										
Tota	I. Add lines 1a-1e <i>(Column (d) should equal F</i>	orm 990, Part X, colu	mn (B,), line	10(c).)				🕨			0
									Schedu	ıle D (F	orm 9	90) 2011

Pari VIII Investments—Other Securities. See	Form 990, Part X, line 1.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(5)200. Talac	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
		12
Part VIII Investments—Program Related. See	Porm 990, Part X, line	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	-	Cost or end-or-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	
(a) Descrip	otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	25.)	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
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1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
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1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	

I	Identifier Return Reference Explanat	ion	
Par	mplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P t V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete litional information		
	rt XIV Supplemental Information		
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,406,565
c	Add lines 4a and 4b	4c	0
b	Other (Describe in Part XIV)]	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]	
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
3	Subtract line 2e from line 1	3	1,406,565
e	Add lines 2a through 2d	2e	0
d	Other (Describe in Part XIV)	1	
c	Other losses	1	
b	Prior year adjustments	1	
a	Donated services and use of facilities		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	 	
1	Total expenses and losses per audited financial statements	1	1,406,565
Par	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per l	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,395,858
c	Add lines 4a and 4b	4c	0
b	Other (Describe in Part XIV)	1	
a	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	•	1,393,636
3	Subtract line 2e from line 1	3	1,395,858
u e	Add lines 2a through 2d	2e	914,403
c d	Other (Describe in Part XIV) 2d		
b	Donated services and use of facilities		
a	Net unrealized gains on investments		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
1	Total revenue, gains, and other support per audited financial statements	1	2,310,261
	TXII Reconciliation of Revenue per Audited Financial Statements With Revenue		
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	903,696
9	Total adjustments (net) Add lines 4 - 8	9	914,403
8	Other (Describe in Part XIV)	8	
7	Prior period adjustments	7	
6	Investment expenses	6	
5	Donated services and use of facilities	5	
4	Net unrealized gains (losses) on investments	4	914,403
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-10,707
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,406,565
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,395,858
	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	11115	

Part XIV Supplemental In	formation	
		s 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, art XIII, lines 2d and 4b Also complete this part to provide any
Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE INTENDED PURPOSE OF THE ENDOWMENT IS TO CONTINUE TO PROVIDE CONTINUOUS SUPPORT TO THE INSTITUTE AND PROMOTE THE LEGACY OF HARRY S TRUMAN THE INSTITUTE HAS ADDPTED INVESTMENT AND SPENDING POLICIES FOR RIDOWMENT ASSETS THAT ATTEMPT TO PRESERVE AND ENHANCE THE PURCHASING POWER OF THE ENDOWMENT ENDOWMENT ASSETS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED ENDOWMENT FUNDS THE INSTITUTE MUST HOLD IN PERPETUITY OR FOR DONOR-SPECIFIED PERIODS, AS WELL AS THOSE OF BOARD DESIGNATED ENDOWMENT FUNDS UNDER THE INSTITUTE'S POLICIES, ENDOWMENT ASSETS ARE INVESTED IN A MANNER THAT IS INTENDED TO PRODUCE A MODERATE RETURN WHILE ASSUMING A MINIMAL LEVEL OF INVESTMENT RISK THE INSTITUTE EXPECTS ITS ENDOWMENT FUNDS TO PROVIDE AN AVERAGE RATE OF RETURN OF NO LESS THAN THE RATE OF INFLATION AS MEASURED BY THE CONSUMER PRICE INDEX PLUS 4% ACTUAL RETURNS IN ANY GIVEN YEAR MAY VARY FROM THIS AMOUNT THE INSTITUTE HAS A POLICY (THE SPENDING POLICY) OF APPROPRIATING FOR EXPENDITURE EACH YEAR THE REALIZED EARNINGS AND INTEREST INCOME FOR THE BOARD DESIGNATED ENDOWMENT STED SHOWMENT SO THE BOARD DESIGNATED ON AN ANNUAL BASIS THE INVESTMENT INCOME FROM THE BOARD DESIGNATED ENDOWMENT NET ASSETS TO BE EXPENDED ON AN ANNUAL BASIS THE INVESTMENT INCOME FROM THE BOARD DESIGNATED ENDOWMENT NET ASSETS TO BE EXPENDED ON AN ANNUAL BASIS THE INVESTMENT INCOME FROM THE BOARD DESIGNATED ENDOWMENT NET ASSETS TO BE EXPENDED IN AN EXPENDED IN ACCORDANCE WITH THE BOARD DESIGNATED ENDOWMENT THE INSTITUTE FOR ITS GENERAL PURPOSES THE REMAINING 75% CORPUS IS HELD IN A PERMANENTLY RESTRICTED MONTH THE INSTITUTE FOR ITS GENERAL PURPOSES THE REMAINING 75% CORPUS IS HELD IN A PERMANENTLY RESTRICTED ENDOWMENT PER THE ESTATE GIFT WAS USED BY THE INSTITUTE FOR ITS GENERAL PURPOSES THE THE INSTITUTE FOR ITS GENERAL PURPOSES THE INSTITUTE FOR ITS BUDGET, FINANCE AND NESSEMENT COMMENT FUND MENT THE INSTITUTE IS EXECUTIVE COMMENT THE INSTITUTE IS ALSO UNRE

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As Filed Data -

DLN: 93493045008463

OMB No 1545-0047

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

IHE	HARRY S IRUMAN LIBRARY INS	SIIIUIE			43-6042632	
Pa	rt I General Information "Yes" to Form 990, Par			e United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the d					
	assistance, the grantees' elig					
	the grants or assistance? . $% \left(1\right) =\left(1\right) \left(1$					✓ Yes
2	For grantmakers. Describe in Pa United States	rt V the organız	atıon's procedur	es for monitoring the use	e of grant funds outside tl	ne
3	Activites per Region (Use Part V	V ıf addıtıonal s	pace is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
32	Sub-total	0	0			0
	Total from continuation sheets	0				0
	to Part I Totals (add lines 3a and 3b)	0	0			0

Pai	Part IV,	line 15, for any	sistance to Organ recipient who recesspace is needed.	nizations or Entiti erved more than \$5,	es Outside the Ur ,000. Check this box	nited States. Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nui	mber of other o	organizations or en	tities					(Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

Use Part V II	additional space is n	eeueu.					_
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
RESEARCH	EUROPE (INCLUDING ICELAND & GREENLAND)	3	15,656	CHECK			
RESEARCH	NORTH AMERICA	1	2,500	CHECK			
					1		
						Sched	lule F (Form 990) 2011

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	┍	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	┍	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	No

Schedule F (Form 990) 2011

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE US		SCHEDULE F, PART I, LINE 2 AS PART OF OUR MISSION, TRUMAN LIBRARY INSTITUTE GRANTS & AWARDS ARE GIVEN FOR THE PURPOSE OF SUPPORTING SCHOLARSHIP BASED ON SOME ASPECT OF THE LIFE AND CAREER OF HARRY S TRUMAN OR OF THE PUBLIC AND FOREIGN POLICY ISSUES WHICH WERE PROMINENT DURING THE TRUMAN ADMINISTRATION SELECTION IS MADE BY THE INSTITUTE'S COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCATION FUNDING DECISIONS, VIA AN APPLICATION PROCESS, ARE BASED ON QUALITY, ORIGINALITY, SIGNIFICANCE OF THE PROJECT AND ITS RELATIONSHIP TO THE EXISTING TRUMAN HISTORIOGRAPHY, AND TWO LETTERS OF REFERENCE RESEARCH GRANTS REQUIRE TRAVEL TO THE TRUMAN LIBRARY FOR STUDY OF ITS ARCHIVAL COLLECTIONS ONE-TIME PAYMENTS ARE DISPERSED DIRECTLY AND PAYABLE TO THE AWARDEES UPON COMPLETION OF THE RESEARCH TRIP AND DO NOT REQUIRE ANY FURTHER MONITORING DECISIONS REGARDING SELECTION OF DISSERTATION YEAR FELLOWSHIP AND SCHOLAR'S AWARD WINNERS ARE MADE VIA A SIMILAR APPLICATION PROCESS THESE AWARDS ARE DISPERSED DIRECTLY AND PAYABLE TO THE AWARDEES IN TWO INSTALLMENTS AWARDEES ARE REQUIRED TO SUBMIT A PROGRESS REPORT ON THE WORK DONE NO LATER THAN SIX MONTHS FROM ISSUANCE OF THE SECOND INSTALLMENT THESE AWARDEES AGREE TO THE STIPULATION TO PROVIDE THE TRUMAN LIBRARY WITH COPIES OF ANY PUBLICATION RESULTING FROM RESEARCH SUPPORTED BY ONE OF ITS GRANTS OR AWARDS THE HARRY S TRUMAN BOOK AWARD IS GIVEN IN RECOGNITION OF THE BEST BOOK PUBLISHED WITHIN A TWO-YEAR PERIOD THAT DEALS PRIMARLY AND SUBSTANTIALLY WITH THE LIFE AND CAREER OF HARRY S TRUMAN OR OF THE PUBLIC AND FOREIGN POLICY ISSUES WHICH WERE PROMINENT DURING THE TRUMAN ADMINISTRATION PUBLISHERS ARE REQUIRED TO SUBMIT FIVE COPIES OF AN APPROPRIATE ENTRY TO THE COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCATION FOR EVALUATION AND AWARD SELECTION AWARDS ARE GIVEN IN EVEN-NUMBERED YEARS ONE-TIME PAYMENTS ARE DISPERSED DIRECTLY AND PAYABLE TO THE AWARDEES AND REQUIRE NO FURTHER MONITORING

Schedule F (Form 990) 2010

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SCHEDULE G

Department of the Treasury

Internal Revenue Service

Т

(Form 990 or 990-EZ)

As Filed Data -

DLN: 93493045008463

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

2011

Open to Public Inspection

me of the organization	DV INCTITUTE				Employ	er identification number
IE HARRY S TRUMAN LIBRA	KIINSIIIUIE				43-604	12632
art I Fundraising Ac	tivities. Complet	te if the o	organiza	tion answered "Yes"	to Form 990, Pa	art IV, line 17.
Indicate whether the orga	nızatıon raısed funds	s through a	any of the	following activities Ch	eck all that apply	
Mail solicitations			e			
Internet and e-mail so	olicitations		f	☐ Solicitation of go	vernment grants	
Phone solicitations g Special fundraising			ng events			
☐ In-person solicitation	s					
Did the organization have or key employees listed in	n Form 990, Part VII	I) or entity	ın conne	ction with professional	fundraising servic	ces? Yes
If "Yes," list the ten higher to be compensated at leas						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount par (or retained b fundraiser liste col (i)	oy) (or retained by)
		Yes	No			
:al			•			
List all states in which the licensing	organization is regi	stered or	licensed t	o solicit funds or has b	I een notified it is e	xempt from registration or

Par	t II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1 WILD ABOUT	(b) Event #2	(c) O ther Events	(d) Total Events (Add col (a) through col (c))
			(event type)	(event type)	(total number)	
φ	_		, , , , , ,	,		220 172
Revenue	1 2	Gross receipts Less Charitable	329,172			329,172
준	_	contributions	284,092	2		284,092
	3	Gross income (line 1 minus line 2)	45,080)		45,080
	4	Cash prizes				
ا ي	5	Non-cash prizes				
jage	6	Rent/facility costs				
Expenses	7	Food and beverages	53,778	3		53,778
Direct	8	Entertainment				
\$	9	Other direct expenses .	47,196	5		47,196
	10	Direct expense summary Add lin	es 4 through 9 ın columr	ı(d)		(100,974)
	11	Net income summary Combine li	nes 3 and 10 ın column (d)	🕨	-55,894
Par	· III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	irt IV, line 19, or rep	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1 (Gross revenue				
စ္	2	Cash prizes				
benses.	3	Non-cash prizes				
Direct Ex	4	Rent/facility costs				
	5 (Other direct expenses				
	6 '	Volunteer labor	Г Yes Г No	☐ Yes	Г Yes Г No	
	7	- Direct expense summary Add lines	s 2 through 5 in column (d)		()
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)		
						_1
9 a b	Is th	er the state(s) in which the organiza ne organization licensed to operate No," Explain	gaming activities in eac	h of these states?		
						1
	Were	e any of the organization's gaming l	licenses revoked, susper	nded or terminated during	the tax year?	

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity		
	formed to administer charitable (gamıng?		· · · · F Yes F	- No
13	Indicate the percentage of gamii	ag activity operated in		1 1	
a				13a	
b					
14		f the person who prepares the organiza			
	Name ►				
	Address ►				
	revenue?	ntract with a third party from whom the			- No
	amount of gaming revenue retained by the third party 🕨 \$				
С	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	\$ \$			
	Description of services provided	>			
17 a		Employee er state law to make charitable distribu		· · ·	- No
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-
_		activities during the tax year > \$		hadala C /	
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see	
	Identifier	ReturnReference	Explana	tion	
		•	•		

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Schedule I

(Form 990)

Department of the Treasury

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

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

OMB No 1545-0047

DLN: 93493045008463

Inspection

Internal Revenue Service Name of the organization Employer identification number THE HARRY'S TRUMAN LIBRARY INSTITUTE 43-6042632 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other)

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) RESEARCH GRANT	22	144,723			
1					

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

PROCEDURE FOR MONITORING GRANTS IN THE U S Return Reference

PART I, LINE 2

Identifier

Explanation

SCHEDULE I, PART I, LINE 2 AS PART OF OUR MISSION, TRUMAN LIBRARY INSTITUTE GRANTS & AWARDS ARE GIVEN FOR THE PURPOSE OF SUPPORTING SCHOLARSHIP BASED ON SOME ASPECT OF THE LIFE AND CAREER OF HARRY S TRUMAN OR OF THE PUBLIC AND FOREIGN POLICY ISSUES WHICH WERE PROMINENT DURING THE TRUMAN ADMINISTRATION SELECTION IS MADE BY THE INSTITUTE'S COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCATION FUNDING DECISIONS, VIA AN APPLICATION PROCESS, ARE BASED ON QUALITY, ORIGINALITY, SIGNIFICANCE OF THE PROJECT AND ITS RELATIONSHIP TO THE EXISTING TRUMAN HISTORIOGRAPHY, AND TWO LETTERS OF REFERENCE RESEARCH GRANTS REQUIRE TRAVEL TO THE TRUMAN LIBRARY FOR STUDY OF ITS ARCHIVAL COLLECTIONS ONE-TIME PAYMENTS ARE DISPERSED DIRECTLY AND PAYABLE TO THE AWARDEE UPON COMPLETION OF THE RESEARCH TRIP AND DO NOT REQUIRE ANY FURTHER MONITORING DECISIONS REGARDING SELECTION OF DISSERTATION YEAR FELLOWSHIP AND SCHOLAR'S AWARD WINNERS ARE MADE VIA A SIMILAR APPLICATION PROCESS THESE AWARDS ARE DISPERSED DIRECTLY AND PAYABLE TO THE AWARDEE IN TWO INSTALLMENTS AWARDEES ARE REQUIRED TO SUBMIT A PROGRESS REPORT ON THE WORK DONE NO LATER THAN SIX MONTHS FROM ISSUANCE OF THE SECOND INSTALLMENT AWARDEES AGREE TO THE STIPULATION TO PROVIDE THE TRUMAN LIBRARY WITH COPIES OF ANY PUBLICATION RESULTING FROM RESEARCH SUPPORTED BY ONE OF ITS GRANTS OR AWARDS TRUMAN-KAUFFMAN SCHOLAR FELLOWSHIPS - THIS PROGRAM OFFERS A MAJOR NON-RESIDENT FELLOWSHIP TO SENIOR SCHOLARS WHO ARE SPECIFICALLY WORKING ON AREAS OF ECONOMIC DEVELOPMENT AND MODERNIZATION PARTICULARLY IN THE WAKE OF WAR, COLONIALISM AND NATURAL DISASTERS USING PRESIDENT TRUMAN'S MARSHALL PLAN AND POINT FOUR PROGRAM AS SPRINGBOARDS THESE FELLOWSHIPS FREE SCHOLARS FROM THEIR ACADEMIC RESPONSIBILITIES FOR A YEAR TO GIVE THEM TIME TO MAKE SIGNIFICANT PROGRESS ON THE COMPLETION OF A MAJOR BOOK AWARD SELECTION IS MADE BY THE INSTITUTE'S COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCATION FUNDING DECISIONS, VIA AN APPLICATION PROCESS, ARE BASED ON QUALITY AND THE SIGNIFICANCE OF THE PROJECT WITHIN THE CONTEXT OF THE EXISTING SCHOLARLY LITERATURE OTHER REQUIREMENTS INCLUDE A PROJECT DESCRIPTION, BIBLIOGRAPHY, THREE LETTERS OF REFERENCE AND AN INSTITUTIONAL SUPPORT STATEMENT IF AWARDED A TRUMAN-KAUFFMAN SCHOLAR FELLOWSHIP, A SCHOLAR AGREES TO PUBLISH A SIGNIFICANT WORK OF SCHOLARSHIP STEMMING FROM HIS OR HER RESEARCH, PREFERABLY A BOOK TO BE PUBLISHED, CONTINGENT UPON THE STANDARD PEER-REVIEW PROCESS, BY CAMBRIDGE UNIVERSITY PRESS SCHOLARS ALSO AGREE TO PRESENT THEIR FINDINGS THROUGH THE TRUMAN-KAUFFMAN SCHOLARS PROGRAM'S PUBLIC COMPONENT, WHICH MAY INCLUDE A COMBINATION OF ACADEMIC CONFERENCES AND PUBLIC LECTURES AWARDEES AGREE TO PROVIDE THE TRUMAN LIBRARY WITH COPIES OF ANY PUBLICATION RESULTING FROM RESEARCH SUPPORTED BY ONE OF THESE FELLOWSHIPS THESE AWARDS ARE DISPERSED DIRECTLY AND PAYABLE TO THE AWARDEE OR THEIR INSTITUTION IN TWO INSTALLMENTS AWARDEES ARE REQUIRED TO SUBMIT A PROGRESS REPORT ON THE WORK DONE NO LATER THAN NINE MONTHS FROM ISSUANCE OF THE SECOND INSTALLMENT THE HARRY S TRUMAN BOOK AWARD IS GIVEN IN RECOGNITION OF THE BEST BOOK PUBLISHED WITHIN A TWO-YEAR PERIOD THAT DEALS PRIMARILY AND SUBSTANTIALLY WITH THE LIFE AND CAREER OF HARRY S TRUMAN OR OF THE PUBLIC AND FOREIGN POLICY ISSUES WHICH WERE PROMINENT DURING THE TRUMAN ADMINISTRATION PUBLISHERS ARE REQUIRED TO SUBMIT FIVE COPIES OF AN APPROPRIATE ENTRY TO THE COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCATION FOR EVALUATION AND AWARD SELECTION AWARDS ARE GIVEN IN EVEN-NUMBERED YEARS ONE-TIME PAYMENTS ARE DISPERSED DIRECTLY AND PAYABLE TO THE AWARDEE AND REQUIRE NO FURTHER MONITORING

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493045008463

2011

OMB No 1545-0047

Open to Public
Inspection

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Name of the organization
THE HARRY S TRUMAN LIBRARY INSTITUTE
43-6042632

ldentifier	Return Reference	Explanation
NEW PROGRAM SERVICES	FORM 990, PART III, LINE 2	TRUMAN-KAUFFMAN SCHOLARS AND THE EXPANDED PARTNERSHIP WITH THE KANSAS CITY PUBLIC LIBRARY WAS MENTIONED LAST YEAR, BUT MORE INFORMATION IS PROVIDED THIS YEAR SEE PROGRAM SERVICE ACCOMPLISHMENTS EDUCATIONAL OUTREACH

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	AN INDEPENDENT ACCOUNTING FIRM PREPARES AND REVIEWS THE 990 THE 990 IS THEN REVIEWED BY THE ORGANIZATION'S BUDGET, FINANCE, AND INVESTMENT COMMITTEE AND ALSO ALL ACCOUNTING PERSONNEL ANY QUESTIONS AND CONCERNS THE ORGANIZATION'S BUDGET, FINANCE, AND INVESTMENT COMMITTEE AND ACCOUNTING PERSONNEL HAVE ARE ADDRESSED AND ANY CORRECTIONS OR CLARIFICATIONS THAT NEED TO BE MADE ARE MADE THE FINAL FORM 990 WITH ALL REQUIRED SCHEDULES IS THEN PROVIDED TO ALL VOTING MEMBERS OF THE BOARD PRIOR TO FILING THE 990

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	AT THE TIME OF HIRE OR ELECTION (IN THE CASE OF DIRECTORS) AND ANNUALLY THEREAFTER, THE OFFICERS, DIRECTORS, AND KEY EMPLOYEES SHALL PROVIDE THE APPLICABLE CONFLICT OF INTEREST DISCLOSURES WHICH SHALL BE COMPLETED TO IDENTIFY ANY RELATIONSHIPS, POSITIONS, OR CIRCUMSTANCES IN WHICH IT IS BELIEVED A CONFLICT MAY ARISE. IF A CONFLICT ARISES, THE OFFICER, DIRECTOR, OR KEY EMPLOYEE ABSTAINS FROM THE VOTE OF THE CONFLICTED TRANSACTION. AN APPROPRIATE REPORT SHALL BE SUBMITTED TO THE BOARD'S EXECUTIVE COMMITTEE CONCERNING ANY CONFLICT OF INTEREST DISCLOSED FOR MONITORING.

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE TRUMAN LIBRARY INSTITUTE UTILIZES THE FOLLOWING 1 COLLECTION AND USE OF COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS OR INSTITUTIONS WHICH CAN INCLUDE LOCAL AND REGIONAL NONPROFITS AND MUSEUMS, AS WELL AS REGIONAL AND NATIONAL PRESIDENTIAL LIBRARY FOUNDATIONS BASE SALARIES WILL BE POSITIONED TO QUALIFICATIONS, EXPERIENCE, PERFORMANCE AND TENURE 2 THE BOARD'S EXECUTIVE COMMITTEE, OR AN AD HOC COMMITTEE ON COMPENSATION APPOINTED BY THE BOARD CHAIR, WILL DETERMINE THE TOTAL COMPENSATION PACKAGE FOR THE EXECUTIVE DIRECTOR THE EXECUTIVE DIRECTOR SHALL MAKE RECOMMENDATIONS FOR THE SALARIES AND INCENTIVE PAYMENTS FOR OTHER EXECUTIVES OR SALARIED EMPLOYEES THESE AMOUNTS WILL BE PROVIDED ANNUALLY TO THE AD HOC COMMITTEE ON COMPENSATION FOR REVIEW AND APPROVAL THE AD HOC COMMITTEE WILL REPORT THE AGGREGATE INCREASES TO EXECUTIVE COMMITTEE AND THE BOARD OF DIRECTORS FOR ITS APPROVAL VIA THE ANNUAL FISCAL YEAR BUDGET PROCESS OR ANY SUBSEQUENT BUDGET AMENDMENT REQUESTS THAT MAY FOLLOW 3 THE INSTITUTE WILL RETAIN CONCURRENT WRITTEN OR ELECTRONIC DOCUMENTATION OF COMPENSATION DECISIONS AS THEY ARE MADE THAT WILL INCLUDE THE FOLLOWING INFORMATION A) THE TERMS OF THE COMPENSATION AND THE DATE IT WAS APPROVED, B) THE COMPARABILITY DATA, C) THE MEMBERS OF THE EXECUTIVE COMMITTEE WHO WERE PRESENT DURING THE DEBATE AND THOSE WHO VOTED TO APPROVE A COMPENSATION DECISION, D) ANY ACTIONS TAKEN WITH RESPECT TO THE INVOLVEMENT OF A MEMBER WHO MAY HAVE A CONFLICT OF INTEREST

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST

ldentifier	Return Reference	Explanation			
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 914,403			

ldentifier	Return Reference	Explanation
ACCOUNTING METHOD USED TO PREPARE FORM 990 AND AUDITED FINANCIAL STATEMENTS	FORM 990, PART IV, LINE 12 & PART XI, LINE 2B & 2C	THE FINANCIAL STATEMENTS WERE AUDITED, HOWEVER, THE FINANCIAL STATEMENTS WERE PREPARED ON THE MODIFIED CASH BASIS OF ACCOUNTING, WHICH IS A COMPREHENSIVE BASIS OF ACCOUNTING OTHER THAN ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA. THE ORGANIZATION DOES HAVE A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT ACCOUNTING METHOD USED TO PREPARE FORM 990 FORM 990, PART XI, LINE 1 THE ACCOUNTING METHOD USED TO PREPARE THE FORM 990 IS THE MODIFIED CASH BASIS OF ACCOUNTING. THIS IS THE SAME METHOD IN WHICH THE FINANCIAL STATEMENTS OF THE ORGANIZATION ARE PREPARED.

Identifier	Return Reference	Explanation							
		FORM 990, PART XII, LINE 2C THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT OR SELECTION PROCESS							

Additional Data

Software ID: Software Version:

EIN: 43-6042632

Name: THE HARRY S TRUMAN LIBRARY INSTITUTE

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 290,026 including grants of \$) (Revenue \$

PUBLIC RELATIONS AND ADVERTISING, DOCUMENTARY ACCESS, VOLUNTEER & INTERN PROGRAM, AND PREVENTATIVE MAINTENANCE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per		(tion that a		/)			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			
CAROL ANDERSON DIRECTOR	1 00	х						0	0	0
ALAN L ATTERBURY DIRECTOR	1 00	х						0	0	0
MORGAN A BURDEN EXECUTIVE DIRECTOR/EX OFFICIO DIRECTOR	40 00	х		х				113,686	0	25,371
CAROLYN CALDWELL DIRECTOR	1 00	х						0	0	0
KIRK W CARPENTER DIRECTOR	1 00	Х						0	0	0
CLIFTON TRUMAN DANIEL HONORARY CHAIR	1 00	Х						0	0	0
MICHAEL J DEVINE EX OFFICIO DIRECTOR	1 00	Х						0	0	0
JOHN A DILLINGHAM DIRECTOR	1 00	Х						0	0	0
ROBERT P DUNN DIRECTOR	1 00	Х						0	0	0
CHARLES M FOUDREE DIRECTOR	1 00	Х						0	0	0
SAM F HAMRA DIRECTOR	1 00	х						0	0	0
MARY ANN HEISS DIRECTOR	1 00	Х						0	0	0
MARY HUNKELER CHAIRMAN/DIRECTOR	1 00	Х		х				0	0	0
MARY C JOHNSTON DIRECTOR	1 00	Х						0	0	0
HERBERT M KOHN SECRETARY/DIRECTOR	1 00	Х		х				0	0	0
ALLEN L LEFKO DIRECTOR	1 00	Х						0	0	0
JOHN A MACDONALD DIRECTOR	1 00	Х						0	0	0
KENNETH B MCCLAIN DIRECTOR	1 00	Х						0	0	0
THOMAS R MCGEE JR DIRECTOR	1 00	Х						0	0	0
JOHN P MCMEEL DIRECTOR	1 00	Х						0	0	0
LARRY L MCMULLEN DIRECTOR	1 00	Х						0	0	0
ROGER A NOVAK TREASURER/DIRECTOR	1 00	Х		х				0	0	0
JAMES B NUTTER JR DIRECTOR	1 00	Х						0	0	0
CAPPY P POWELL DIRECTOR	1 00	Х						0	0	0
PAGE BRANTON REED DIRECTOR	1 00	x						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours		(tion that a			ıll		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			
JOHN J SHERMAN VICE CHAIR/DIRECTOR	1 00	Х		х				0	0	0
IKE SKELTON DIRECTOR	1 00	Х						0	0	0
BETH K SMITH DIRECTOR	1 00	Х						0	0	0
ELIZABETH T SOLBERG DIRECTOR	1 00	Х						0	0	0
CHARLES S SOSLAND DIRECTOR	1 00	Х						0	0	0
JAMES W SYMINGTON DIRECTOR	1 00	Х						0	0	0
MAURICE A WATSON DIRECTOR	1 00	Х						0	0	0
LISA SULLIVAN DIRECTOR OF FINANCE	40 00			х				66,884	0	13,552