efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493044025297

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2015

OMB No 1545-0047

Department of the Treasury Internal Revenue Service •undations)▶ Do not enter social security numbers on this form as it may be made public

Do not enter social security numbers on this form as it may be made public
 ▶ Information about Form 990 and its instructions is at www IRS qov/form990

Open to Public Inspection

The content between the forecasts of the content between the content b	A F	or the	2015 ca	lendar year, or tax year beginn	ing 10-01-2015 , and ending 09-30-201	6	1			
Description of the property					te					
The process of the	<u> </u>		_				43-60	4263	2	
Application pending Company 24 Company 25 Compan	<u> </u>		um	Doing dusiness as						
The state of the properties o			ated		mail is not delivered to street address) Room/sui	te	. E Telepho	ne num	nber	
F Name and offices of principal officer Schman S					1770		(816)	268-8	3248	
Solid State State State	Ap	plicatio	n pending		untry, and ZIP or foreign postal code		G Gross re	ceipts	\$ 8,837,483	
1 Table -				·	ıpal officer	H(a) Is th	nis a group	returr	n for	
The exampt state State(1) State(1) According State(1) Ac						subc				
Weblite New war transhibstraymistrate and part Market New transhibstraymistrate and part New transhibstraymistraym				,		H(b) Are		nates	Lyes L No	
Website Now furnishing a visual floating property in the property of the property in the	I la	ıx-exen	npt status	✓ 501(c)(3)	(insert no) 4947(a)(1) or 527			a list		
Program Symmatry 13 methy describe the organization's mission or most significant activities 10 PRESERVE AND PROMOTE THE ENDURING LEGACY OF HARRY'S TRUMAN, AMERICA'S 338D PRESIDENT 17 PRESERVE AND PROMOTE THE ENDURING LEGACY OF HARRY'S TRUMAN, AMERICA'S 338D PRESIDENT 17 PRESERVE AND PROMOTE THE ENDURING LEGACY OF HARRY'S TRUMAN, AMERICA'S 338D PRESIDENT 17 PRESERVE AND PROMOTE THE ENDURING LEGACY OF HARRY'S TRUMAN, AMERICA'S 338D PRESIDENT 17 PRESERVE AND PROMOTE THE ENDURING LEGACY OF HARRY'S TRUMAN, AMERICA'S 338D PRESIDENT 17 PRESERVE AND PRESIDENT 18 PRESERVE AND PRESERVE AND PRESERVE AND PRESIDENT 18 PRESERVE AND PRESERVE AND PRESERVE AND PRESIDENT 18 PRESERVE AND PRESERVE AND PRESERVE AND PRESERVE AND PRESIDENT 18 PRESERVE AND PRESERVE A	J W	ebsite	e:► ww	w trumanlıbraryınstıtute org			•		•	
1	K For	m of on	ganızatıon	✓ Corporation Trust Assoc	olation Other ►	L Year of fo	ormation 195			
To PRESERVE AND PROMOTE THE ENDURING LEGACY OF HARRY'S TRUMAN, AMERICA'S 33RD PRESIDENT 2 Check this box ▶ ["if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a)	Pa	rt I	Sum	mary				_		
2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its not assets: 3 Number of voting members of the governing body (Part VI, line 1a)						N AMEDIC	VIC SSDD	DDEC	IDENT	
3 Number of votang members of the governing body (Part VI, line 1a) 3 25	e e	"	O PRESI	ERVE AND PROMOTE THE EN	DURING LEGACT OF HARRY 5 TRUMP	AN, AMERIC	A 5 33KD	PRES	IDENT	
3 Number of votang members of the governing body (Part VI, line 1a) 3 25	anc	-								
3 Number of votang members of the governing body (Part VI, line 1a) 3 25	/em	2 (Check th	nis box ▶ ┌ if the organization (discontinued its operations or disposed o	of more than	25% of its	net a	ssets	
3 Number of votang members of the governing body (Part VI, line 1a) 3 25	69									
Part Total	× 5			-	- ' '		-			
Part Total	tte			· -			-			
Part Total	¥.							_		
Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year	ĕ			•	• •		· · ·	_		
8 Contributions and grants (Part VIII, line 1h)							`.'		0	
9							or Year		Current Year	
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 2,667,219 2,157,226 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		8	Contri	butions and grants (Part VIII,	line 1h)		1,647,4	22	1,455,801	
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 2,667,219 2,157,226 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	eu Cr	9	Progra	am service revenue (Part VIII,	line 2g)	2g)				
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 2,667,219 2,157,226 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3ve5			,	, , , , , ,	· · ·				
12 2,007,217 2,137,226	_			, , , , ,					<u> </u>	
14 Benefits paid to or for members (Part IX, column (A), line 4)		12		revenue—add filles o tillough 1	T (must equal Fait VIII, Column (A), me		2,667,2	19	2,157,226	
Services 15		13	Grants	s and sımılar amounts paıd (Paı	t IX, column (A), lines 1-3)		66,0	09	79,928	
16a Professional fundraising fees (Part IX, column (A), line 11e)		14						0	0	
To ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	&	15			vee benefits (Part IX, column (A), lines		759,9	68	801,145	
To ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	ens.	16a		•	K, column (A), line 11e)			0	0	
To ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	ă	b	Total fu	ındraısıng expenses (Part IX, column (D), line 25) ▶ <mark>267,485</mark>					
19 Revenue less expenses Subtract line 18 from line 12 1,099,827 341,439		17	O ther	expenses (Part IX, column (A)	, lines 11a-11d, 11f-24e)		741,4	15	934,714	
Beginning of Current Year End of Year 20 Total assets (Part X, line 16)				·						
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of officer Date	, <i>u</i> r	19	Reven	ue less expenses Subtract line	e 18 from line 12	•	1,099,8	27	341,439	
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of officer Date	ance of					Beginning	of Current Y	'ear	End of Year	
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of officer Date	Asse Bak	20		•			11,161,2	24	11,899,977	
Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of officer Date	E E								0	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of officer					t line 21 from line 20		11,161,2	24	11,899,977	
Preparer Paid Preparer Use Only MacDonald TREASURER Type or print name and title	Unde	er pena	alties of	perjur y, I declare that I have e						
Sign Here Signature of officer Date			-		mplete Declaration of preparer (other th	ian officer) is	based on a	all info	ormation of which	
Paid Preparer Use Only Point A MacDonald TREASURER Type or print name and title Preparer's signature Suzanne B Kimbrough Preparer's signature Suzanne B Kimbrough Preparer's signature Suzanne B Kimbrough Print/Type preparer's name Suzanne B Kimbrough Firm's name ▶ RubinBrown ШР Firm's eddress ▶ 1200 Main Street Suite 1000 Kansas City, MO 64105 Phone no (816) 472-1122										
Print/Type or print name and title Print/Type preparer's name Suzanne B Kimbrough Preparer Use Only Print/Type preparer's name Suzanne B Kimbrough Preparer's signature Suzanne B Kimbrough Preparer's signature Suzanne B Kimbrough Prim's signature Suzanne B Kimbrough Firm's name RubinBrown LLP Firm's EIN ▶ 43-0765316 Phone no (816) 472-1122	_					L				
Paid Preparer Use Only Suzanne B Kimbrough Firm's name ► RubinBrown LLP Firm's EIN ► 43-0765316 Phone no (816) 472-1122		-								
Preparer Use Only Substitute of Kimbiodyii Self-employed Self-employed Firm's name RubinBrown LLP Firm's EIN 43-0765316 Phone no (816) 472-1122						ate	eck \sqsubset ıf		0005	
Use Only Firm's address ► 1200 Main Street Suite 1000 Kansas City, MO 64105 Phone no (816) 472-1122	Pai	d	_		Suzarine b Killibiougii	sel	f-employed			
Use Only Kansas City, MO 64105		-	;r -		e 1000					
	Use	On	ly ˈ			100	STIE 110 (010)	7/2-1		
	M	the ID	Sidicon						✓Yes No	

Form 990 (2015) Part III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III . Briefly describe the organization's mission

THE HARRY S TRUMAN LIBRARY INSTITUTE, A NONPROFIT 501(C)(3) ORGANIZATION, IS DEDICATED TO THE PRESERVATION, ADVANCEMENT, AND OUTREACH ACTIVITIES OF THE HARRY S TRUMAN LIBRARY AND MUSEUM, ONE OF OUR NATION'S 13 PRESIDENTIAL LIBRARIES OVERSEEN BY THE NATIONAL ARCHIVES AND RECORDS ADMINISTRATION TOGETHER WITH ITS PUBLIC PARTNER, THE TRUMAN LIBRARY INSTITUTE PRESERVES THE ENDURING LEGACY OF AMERICA'S 33RD PRESIDENT TO ENRICH THE PUBLIC'S UNDERSTANDING OF HISTORY, THE PRESIDENCY, PUBLIC POLICY, AND CITIZENSHIP THE INSTITUTE PROVIDES FUNDING AND SUPPORT FOR THE HARRY S TRUMAN LIBRARY AND MUSEUM'S EXHIBITIONS, EDUCATION PROGRAMS, CONFERENCES, FORUMS AND OTHER PUBLIC OUTREACH PROGRAMS

- Did the organization undertake any significant program services during the year which were not listed on Tes √No If "Yes," describe these new services on Schedule O
- Did the organization cease conducting, or make significant changes in how it conducts, any program If "Yes," describe these changes on Schedule O
- Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
- 357,018 including grants of \$) (Expenses \$ 79,928) (Revenue \$ 75.525)

SEE SCHEDULE OEDUCATION HARRY TRUMAN LEFT AMERICA AN ENDURING LEGACY A LEGACY OF VALUES THAT INCLUDE RESPONSIBILITY, LEADERSHIP, DECISIVENESS AND A COMMITMENT TO THE DEMOCRATIC IDEALS THAT MAKE OUR NATION GREAT HE HOPED THAT HIS LIBRARY WOULD GIVE PEOPLE, ESPECIALLY YOUNG PEOPLE, "A BETTER UNDERSTANDING OF THE HISTORY AND NATURE OF THE PRESIDENCY AND THE GOVERNMENT OF THE UNITED STATES" TO FULFILL THIS VISION, THE EDUCATION TEAM AT THE TRUMAN LIBRARY HAS DEVELOPED A RANGE OF OUTSTANDING PROGRAMS THAT ARE GROUNDED IN PROVEN PEDAGOGICAL PRACTICES, DESIGNED TO MEET STATE AND NATIONAL ACADEMIC STANDARDS, AND SERVE AS THE STANDARD FOR OUR NATION'S PRESIDENTIAL LIBRARIES TOTAL STUDENT/TEACHER PARTICIPATION DURING THE 2015-2016 SCHOOL YEAR WAS 42,650 (13 8% INCREASE FROM THE PREVIOUS YEAR) MORE SPECIFICALLY THE WHITE HOUSE DECISION CENTER. THIS PROGRAM GIVES STUDENTS AN EXTENDED, IMMERSIVE, AND INSPIRATIONAL EXPERIENCE AT ONE OF KANSAS CITY'S ICONIC CULTURAL INSTITUTIONS WHILE ALSO PROVIDING THEM WITH A UNIQUE EDUCATIONAL PROGRAM THAT STRENGTHENS MANY CORE SKILLS INSPIRED BY PRESIDENT TRUMAN'S LEGACY OF LEADERSHIP AND DEVELOPED BY NATIONALLY RECOGNIZED EDUCATORS, THIS HANDS-ON HISTORY LAB IS THE TRUMAN LIBRARY'S FLAGSHIP EDUCATION PROGRAM AND THE STANDARD-BEARER FOR EDUCATION PROGRAMS AT PRESIDENTIAL LIBRARIES NATIONWIDE THE WHITE HOUSE DECISION CENTER'S SIMULATIONS IMMERSE STUDENTS IN AMERICAN HISTORY, GOVERNMENT, THE PRESIDENCY AND HIGH-STAKES DECISION MAKING IN A TRULY UNIQUE SETTING - A RECREATION OF THE TRUMAN-ERA WEST WING OF THE WHITE HOUSE TEACHERS HAVE DESCRIBED IT AS ONE OF THE MOST PROFOUND EDUCATIONAL EXPERIENCES IN THEIR STUDENTS IN AMERICAN HISTORY, GOVERNMENT, THE PRESIDENCY AND HIGH-STAKES DECISION MAKING IN A TRULY UNIQUE SETTING - A RECREATION OF THE TRUMAN-ERA WEST WING OF THE WHITE HOUSE TEACHERS HAVE DESCRIBED IT AS ONE OF THE MOST PROFOUND EDUCATIONAL EXPERIENCES IN THEIR STUDENTS ACADEMIC CAREERS A RECORD BREAKING 6,451 PEOPLE (AN INCREASE OF 9 58%) PARTICIPATED IN THE WHITE HOUSE DECISION CENTE ECONOMICALLY CHALLENGED SCHOOL DISTRICTS TO VISIT AND EXPERIENCE THE TRUMAN LIBRARY'S EDUCATIONAL PROGRAMS AND EXHIBITIONS AT LITTLE OR NO COST DURING THE 2015-2016 SCHOOL YEAR, 8,369 STUDENTS BENEFITED FROM THIS PROGRAM GRANT SCHOLARSHIP FUNDS CAN BE USED TO COVER MUSEUM ADMISSIONS, WHITE HOUSE DECISION CENTER FEES, BUS TRANSPORTATION AND SUBSTITUTE TEACHER COSTS GUIDED MUSEUM TOURS THESE DOCENT-LED TOURS ARE OFFERED TO GRADES 4-12 AND INCLUDE A REPLICA OF PRESIDENT TRUMAN'S OVAL OFFICE, PRESIDENTIAL YEARS EXHIBITION, INTERACTIVE DECISION THEATERS, HANDS-ON ACTIVITES IN THE HARRY TRUMAN'S LIFE AND TIMES GALLERY, THE GRAVE SITES OF PRESIDENT AND MRS TRUMAN, PRESIDENT TRUMAN'S WORKING OFFICE, AND TRAVELING AND SPECIAL EXHIBITIONS DURING THE 2015-2016 SCHOOL YEAR, 12,105 STUDENTS (AN INCREASE OF 31%) PARTICIPATED IN THE TRUMAN LIBRARY'S MUSEUM TOUR PROGRAM TRUMAN FOOTLOCKER 6,115 STUDENTS EXPERIENCED THIS POPULAR HANDS-ON CLASSROOM RESOURCE FILLED WITH REPLICAS OF TRUMAN-RELATED ARTIFACTS, PRIMARY DOCUMENTS AND PHOTOGRAPHS THE FOOTLOCKER IS ACCOMPANIED BY AGE APPROPRIATE LESSON PLANS DESIGNED TO TEACH STUDENTS ABOUT THE VARIOUS PHASES OF PRESIDENT TRUMAN'S LIFE NATIONAL HISTORY DAY EACH YEAR, THE TRUMAN LIBRARY ORGANIZES AND HOSTS THE GREATER KANSAS CITY NATIONAL HISTORY DAY COMPETITION ON MARCH 5, 2016, A RECORD-BREAKING 630 STUDENTS COMPETED IN THIS REGIONAL EVENT FIFTEEN ENTRIES PLACED IN THE TOP THREE IN THE MISSOURI STATE CONTEST, TWO ENTRIES PLACED IN THE TOP TEN IN THE NATIONAL FINALS AND ONE OF THOSE STUDENTS PLACED SECOND IN THE NATION ATTENDED A WEEK-LONG EDUCATORS' CONFERENCE THE TRUMAN LIBRARY, JULY 18-22, 2016 CURRICULUM MATERIALS BASED ON THE CONFERENCE WERE DEVELOPED FOR USE IN THE CLASSROOM AND POSTED ON THE TRUMAN LIBRARY'S WEBSITE TO DATE, 362 LESSON PLANS HAVE BEEN POSTED ONLINE READING LIKE A HISTORIAN, FORTY-SEVEN TEACHERS FROM ACROSS THE NATION ATTENDED A WEEK-LONG EDUCATORS' CONFERENCE AT THE TRUMAN LIBRARY'S WEBSITE TO DATE, 362 LESSON PLANS HAVE BEEN POSTED ONLINE READING LIKE A HISTORIAN THE 2015-2016 SCHOOL YEAR, 1, 195 THIRD-GRADERS FROM 19 INDEPENDENCE ELEMENTARY SCHOOLS PARTICIPATED AN EXTENSION OF READING LIKE A HISTORIAN, GEARED TO MIDDLE AND HIGH SCHOOL STUDENTS, IS AN IN-CLASSROOM EXPERIENCE RATHER THAN A MUSEUM-BASED EXPERIENCE THIS EXTENSION WILL BE AN ONGOING PROGRAM ADDITIONAL EDUCATIONAL RESOURCES PROVIDED TO TEACHERS AND STUDENTS INCLUDE CURRICULUM GUIDES, MEDIA LENDING LIBRARY, CLASSROOM PRESENTATIONS, PRESIDENTIAL TRIVIA CONTEST, EDUCATOR WORKSHOPS AND OPEN HOUSE GRANTS AND AWARDS PROGRAM - RESEARCH GRANTS AND HULSTON SCHOLARSHIPS ARE ESSENTIAL TO STUDENTS AND SCHOLARS WHO OTHERWISE MIGHT FIND IT FINANCIALLY DIFFICULT TO TRAVEL TO THE TRUMAN LIBRARY TO CONDUCT THEIR RESEARCH DISSERTATION YEAR FELLOWSHIPS ALLOW GRADUATE STUDENTS TIME AWAY FROM TEACHING TO COMPLETE THEIR MANUSCRIPTS DURING FISCAL YEAR 2016, THE INSTITUTE AWARDED TWENTY-SIX RESEARCH GRANTS, ONE JOHN K HULSTON SCHOLARSHIP, ONE SCHOLAR'S AWARD, TWO DISSERATION YEAR FELLOWSHIPS, AND ONE TRUMAN BOOK AWARD A TOTAL OF \$79,928 WAS EXPENDED THIS FISCAL YEAR ON THE GRANTS AND AWARDS PROGRAM DIGITAL ARCHIVES - FY16 ACCOMPLISHMENTS ARCHIVAL PROCESSING OF MR TRUMAN'S POST-PRESIDENTIAL PAPERS, 1953-1972 12,351 PAGES (33 BOXES) WERE PROCESSED IN FY16 1,313 PHOTOGRAPHS FROM THE LEWIS PARKS PHOTOGRAPH COLLECTION WERE DIGITIZED AND 1,036 HAVE BEEN DESCRIBED DIGITIZATION OF TRUMAN SOUND RECORDINGS POST-PRESIDENTIAL INTERVIEWS OF HARRY TRUMAN CONDUCTED AT THE TRUMAN LIBRARY IN PREPARATION FOR WRITTING HIS MEMOIR MR CITIZEN CAMPAIGN FILMS DIGITIZATION PROJECT IN SELECTING FILMS FOR DIGITAL PRESERVATION, PARTICULAR ATTENTION WAS FOCUSED ON ELECTION FILMS FOR YEARS 1944, 1948, 1952, 1956, AND 1960 THIS DIGITIZATION PROJECT IN SELECTING FILMS FOR DIGITAL PRESERVATION, PARTICULAR ATTENTION WAS FOCUSED ON ELECTION FILMS FOR YEARS 1944, 1948, 1952, 1956, AND 1960 THIS DIGITIZATION PROJECT IN SELECTING FILMS FOR SUPPORTED WITH INSTITUE FUNDING, CONTINUES TO BE A RICH ONLINE ARCHIVAL RESOURCE FOR RESEARCHERS, HISTORIANS, AUTHORS, STUDENTS AND

) (Expenses \$ (Code 203,895 including grants of \$) (Revenue \$ 1,348)

SEE SCHEDULE OPUBLIC OUTREACH PROGRAMS ON HISTORY, POLITICS, AND DEMOCRACY THE TRUMAN LIBRARY INSTITUTE CONTINUES ITS ONGOING MISSION OF DEEPENING THE PUBLIC'S UNDERSTANDING OF THE U S PRESIDENCY AND GOVERNMENT BY OFFERING ENGAGING, EDUCATIONAL, AND QUALITY PROGRAMMING TO AUDIENCES OF ALL AGES A COMBINED TOTAL OF APPROXIMATELY 9,722 PEOPLE (AN INCREASE OF 12 5%) ATTENDED 43 PROGRAMS AND OF DEEPENING THE PUBLIC'S UNDERSTANDING OF THE U.S. PRESIDENCY AND GOVERNMENT BY OFFERING ENGAGING, EDUCATIONAL, AND QUALITY PROGRAMING TO AUDIENCES OF AL AGES. A COMBINED TOTAL OF APPROXIMATELY 2.22 PEOPLE (AN INCREASE OF 12.5%), ATTENDED 43 PROGRAMS AND EVENTS THROUGHOUT FISCAL YEAR 2016. ADDITIONALLY, TENS OF THOUSANDS OF PEOPLE WERE REACHED THROUGH WEB CASTS, RADIO INTERVIEWS AND TELEVISION BROADCASTS. SOCIAL MEDIA INITIATIVES SAW A 10.4% INCREASE IN E-NEWS SUBSCRIBERS AND A 159% INCREASE IN FACEBOOK FANS. ONGOING AND HIGHLY ACCLAIMED CO-PRESENTED INSTITUTE AND KANSAS CITY PUBLIC LIBRARY PROGRAMS CONTINUTED TO DRAW REMARKABLY HIGH ATTENDANCE THROUGHOUT FY16. FOUR ONGOING SERIES INCLUDED HAIL TO THE CHIEFS. PRESIDENTIAL BIOGRAPHIES BEYOND THE GOWNS. FIRST LADIES IN AMERICAN HISTORY DATELINE. WASHINGTON WITH DAVID VON DREHLE WAR STORIES WORLD WAR II REMEMBERED ADDITIONAL CO-PRESENTED PROGRAMS INCLUDED KAUFFMAN@100 - 100TH BIRTHDAY CELEBRATION HONORING LATE KANSAS CITY ENTREPRENEUR EWING KAUFFMAN 2016 HARRY. S. TRUMAN BOOK AWARD CEREMONY AND BOOK PROGRAM FEATURING HISTORIAN AND AUTHOR MICHAELS. NEIBERGA TOTAL OF TWELVE INSTITUTE/KANSAS CITY PUBLIC LIBRARY CO-PRESENTED PROGRAMS WERE HELD THROUGHOUT FY16 WITH ATTENDANCE ESTIMATED AT 5,019 OTHER SIGNATURE EVENTS OFFERED BY THE TRUMAN LIBRARY INSTITUTE DURING THE FISCAL YEAR 2016 PERIOD INCLUDED OCTOBER 15, 2015 - TRUMAN MEDAL FOR ECONOMIC POLICY AWARDED TO JOHN B. TAYLOR FOR EXTRAORDINARY ACHIEVEMENT IN THE FORMATION AND CONDUCT OF ECONOMIC POLICY PROGRAM ATTENDANCE ESTIMATED AT 320. NOVEMBER 14, 2015 - NINTH ANNUAL HOWARD & VIRGINIA BENNETT FORUM ON THE PRESIDENCY WITH JOURNALIST BILL MOYERS AND PRESIDENTIAL HISTORIAN DORIS KEARNS GOODWIN DISCUSSING "ILEADERSHIP LESSONS FROM THE WITH HOUSE" PROGRAM ATTENDANCE ESTIMATED AT 320. NOVEMBER 14, 2015 - THE HONORABLE IKE SKELTON. THIS YEAR'S EVENT GAVE SPECIAL RECOGNITION TO VIETNAM WAS CREATED BOTH TO HONOR VETERANS AND TO SETTAM WAS CREATED BOTH TO HONOR VETERANS AND TO SETTAM AND AND THE MILTRAY SERVICES COMMITTEE. 2016 " PROGRAM ATTENDANCE ESTIMATED AT 220

40,926) (Revenue \$ (Code) (Expenses \$ including grants of \$

SEE SCHEDULE OEXHIBITIONS DURING FISCAL YEAR 2016 PERIOD, THE TRUMAN LIBRARY INSTITUTE PROVIDED FINANCIAL SUPPORT FOR "A MORE PERFECT UNION" TEMPORARY EXHIBITION ON DISPLAY AT THE HARRY S TRUMAN LIBRARY AND MUSEUM FROM MARCH 4, 2016 THROUGH DECEMBER 31, 2016 THE TRUMAN LIBRARY TRADITIONALLY MARKS PRESIDENTIAL ELECTION YEARS WITH SPECIAL EXHIBITS, PROGRAMS, AND EVENTS THE 2016 PRESIDENTIAL ELECTION AND THE 225TH ANNIVERSARY OF THE BILL OF RIGHTS WERE THE GENESIS OF THIS EXHIBITION WHICH EXAMINED HOW CRITICAL PRESIDENTIAL ELECTIONS AND THE 225TH ANNIVERSARY OF THE BILL OF RIGHTS WERE THE GENESIS OF THIS EXHIBITION WHICH EXAMINED HOW CRITICAL PRESIDENTIAL ELECTIONS RESHAPED THE CONSTITUTION THROUGH THE ADDITION OF CONSTITUTIONAL AMENDMENTS THE EXHIBITION INCLUDED SPECIAL LOANS AND RARE DOCUMENTS FROM THE NATIONAL ARCHIVES AND RECORDS ADMINISTRATION AND THE REMNANT TRUST THE TRUMAN LIBRARY INSTITUTE PROVIDES ONGOING FINANCIAL SUPPORT FOR THE HARRY S TRUMAN LIBRARY'S PERMANENT MUSEUM EXHIBITIONS "HARRY S TRUMAN THE PRESIDENTIAL YEARS" - THE MAJOR ISSUES AND EVENTS OF HARRY TRUMAN'S PRESIDENCY ARE HIGHLIGHTED IN THIS 10,500 SQUARE-FOOT EXHBITION GALLERY FEATURING TWO MULTI-MEDIA DECISION EVENTS OF HARRY TRUMAN'S PRESIDENCY ARE HIGHLIGHTED IN THIS 10,500 SQUARE-FOOT EXHBITION GALLERY FEATURING TWO MULTI-MEDIA DECISION THEATERS, ENHANCED AUDIO AND VIDEO PROGRAMS, AND DOZENS OF INTERACTIVE ELEMENTS DESIGNED FOR THE ENTIRE FAMILY, THIS EXHIBITION FORMS THE CENTERPIECE OF THE TRUMAN LIBRARY'S WORLD-ACCLAIMED MUSEUM "HARRY S TRUMAN HIS LIFE AND TIMES" - THE LIFE OF HARRY TRUMAN IS EXPLORED IN THIS 4,500 SQUARE-FOOT EXHIBITION GALLERY AND FOLLOWS TRUMAN'S LIFE FROM HIS EARLY YEARS IN SCHOOL TO HIS LATER EXPERIENCES AS AN ENTREPRENEUR, A FARMER, A WORLD WAR I SOLDIER, AND A HABERDASHER IT ALSO CHRONICLES HIS POLITICAL CAREER AS A COUNTY JUDGE, U S SENATOR, VICE PRESIDENT AND PRESIDENT TRUMAN'S POST-PRESIDENTIAL YEARS AND HIS CLOSE FAMILY TIES ARE ALSO EXPLORED THE EXHIBITION FEATURES FOUR DISCOVERY AREAS AND AN INTERACTIVE QUIZ WHERE CHILDREN CAN PARTICIPATE IN ENGAGING ACTIVITIES TIED TO THE LIFE OF HARRY TRUMAN "TRUMAN WORKING OFFICE" - FROM THE TIME THE TRUMAN 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 DIGNITARIES AND CELEBRITIES FOLLOWING MR TRUMAN'S DEATH IN 1972, THE OFFICE BECAME AN EXHIBIT THAT COULD BE VIEWED BY THE PUBLIC DURING 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 TOTAL VISITATION FOR THE FY16 PERIOD WAS 88,863 (A 13% INCREASE FROM THE PREVIOUS YEAR)

See Additional Data

4d Other program services (Describe in Schedule O)

616,726 including grants of \$) (Revenue \$ 27,598) (Expenses \$

Total program service expenses ▶ 4e

1,218,565

Form	990 (2015)			Page 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 🛸	1	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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		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 I \square	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 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? 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 V 🛸	10	Yes	
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
	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
	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
	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
е	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 and XII	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 and XII is optional	12 b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14 b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	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 (see instructions)	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? If "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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form	n 990 (2015)			Page 4
Pai	rt IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25a.	24a		No

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35b

36

37

38

Yes

Form 990 (2015)

Yes

Νo

Νo

Nο

Νo

Νo

Νo

Nο

Nο

Nο

Nο

Nο

Νo

Νo

Νo

Nο

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

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?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If "Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

30

instructions for applicable filing thresholds, conditions, and exceptions)

Par	t V	Statements Regarding Other IRS Filings and Tax Complianc Check if Schedule O contains a response or note to any line in this				
		oneck in benediate of contains a response of mote to any fine in any	Tare Transfer		Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a 31			
b	Enter	the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b 0			
c	Did th	ュ ne organization comply with backup withholding rules for reportable payments to	vendors and reportable			
Ī		ng (gambling) winnings to prize winners?		1 c	Yes	
2a		the number of employees reported on Form W-3, Transmittal of Wage and statements, filed for the calendar year ending with or within the year covered				
		s return	2a 11			
b		east one is reported on line 2a, did the organization file all required federal emp If the sum of lines 1a and 2a is greater than 250, you may be required to e-file		2b	Yes	
3a		ne organization have unrelated business gross income of \$1,000 or more during	,	3a		No
		s," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation		3b		
		y time during the calendar year, did the organization have an interest in, or a si				
	over,	a financial account in a foreign country (such as a bank account, securities acc unt)?		4a		No
b	If "Ve	es," enter the name of the foreign country				
		nstructions for filing requirements for FinCEN Form 114, Report of Foreign Bank	c and Financial Accounts			
	(FBAF	R)				
5a	Was t	he organization a party to a prohibited tax shelter transaction at any time durin	ng the tax year?	5a		Νo
b	Dıd ar	ny taxable party notify the organization that it was or is a party to a prohibited t	cax shelter transaction?	5b		Νo
С	If"Ye	es," to line 5a or 5b, did the organization file Form 8886-T?				
				5 c		
6a		the organization have annual gross receipts that are normally greater than $\$10$ ization solicit any contributions that were not tax deductible as charitable cont		6a		No
b		es," did the organization include with every solicitation an express statement th not tax deductible?	nat such contributions or gifts	6 b		
7	Organ	nizations that may receive deductible contributions under section 170(c).				
а		ne organization receive a payment in excess of \$75 made partly as a contributi		7a	Yes	
b	If"Ye	es," did the organization notify the donor of the value of the goods or services pi	rovided?	7b	Yes	
c		ne organization sell, exchange, or otherwise dispose of tangible personal proper	ty for which it was required to			
		orm 8282?		7 c		No
a	IT Ye	es," indicate the number of Forms 8282 filed during the year	7d			
e	Did th	ne organization receive any funds, directly or indirectly, to pay premiums on a p	ersonal benefit contract?	7e		No
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a perso	onal benefit contract?	7f		Νo
g	If the requir	organization received a contribution of qualified intellectual property, did the o	rganızatıon file Form 8899 as	7g		
h	Ifthe	organization received a contribution of cars, boats, airplanes, or other vehicles	s, did the organization file a	7h		
8		soring organizations maintaining donor advised funds.				
		donor advised fund maintained by the sponsoring organization have excess but g the year?	siness holdings at any time	8		
9a	Did th	ne sponsoring organization make any taxable distributions under section 4966	·	9a		
ь	Did th	ne sponsoring organization make a distribution to a donor, donor advisor, or rela	ated person?	9b		
10	Section	on 501(c)(7) organizations. Enter				
а	Initia	tion fees and capital contributions included on Part VIII, line 12	10a			
b	Gross facilit	s receipts, included on Form 990, Part VIII, line 12, for public use of club	10b			
11		on 501(c)(12) organizations. Enter				
а	Gross	s income from members or shareholders	11a			
b		s income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them)	11b			
122	Section	ت on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	un lieu of Form 10412	12a		
		es," enter the amount of tax-exempt interest received or accrued during the		120		
,	year	L. S.	12b			
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.				
а		e organization licensed to issue qualified health plans in more than one state? N ional information the organization must report on Schedule O	ote. See the instructions for	13a		
b	Enter	the amount of reserves the organization is required to maintain by the states	481			
		ch the organization is licensed to issue qualified health plans	13b			
		the amount of reserves on hand	13c			
		ne organization receive any payments for indoor tanning services during the tax	,	14a		No
b	If"Ye	es," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i>	tion in Schedule O	14b		

Part VI	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.

	Check if Schedule O contains a response or note to any line in this Part VI					🗸
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 year	1a	25			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	24			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performs supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?			4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation'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 pow more members of the governing body?	ver to		7a		No
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?	alby)ı	members, stockholders,	7 b		No
8	Did the organization contemporaneously document the meetings held or written active year by the following					
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not	requi	red by the Internal R	eveni	ıe Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		No
b	If "Yes," did the organization have written policies and procedures governing the ac affiliates, and branches to ensure their operations are consistent with the organizati			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	_	J ,	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this f	Form 9	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 annual rise to conflicts?	lly inte	erests that could give	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? <i>If "Yes," des cribe</i>	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 revindependent persons, comparability data, and contemporaneous substantiation of the					
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 taxable entity during the year?			16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organ participation in joint venture arrangements under applicable federal tax law, and tak organization's exempt status with respect to such arrangements?	ıızatıoı e step	n to evaluate its s to safeguard the	16b		
Se	ection C. Disclosure					
	ection C. Disclosure List the States with which a copy of this Form 990 is required to be filed▶					

 $\overline{\checkmark}$ O wn website $\overline{\ }$ A nother's website $\overline{\ }$ U pon request $\overline{\ }$ O ther (explain in Schedule O)

interest policy, and financial statements available to the public during the tax year

►LISA SULLIVAN 500 W US HWY 24 INDEPENDENCE, MO 64050 (816) 268-8248

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, address, and telephone number of the person who possesses the organization's books and records

Part VII

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received 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 organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours	verage 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-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										

Part VII	Section A. Officers,	Directors, Tr	ustees, Key	Employees,	and Highest	Compensated Empl	oyees (continued)
----------	----------------------	---------------	-------------	------------	-------------	------------------	-------------------

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more t perso and a	tion (han d n is l	ne tooth	oox, an d	unless officer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Addıtıonal Data Table										
						•				
c Total from continuation sheetd Total (add lines 1b and 1c) .	•			٠.	٠.	•		267,418	0	52,451
2 Total number of individuals (ind	cluding but not l	limited t	o tho	se I	ıste		e) wh	no received more th	an	

3	Did the organization list any former officer, director or trustee, key employee, or highest compensation

ated employee on line 1a? If "Yes," complete Schedule J for such individual .

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 ındıvıdual . . 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 .

	Yes	No
3		No
4	Yes	
_		

Section B. Independent Contractors

3

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

Name and business address	Description of services	Compensation

Form 99	0 (20	15)						Page 9
Part V	/++	Statement o	f Revenue					
		Check if Schedi	ule O contains a respor	nse or note to any lin	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
so so	1a	Federated cam	paigns 1a					
tributions, Gifts, Grants Other Similar Amounts	ь	Membership du	es 1b	283,980				
G. E.	С	Fundraising eve	ents 1c	463,920				
ffs.	d	Related organiz	zations 1d					
19. €	e	Government grants	s (contributions) 1e					
Contributions, and Other Sim	l f	All other contribution	ons, gifts, grants, and 1f	707,901				
her jar	'	sımılar amounts no	ot included above					
	g	Noncash contribution 1a-1f \$	ons included in lines	35,670				
Cont	h	Total. Add lines	s 1a-1f		1,455,801			
				Business Code				
nu e	2a	White House Decis	ion Center Reven	900099	70,657	70,657		
<u>₹</u>	ь							
a Ce	C							
<u>Ş</u>	d							
an	e	A II a th an mua and						
Program Service Revenue	f	All other progra	am service revenue					
<u> </u>	g		s 2a-2f		70,657			
	3		ome (including dividendar ar amounts)		225,574			225,574
	4		stment of tax-exempt bond	proceeds >				
	5	Royalties	(ı) Real	(u) Daragnal				
	6a	Gross rents	(I) Real	(II) Personal				
	l .							
	Ь	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss) (i) Securities	· · · · •				
	7a	Gross amount from sales of assets other than inventory	6,988,637	(II) Other				
	ь	Less cost or other basis and sales expenses	6,539,406					
	c	Gain or (loss)	449,231		449,231			449,231
	d 8a	Net gain or (los Gross income f			449,231			449,231
Other Revenue		events (not inc \$463	luding ,920 s reported on line 1c)					
er			a	63,000				
O			penses b	140,851	-77,851			-77,851
	9a			events •	-77,031			-77,031
	Ь	less director	a penses b					
	l		(loss) from gaming acti	vities				
	102	Cross sales of	unuantary laga	•				
	104	Gross sales of returns and allo						
	b c	_	a oods sold b (loss) from sales of inve	entory ▶				
	<u> </u>	Miscellaneous		Business Code				
	11a	MISCELLANEC	OUS INCOME	900099	33,814	33,814		
	ь							
	С							
	d	All other reven						
	e	Total. Add lines		•	33,814			
	12	Total revenue.	See Instructions .	•	2,157,226	104,471	1	596,954

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must co	mplete all columns	All other organization	ons must comr	olete column (A	١,

	✓				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	65,378	65,378		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	14,550	14,550		
4	Benefits paid to or for members	·	,		
5	Compensation of current officers, directors, trustees, and key employees	335,999	115,285	168,410	52,304
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		,		
7	Other salaries and wages	338,330	240,675	6,629	91,026
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	21,749	14,871	467	6,411
9	Other employee benefits	62,527	35,533	3,758	23,236
10	Payroll taxes	,		·	· · · · · · · · · · · · · · · · · · ·
		42,540	23,718	9,856	8,966
11	Fees for services (non-employees)				
а	Management				
b	Legal	6,541		6,541	
С	Accounting	24,400		24,400	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	40,747		40,747	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	12,665		12,665	
12	Advertising and promotion	62,440	62,440		
13	Office expenses	31,564		31,564	
14	Information technology	49,690	49,690		
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	16,307		16,307	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	8,045		8,045	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Public Programs	203,889	203,889		
b	CAPITAL PROJECTS	173,010	173,010		
c	FUNDRAISING OTHER DIREC	64,197			64,197
d	EDUCATION	54,274	54,274		
e	All other expenses	186,945	165,252	348	21,345
25	Total functional expenses. Add lines 1 through 24e	1,815,787	1,218,565	329,737	267,485
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	48,337	1	117,346
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
As	7	Notes and loans receivable, net		7	
-	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	11,112,887	11	11,782,631
	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)	11,161,224	16	11,899,977
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>.</u>		persons Complete Part II of Schedule L		22	
Liab	23	Secured mortgages and notes payable to unrelated third parties $\cdot\cdot$		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
es	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ complete lines 27 through 29, and lines 33 and 34.	0	20	
Š	27	Unrestricted net assets	5,847,261	27	6,238,307
ala	28	Temporarily restricted net assets	1,810,815	28	2,158,522
 	29	Permanently restricted net assets	3,503,148	29	3,503,148
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and	0,000,110	25	0,000,110
	30	complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
Net Assets or F	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
et 1	33	Total net assets or fund balances	11,161,224	33	11,899,977
ž	34	Total liabilities and net assets/fund balances	11,161,224	34	11,899,977
	J - T	. Star habilities and net assets/faile balances	11,101,224	J#	11,055,977

Investment expenses .

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Prior period adjustments .

Check if Schedule O contains a response or note to any line in this Part XI							. [
evenue (must equal Part VIII, column (A), line 12)							

2,157,226 2 1,815,787

Page **12**

341,439

11,161,224

11,899,977

Total revenue (must equal Part V nn (A), line 12) Total expenses (must equal Part IX, column (A), line 25) . . . Revenue less expenses Subtract line 2 from line 1

3 4

1

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . Net unrealized gains (losses) on investments Donated services and use of facilities .

5 397,314 6 7 8 9

Other changes in net assets or fund balances (explain in Schedule O) . 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

10 Cash Accrual Vother Modified Cash

▽ Yes No 2a Νo 2b Yes

Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII **1** Accounting method used to prepare the Form 990 If the organization changed its method of accounting from a prior year or checked "Other," explain in 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Consolidated basis

Both consolidated and separate basis **b** Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

Consolidated basis Both consolidated and separate basis c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in

2c

3a

3b

Yes

Nο

Form 990 (2015)

Additional Data

Software ID: Software Version:

EIN: 43-6042632

Name: The Harry S Truman Library Institute
National and International Affairs

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

(Code) (Expenses \$ 616,726 including grants of \$) (Revenue \$ 27,598)
Public Relations and Advertising, Documentary Access, Volunteer & Intern Program, Museum Artifact/Document Acquisition &
Preservation, Exhibition Preventative Maintenance

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

Compensated Employees, and Inde	pendent Cor	nu av	LOF	3				i	İ	l '
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles d	ore ti ss pe	than erso icer tor/t	not one on is and trust	tee)	, an	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	and related organizations
Alan L Atterbury Director	1 00	х						0	0	O
Morgan A Burden Executive Director/Ex Officio Director	40 00	х		x				179,907	7 0	33,581
Kırk W Carpenter Director	1 00	х						0	0	0
Clifton Truman Daniel Honorary Chair	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
SUSIE S Evans DIRector	1 00	х						0	0	0
Charles M Foudree Director	1 00	х						0	0	0
Mary Ann Heiss	1 00						'			

1 00

Director

Director

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors													
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer tor/i	not one n is and trus			(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			
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	and related organizations			
JOHN A MACDONALD TREASURER	1 00	×		x				0	0	0			
John P McMeel Director	1 00	×						0	0	0			
Larry L McMullen Director	1 00	×						0	0	0			
Roger A Novak DIrector	1 00	×						0	0	0			
James B Nutter Jr Director	1 00	×						0	0	0			
Cappy P Powell Director	1 00	×						0	0	0			
Page Branton Reed Director	1 00	×						0	0	0			

1 00

1 00

1 00

Х

Χ

Χ

John J Sherman

BOARD Chair/Director

Elizabeth T Solberg

VICE CHAIR/Director

Charles S Sosland

Director

Form 990, Part VII - Compensation of Officers

Form 990, Part VII - Compensation Compensated Employees, and Inde					/rus	stee	s, k	(ey Employe	es, Highest	
(A) Name and Title	(B) A verage hours per week (list any hours for related (C) Position (do not ch more than one be unless person is bo officer and a director/trustee					e box, both a la	.	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	11130)	organization and related organizations
Jeannine Strandjord Director	1 00	х						0	0	0
DAVID J VON DREHLE Director	1 00	х						0	0	0
Maunce A Watson Secretary/Director	1 00	х		x				0	0	0
Clyde Wendel VICE CHAIR/DIRECTOR	1 00	x		x				0	0	C
David Williams Director	1 00	х						0	0	C
MERILYN BERENBOM Director	1 00	x						0	0	C

1 00

1 00

1 00

1 00

Х

Χ

KURT GRAHAM EX OFFICIO DIRECTOR

KAY MARTIN

DENNIS MERRILL

JANET NAPOLITANO

DIrector

Director

DIRector

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

Name and Title	A verage hours per week (list any hours for related organizations below dotted line)	m unle:	ore these per office of the of	han rso cer cor/t	one n is and trus		Reportable compensation from the organization (W- 2/1099- MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
ADAM P SACHS	1 00		4			94 e-d			
Director		X					0	0	0
TIMOTHY W TRIPLETT DIRector	1 00	×					0	0	0
LISA A SULLIVAN DIRECTOR OF FINANCE AND ADMIN	40 00			×			87,511	0	18,870

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

hospital's name, city, and state

170(b)(1)(A)(iv). (Complete Part II)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**. A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

2015
Open to Public Inspection

DLN: 93493044025297

Department of the
Treasury
Internal Revenue S
Name of the or

Part I

1

2

990EZ)

SCHEDULE A

(Form 990 or

Internal Revenue Service

Name of the organization
The Harry S Truman Ubrary Institute
National and International Affairs

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2015

43-6042632

6		A federal, state, or loc	al government	t or governmental unit	described in s	ection 170(b)	(1)(A)(v).					
7	~					rom a governr	nental unit or from the g	eneral public				
	_	described in section 1				-+ II \						
8	<u> </u>	A community trust des			•	•		6				
9		receipts from activitie from gross investmen organization after Jun	es related to it t income and i e 30, 1975 S	s exempt functions—s unrelated business ta: ee section 509(a)(2).	subject to certa xable income ((Complete Par	in exceptions less section 5 t III)	tributions, membership ;, and (2) no more than : 11 tax) from businesse	331/3% of its support				
10		An organization organ	ized and opera	ted exclusively to tes	t for public saf	fety See secti	on 509(a)(4).					
11 a	Γ	one or more publicly s the box in lines 11a th Type I. A supporting o	upported orga Irough 11d tha rganization op	nizations described in at describes the type o erated, supervised, o	section 509(a of supporting o r controlled by	a)(1) or sectio rganization an its supported	Inctions of, or to carry on 509(a)(2) See sectio did complete lines 11e, 1 organization(s), typical ctors or trustees of the	n 509(a)(3). Check .1f, and 11g ly by giving the				
		organization You mus										
b							oorted organization(s), b					
	management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C.											
С					n operated in o	connection wit	h, and functionally integ	arated with, its				
	ı	supported organization						,				
d							n with its supported org					
							irement and an attentiv	eness requirement				
e	_	(see instructions) You					t is a Type I, Type II, T	vne III functionally				
	ı	integrated, or Type III	-				113 a 1 y p c 1, 1 y p c 11, 1	ype III lanetionally				
f	Ente	r the number of support										
g		Provide the following in										
Nan	ne of s	(i) upported organization	(ii)EIN	(iii) Type of organization (described on lines 1 - 9 above (see instructions))	(iv Is the orga listed in your docum	anızatıon governing	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)				
					Yes	No						
Tota												
F D		ork Reduction Act Noti				Cat No 11	285E					

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support

(or	Calendar year fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2	015	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	863,577	965,102	1,072,128	1,647,422	:	1,455,801	6,004,030
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	863,577	965,102	1,072,128	1,647,422		1,455,801	6,004,030
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							1,262,467
6	(f) Public support. Subtract line 5 from line 4							4,741,563
S	ection B. Total Support							
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 20	0.1.5	(f) Total
-	fiscal year beginning in)							
7	A mounts from line 4	863,577	965,102	1,072,128	1,647,422		1,455,801	6,004,030
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	222,190	212,494	202,107	232,304		225,574	1,094,669
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	67,886	49,648	65,107	85,486		96,814	364,941
11	Total support. Add lines 7 through 10							7,463,640
12	Gross receipts from related activit	•	·			12		
13	First five years.If the Form 990 is	5	•		•		501(c)(3)	organization,
	check this box and stop here						.▶	
	ection C. Computation of Pu							
14	Public support percentage for 201			11, column (f))		14		63 530 %
15	Public support percentage for 201	4 Schedule A, Pa	rt II, line 14			15		58 480 %
16a	33 1/3% support test—2015. If the	organization did	not check the box	on line 13, and l	ine 14 is 33 1/3%	or more	, check th	
b	and stop here. The organization qu 33 1/3% support test—2014. If the		, , , ,		and line 15 is 33	1/3% or	more, che	▶ ▽ eck this
17a	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me	: —2015. If the organication meets the fa	anization did not o cts-and-circums	check a box on lin tances test, chec	k this box and st	p here. I	Explain	▶ [
b	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza	nization meets th	e "facts-and-circ	umstances" test,	check this box ai	nd stop h	nere.	▶ □
18	supported organization Private foundation.If the organization							▶┌
	instructions							▶

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part

	II. If the organization	ı faıls to qualıfı	<u>, under the tes</u>	ts listed below,	, please comple	ete Part II.)	
Se	ction A. Public Support			ı			
	Calendar year	(a) 2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f)Total
(or t	iscal year beginning in) ► Gifts, grants, contributions, and						1
-	membership fees received (Do	ı					
	not include any "unusual grants")	ı					
2	Gross receipts from admissions,						
	merchandise sold or services	İ					
	performed, or facilities furnished	İ					
	in any activity that is related to	İ					
	the organization's tax-exempt purpose	İ					
3	Gross receipts from activities						
•	that are not an unrelated trade or	İ					
	business under section 513	_					
4	Tax revenues levied for the	1					
	organization's benefit and either	İ					
_	paid to or expended on its behalf						
5	The value of services or facilities	İ					
	furnished by a governmental unit to the organization without charge	İ					
6	Total. Add lines 1 through 5						
	A mounts included on lines 1, 2,	·					
, u	and 3 received from disqualified	İ					
	persons						
b	A mounts included on lines 2 and	İ					
	3 received from other than	İ					
	disqualified persons that exceed	İ					
	the greater of \$5,000 or 1% of the amount on line 13 for the year	İ					
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
•	from line 6)	ı					
Se	ction B. Total Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f)Total
(or f	iscal year beginning in) 🕨	(a)2011	(0)2012	(6)2013	(d)2014	(e)2013	(I)I otal
9	A mounts from line 6						
.0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years.If the Form 990 is form	or the organization	n'e firet eacond	third fourth or f	l fifth tay vear as a	section 501(c)	(3) organization
	check this box and stop here	or the organization	on a mac, accond,	, cilira, loarcii, or i	michicax year as a	3000001 301(0)	
Se	ection C. Computation of Pub	lic Sunnort P	ercentage				
15	Public support percentage for 2015			12 column (f))		4=	
	· · · · · -	·		13, column (1))		15	
16	Public support percentage from 201					16	
	ection D. Computation of Inv			<u> - </u>	(5)		
17	Investment income percentage for 2				nn (f))	17	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2015. If the	_					
	more than 33 1/3%, check this box						▶ [
D	33 1/3% support tests—2014. If the 18 is not more than 33 1/3%, check	-					_
	TO IS HOLIHOTE CHAIL 33 1/370, CHECK	. LIIIS DUX dilu SEC	princie. I lie oldd	mzation qualines	us a publicly SUL	porteu urgalliza	CIOII 📂

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, and D, and complete Part V.)

	I, complete Sections A and D, and complete Part V)	a circe	.RCG II	u 011 u
Se	ction A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section	2		
	509(a)(1) or (2)			
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3 c		
4-	· · · · · ·			l
	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?			
	If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4c		
	organization was used exclusively for section 170(c)(2)(B) purposes			<u> </u>
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was			
	accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5 c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
с	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10 b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_	A 35% controlled entitle of a person described in (a) or (b) above 2 if "Vee" to a bioric provide detail in Port VI	110		

Part IV Supporting Organizations (continued)

Section I	R Tyne	T Supporting	Organizations
Section i	в. гуре	I Supporting	Organizacions

Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Se	ection D. All Type III Supporting Organizations			
	, , , , , , , , , , , , , , , , , , ,		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i>	3a		

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3b

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Suppor	ting O	rganizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tr	ust on N	Nov 20,1970 See inst	ructions. All other
	Type III non-functionally integrated supporting organizations must complete S	ections	A through E	
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		,
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter $1\text{-}1/2\%$ of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	ed Type III supporting o	organization (see

12	Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)
Se	ection D - Distributions			Current Year
1	A mounts paid to supported organizations to accom	plish exempt purposes		
2	A mounts paid to perform activity that directly further excess of income from activity	ers exempt purposes of supp	orted organizations, in	
3	Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4	A mounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval rec	quired)		
6	Other distributions (describe in Part VI) See instru	uctions		
	Total annual distributions. Add lines 1 through 6			
<u> </u>	Total aimaa distributions. Add imes 1 timough o			
8	Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9	Distributable amount for 2015 from Section C, line	6		
10	Line 8 amount divided by Line 9 amount			
			/::x	/:::\
	section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3	Excess distributions carryover, if any, to 2015			
а				
b				
<u>c</u>				
	From 2013			
	From 2014 Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	Carryover from 2010 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 [Distributions for 2015 from Section D, line 7 \$			
a	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2016. Add lines 33 and 4c			
8	Breakdown of line 7			
a				
b				
c	Excess from 2013			
d	From 2014			
	From 2015			
				(F 000 000 F7) (201 F

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE D

(Form 990)

Department of the

Treasury

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493044025297 OMB No 1545-0047

Open to Public Inspection

Interr	nal Revenue Service	· ,		Inspection
The	me of the organization : Harry S Truman Library Institute Ional and International Affairs		-	oyer identification number
Pa		Advised Funds or Other Similar Funds or Other Similar Funds on Form 990, Part IV, line 6.		
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year	(a) bollor davised lands	(5)	Tanas and other accounts
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor a funds are the organization's property, subject to		or advis	sed Yes No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?	benefit of the donor or donor advisor, or for an	y other	Yes No
Pa	rt III Conservation Easements. Comple	ete if the organization answered "Yes" o	<u>n Form</u>	n 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by th	e organization (check all that apply)		
	Preservation of land for public use (e g , recreducation)		n histor	ically important land area
	Protection of natural habitat			d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution in th	ne form	of a conservation
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easeme	ents	2 b	
c	Number of conservation easements on a certified	historic structure included in (a)	2c	
d	Number of conservation easements included in (o historic structure listed in the National Register	c) acquired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, training	nsferred, released, extinguished, or terminate	d by the	e organization during the
	tax year ▶			
4	Number of states where property subject to cons	ervation easement is located ▶		
5	Does the organization have a written policy regar violations, and enforcement of the conservation e		ling of	┌ Yes
6	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforci	ng cons	ervation easements during the
	-			
7	A mount of expenses incurred in monitoring, insperior \$	ecting, handling of violations, and enforcing co	ınserva	tion easements during the year
8	Does each conservation easement reported on li (B)(i) and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of sec	tion 17	0(h)(4) Yes No
9	In Part XIII, describe how the organization repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financial $% \left(1\right) =\left(1\right) \left(1\right$		·
Par		tions of Art, Historical Treasures, o	or Oth	er Similar Assets.
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footi	FAS 116 (ASC 958), not to report in its reven assets held for public exhibition, education, o	or resea	arch in furtherance of public
b	If the organization elected, as permitted under Sf works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, education, o		
((i) Revenue included on Form 990, Part VIII, line :	ı	> \$	
(i	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 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

SCIIE	uule D	(FOIII 990) 2015									Page 2
Pari	3111	Organizations Maintaining (continued)	Collections of	Art, Histo	rical	Treasure	s, or (Other Similar A	Asse	ts	
3		the organization's acquisition, acc ction items (check all that apply)	ession, and other re	ecords, chec	k any	of the followi	ng that	are a significant u	se of	ıts	
а		Public exhibition		d	┌ Lo	oan or exchai	nge pro	grams			
ь	_	Scholarly research		e	Ot	ther					
c		Preservation for future generations									
4	•	de a description of the organizations		xplain how t	hev fur	ther the orga	ınızatıo	n's exempt purpos	e in		
-	Part >	· -		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,						
5		g the year, did the organization soles to be sold to raise funds rather the							es	┌ No	
Par	t IV	Escrow and Custodial Arra Complete if the organization Part X, line 21.		n Form 99	0, Par	rt IV, line 9	, or re	ported an amou	int or	n Form	990,
1a		e organization an agent, trustee, cu ded on Form 990, Part X?	stodian or other inte	ermediary fo	rcontr	ributions or o	ther as	sets not	es	☐ No	
b	If'	'Yes," explain the arrangement in P	art XIII and comple	ete the follow	wing ta	ble		IA.	mount		
c				:							
d	A d	ditions during the year					10	I			
e	Dis	stributions during the y ear					16	•			
f		ding balance					1f				
2a	Did th	ne organization include an amount o	on Form 990, Part X,	, line 21, for	escro	w or custodia	al accou	unt liability? Y	es	∏ No	
b	If"Y∈	es," explain the arrangement in Par	t XIII Check here ıf	f the explana	ation h	as been prov	ided in	Part XIII			
Pa	rt V	Endowment Funds. Comple									
			(a)Current year	(b)Prior y		b (c) Two yea		(d)Three years back	+	Four year	
1a	-	nning of year balance	7,292,433		423,244		728,677	6,094,477	+	5,	347,124
b	Conti	ributions	5,034		275,276		250,500	52,700	Ί		7,526
c	Net ii Iosse	nvestment earnings, gains, and es	693,404	-	142,981		649,647	795,733	3		865,586
d	Grant	ts or scholarships									
e		r expenditures for facilities programs	246,618		263,106		205,580	190,994	1		104,341
f	A dmı	nistrative expenses						23,239	,		21,418
g		of year balance	7,744,253	7,	292,433	7,	423,244	6,728,677	7	6,	094,477
2	Provi	de the estimated percentage of the	current year end ba	lance (line	1g, col	umn (a)) held	das				
а	Board	l designated or quasi-endowment 🕨	28 820 %								
b	Perm	anent endowment ▶ 45 230 %									
c		orarily restricted endowment > percentages on lines 2a, 2b, and 2c	25 950 % should equal 100%)							
3a		here endowment funds not in the po	ssession of the orga	anızatıon tha	at are h	neld and adm	ınıstere	ed for the			
	_	iization by irelated organizations						Г	20(1)	Yes Yes	No
	• •	elated organizations							Ba(i) Ba(ii)	res	No
b		es" on 3a(II), are the related organi		uıred on Scl	nedule	R?			3b		
4	Desc	ribe in Part XIII the intended uses	of the organization's	endowmen	t funds	;				I	
Par	t VI	Land, Buildings, and Equip					_				
		Complete if the organization Description of property	answered 'Yes' to			IV, line 11	a.See (b)	Form 990, Part Accumulat		<u>(d)</u> Bool	k value
		a and inputed to property		(a) ¯	(invest		or other (other)			,	
1a	Land						(outer)		\dashv		
	Buildin								\dashv		
c	Leasel	nold improvements		. [
		nant									

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

(a) Description of security or category (including name of security) (1)Financial derivatives (2)Closely-held equity interests (3)Other	(b)Book value	(c)Method of valuation Cost or end-of-year market v
(1)Financial derivatives (2)Closely-held equity interests		
3)Other		
		i .
		+
tal. (Column (b) must equal Form 990, Part X, col (B) line 12)		_
Investments—Program Related. Complete if the organization answered 'Yes' on Form 9	90. Part IV. line 11c.ca	a Farm 000 Dart V line 13
(a) Description of investment	(b) Book value	(c) Method of valuation
(a) bescription of investment	(b) book value	Cost or end-of-year market v
· ·		
· ·		
		
l		
		
!		
ntal (Column (h) must equal Form 990, Part Y, col (R) line 13.)		
otal. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered 'Yes' o	n Form 990 Part IV line 1	1d See Form 990 Part X June 15
(a) Description		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line 15)		
Part X Other Liabilities. Complete if the organization answer		
See Form 990, Part X, line 25.		
(a) Description of liability (b) Book value	ue	
ederal income taxes		
actal mediae taxes		
otal. (Column (b) must equal Form 990, Part X, col (B) line 25)		

Sched	dule D (Form 990) 2015		Page 4
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	2,554,540
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a 397,314		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	397,314
3	Subtract line 2e from line 1	3	2,157,226
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII) 4b		
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,157,226
Par	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	Return.
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	-	
1	Total expenses and losses per audited financial statements	1	1,815,787
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,815,787
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)............. 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,815,787

Part XIII Supplemental Information

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

Return Reference Explanation THE INTENDED PURPOSE OF THE ENDOWMENT IS TO CONTINUE TO PROVIDE CONTINUOUS Part V. Line 4 SUPPORT TO THE INSTITUTE, THE HARRY S TRUMAN LIBRARY AND MUSEUM, AND TO PROMOTE THE LEGACY OF HARRY S TRUMAN THE INSTITUTE HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT 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 MINIMALLEVEL OF INVESTMENT RISK THE INSTITUTE HAS A POLICY (THE SPENDING POLICY) OF APPROPRIATING FOR EXPENDITURES EACH YEAR AN AMOUNT EOUAL TO 4% OF THE TRAILING 12-OUARTER AVERAGE MARKET VALUE OF THE ASSETS IN THE VARIOUS ENDOWMENT AND OTHER FUND ACCOUNTS THAT ARE SUBJECT TO THE INSTITUTE'S STATEMENT OF INVESTMENT POLICY AND OBJECTIVE WILL BE DISTRIBUTED ANNUALLY TO SUPPORT THE INSTITUTE'S BUDGETED EXPENDITURES THIS DISTRIBUTION PERCENTAGE WILL BE APPLIED PURSUANT TO THE ABOVE FORMULA TO EACH INDIVIDUAL ACCOUNT NOT SUBJECT TO INCOME RESTRICTIONS OR OTHER PAYOUT AGREEMENTS, WHICH WOULD SUPERCEDE THE DISTRIBUTION POLICY KEMPTON ENDOWMENT PER THE TERMS OF GRETA KEMPTON'S 1991 WILL, 25% OF HER ESTATE GIFT WAS USED BY THE INSTITUTE FOR ITS GENERAL PURPOSES THE REMAINING 75% CORPUS IS HELD IN A PERMANENTLY RESTRICTED ENDOWMENT FUND WITH THE INCOME THERE FROM TO BE USED BY THE INSTITUTE FOR ITS GENERAL PURPOSES THE UNRESTRICTED INVESTMENT INCOME CAN BE EXPENDED DURING THE FISCAL YEAR FOR PURPOSES DEEMED APPROPRIATE AND NECESSARY BY THE INSTITUTE'S BUDGET, FINANCE AND INVESTMENT COMMITTEE JOHNSTON ENDOWMENT TERMS STATE THAT THE CORPUS IS PERMANENTLY RESTRICTED INVESTMENT INCOME IS TEMPORARILY RESTRICTED TO SUBSIDIZE EXPENSES ASSOCIATED WITH THE ANNUAL "HOWARD AND VIRGINIA BENNETT FORUM ON THE PRESIDENCY " ADDITIONALLY, INVESTMENT INCOME CAN BE EXPENDED TO SUPPORT AN ANNUAL ARCHIVAL RESEARCH INTERNSHIP BOARD-DESIGNATED ENDOWMENT FUND, WHICH RESULTS FROM AN INTERNAL DESIGNATION, IS NOT DONOR-RESTRICTED AND IS CLASSIFIED AS UNRESTRICTED NET ASSETS UP TO 5% OF THE FUND'S PRINCIPAL CAN BE EXPENDED ON AN ANNUAL BASIS THESE ASSETS MAY BE EARMARKED FOR FUTURE PROGRAMS, PURCHASE OR CONSTRUCTION OF FIXED ASSETS, CONTINGENCIES OR OTHER USES AS DETERMINED BY THE INSTITUTE'S EXECUTIVE COMMITTEE OR BOARD OF DIRECTORS WITH PRIOR RECOMMENDATION FROM THE BUDGET, FINANCE AND INVESTMENT COMMITTEE SPECIAL EXCEPTIONS TO THIS POLICY TO ALLOW FURTHER REDUCTION OF THE PRINCIPAL WILL BE APPROVED BY A FORMAL VOTE OF THE

Funds to ensure that this grant is available each year

INSTITUTE'S BOARD OF DIRECTORS Hulston Family Endowment In FY13, the Hulston Family Foundation donated \$50,000 to the Institute for the purpose of establishing a permanently restricted endowment fund The terms and conditions established with the donor stipulate that the initial \$50,000 gift will be preserved in perpetuity while the investment income will be used to fund a special \$2,500 John K Hulston scholarship on an annual basis When necessary, the Institute agrees to supplement the investment proceeds from the Hulston Endowment Fund with General Unrestricted

Schedule D (Form 990) 2015	Page 5						
Part XIII Supplemental Information (continued)							
Return Reference	Explanation						

efile GRAPHIC print - DO I	NOT PROCESS	As Filed Dat	:a -	DLN:	DLN: 93493044025297		
SCHEDULE F (Form 990)	Statement of	Activities C	Outside the Unit	ed States	OMB No 1545-0047		
Denartment of the Traccury	·	Part IV, line 1 ► Attach to	n answered "Yes" to Form 14b, 15, or 16. o Form 990. nd its instructions is at wi		2015 Open to Public Inspection		
Name of the organization The Harry S Truman Library Instit National and International Affairs	tute			Employer ider 43-6042632	ntification number		
			ne United States. orm 990, Part IV, line	14b.			
For grantmakers. Does to and other assistance, the used to award the grants	e grantees' eligibil			_	√ Yes N o		
2 For grantmakers. Describe assistance outside the Ui		ganızatıon's pı	rocedures for monitori	ng the use of its grai	nts and other		
3 Activites per Region (The fo	ollowing Part I, line	3 table can be du	uplicated if additional spa	ace is needed)			
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(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 program service, describe specific type of service(s) in region			
(1)		region	regiony				
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continuation she to Part I	ets 0	 			0		
c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice	/	for Form 990.		No 50082W Sche	0 dule F (Form 990) 2015		

organization	section and EIN (if applicable)	grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV , appraisal, other)
(1)							
(2)							
(3)							
(4)							

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as

tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

Schedule F (Form 990) 2015

Page 2

(13) (14) (15) (16)

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. Part III can be duplicated if additional space is needed. (a) Type of grant or (b) Region (c) Number of (d) A mount of (e) Manner of cash (f) A mount of (g) Description (h) Method of recipients cash grant disbursement of non-cash valuation assistance non-cash assistance (book, FMV, assistance appraisal, other) (1) research grants Europe 11,500 CHECK, WIRE 4 TRANSFER (2) research grants north america 3,050 CHECK (3) (4) (5) (6) (8) (9) (12)

(7) (10) (11)

(17) (18) Schedule F (Form 990) 2015

by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)

Tyes Volume No.

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)

Yes Volume No.

"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form

5713, do not file with Form 990)

Nο

Yes

Part V

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
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 ADMINIST RATION. SELECTION IS MADE BY THE INSTITUTES COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCAT ION FUNDING DECISIONS, VIA AN APPLICATION PROCESS, ARE BASED ON QUALITY, ORIGINALITY, SIG NIFICANCE OF THE PROJECT AND ITS RELATIONSHIP TO THE EXSITING TRUMAN HISTORIOGRAPHY, AND T WO LETTERS OF REFERENCE. RESEARCH GRANTS, AWARDED BIANNUALLY IN APRIL AND OCTOBER, REQUIRE TRAVEL TO THE TRUMAN LIBRARY FOR STUDY OF ITS ARCHIVAL COLLECTIONS ONE-TIME PAYMENTS ARE DISBURSED DIRECTLY AND PAY ABLE TO THE AWARDEE UPON COMPLETION OF THE RESEARCH TRIP AND DO NOT REQUIRE ANY FURTHER MONITORING THE SPRING ROUND OF RESEARCH GRANTS INCLUDES THE AWAR D OF ONE ENDOWED JOHN K. HULSTON SCHOLARSHIP, WHICH PROVIDES \$2,500 TO SUPPORT RESEARCH FO RA SINGLE PROJECT REQUIRING TRAVEL. TO THE TRUMAN LIBRARY AND ADDITIONAL ARCHIVAL REPOSITO RIES CONVENTIONAL RESEARCH GRANT GUIDELINES AND EXPECTATIONS APPLY, HOWEVER, APPLICANTS A REALSO REQUIRED TO SUBMIT A DETAILED PROJECT BUDGET OUTLINING THE ADDITIONAL REPOSITORIES TO BE CONSULTED AND HOW MATERIALS AT THOSE REPOSITORIES FIT INTO THE LARGER PROJECT DECISIONS REGARDING SELECTION OF DISSERTATION YEAR FELLOWSHIP AND SCHOLARS AWARD WINNERS ARE MADE VIA A SIMILAR APPLICATION PROCESS DISSERTATION YEAR FELLOWSHIP PAYMENTS ARE DISBURSE DIRECTLY AND PAYABLE TO THE AWARDEE IN TWO INSTALLMENTS SCHOLARS AWARD PAYMENTS CAN BE DISBURSED DIRECTLY AND PAYABLE TO THE AWARDEE OR THEIR INSTITUTION AND ARE PAYABLE IN TWO INSTALLMENTS SCHOLARS AWARD PAYMENTS CAN BE DISBURSED DIRECTLY AND PAYABLE TO THE AWARDEE OR THEIR INSTITUTION AND ARE PAYABLE IN TWO INSTALLMENTS SCHOLARS AWARD PAYMENTS CAN BE DISBURSED DIRECTLY AND PAYABLE TO THE AWARDEE OR THEIR INSTITUTION AND ARE PAYABLE IN TWO INSTALLMENTS SCHOLARS APPROPRIATE ON THE STIPULATION OF THE PEDIL CAND

DLN: 93493044025297

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on 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

OMB No 1545-0047

2015

Open to Public Inspection

Internal Revenue Service ▶Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990 Name of the organization **Employer identification number** The Harry S Truman Library Institute National and International Affairs 43-6042632 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising **TYes ™**No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II	Fundraising	Events

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

	receipts greater than \$5,000		on Form 990-EZ, line	s I and ob. List ever	its with gross
		(a)Event #1 Wild About Harry	(b) Event #2	(c)Other events	(d) Total events (add col (a) through
a)		(event type)	(event type)	(total number)	col (c))
Revenue	1 Gross receipts	526,920			526,920
2	2 Less Contributions	463,920			463,920
	3 Gross income (line 1 minus line 2)	63,000			63,000
	4 Cash prizes				
	5 Noncash prizes				
တ္	6 Rent/facility costs				
Expenses	7 Food and beverages	62,986			62,986
ă	8 Entertainment				
Direct Direct	9 Other direct expenses	77,865			77,865
ā	10 Direct expense summary Add lines 4	1 through 9 ın column (d)		140,851
	11 Net income summary Subtract line 1	.0 from line 3, column (d	1)		-77,851
Paı	t III Gaming. Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on F	Form 990, Part IV, line	e 19, or reported mo	re than \$15,000 on
Revenue		(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d) Total gaming (add col (a) through col (c))
Re	1 Gross revenue				
Ses	2 Cash prizes				
Expenses	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	│ Yes <u>%</u> │ No		│	
	7 Direct expense summary Add lines 2	2 through 5 in column (d	· · · · · ·		
	8 Net gaming income summary Subtra	act line 7 from line 1, col	lumn (d)		
9	Enter the state(s) in which the organiza	tion conducts daming a	ctivities		
a	Is the organization licensed to conduct				Yes No
b	If "No," explain				
10a	Were any of the organization's gaming I	icenses revoked, suspe	nded or terminated durinc	the tax year?	Yes No
b	If "Yes," explain	,			
			·	·	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data Schedule I
(Form 990) | Grants and O
Governments a

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

Department of the

Internal Revenue Service

Name of the organization

Treasury

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

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

▶ Information about Schedule I (Form 990) and its instructions is at $\underline{www.irs.gov/form990}$.

OMB No 1545-0047

2015

DLN: 93493044025297

Open to Public Inspection

Schedule I (Form 990) 2015

Employer identification number

The Harry S Truman Library Institute National and International Affairs						43-6042632	
Part I General Information	n on Grants an	d Assistance				•	
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization 	ward the grants or a	ssistance?				stance, and	「✓ Yes N
Part II Grants and Other Assistation that received more than				plete if the organization	answered "Yes" on F	Form 990, Part IV, line 2:	L, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
Enter total number of section 5Enter total number of other orga	,	5					

Cat No 50055P

Return Reference

Explanation

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

PAYABLE TO THE AWARDEE AND REQUIRE NO FURTHER MONITORING

(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	12	13,204			
(2) Dissertation Year Fellowship	4	32,000			
(3) JOHN K HULSTON SCHOLARSHIP	1	2,500			
(4) HARRY S TRUMAN BOOK AWARD	1	2,500			
(5) SCHOLAR'S AWARD	1	15,000			
(6) Book Award	1	174			
		!	1		

Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
---------	--

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 EXSITING TRUMAN HISTORIOGRAPHY, AND TWO
	LETTERS OF REFERENCE RESEARCH GRANTS, AWARDED BIANNUALLY IN APRIL AND OCTOBER, REQUIRE TRAVEL TO THE TRUMAN
	LIBRARY FOR STUDY OF ITS ARCHIVAL COLLECTIONS ONE-TIME PAYMENTS ARE DISBURSED DIRECTLY AND PAYABLE TO THE AWARDEE
	UPON COMPLETION OF THE RESEARCH TRIP AND DO NOT REQUIRE ANY FURTHER MONITORING THE SPRING ROUND OF RESEARCH
	GRANTS INCLUDES THE AWARD OF ONE ENDOWED JOHN K HULSTON SCHOLARSHIP, WHICH PROVIDES \$2,500 TO SUPPORT RESEARCH
	FOR A SINGLE PROJECT REQUIRING TRAVEL TO THE TRUMAN LIBRARY AND ADDITIONAL ARCHIVAL REPOSITORIES CONVENTIONAL
	RESEARCH GRANT GUIDELINES AND EXPECTATIONS APPLY, HOWEVER, APPLICANTS ARE ALSO REQUIRED TO SUBMIT A DETAILED
	PROJECT BUDGET OUTLINING THE ADDITIONAL REPOSITORIES TO BE CONSULTED AND HOW MATERIALS AT THOSE REPOSITORIES FIT
	INTO THE LARGER PROJECT DECISIONS REGARDING SELECTION OF DISSERTATION YEAR FELLOWSHIP AND SCHOLAR'S AWARD WINNERS
	ARE MADE VIA A SIMILAR APPLICATION PROCESS DISSERTATION YEAR FELLOWSHIP PAYMENTS ARE DISBURSED DIRECTLY AND
	PAYABLE TO THE AWARDEE IN TWO INSTALLMENTS SCHOLAR'S AWARD PAYMENTS CAN BE DISBURSED DIRECTLY AND PAYABLE TO THE
	AWARDEE OR THEIR INSTITUTION AND ARE PAYABLE 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 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 DISBURSED DIRECTLY AND

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule J (Form 990)

Compensation Information

Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

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

► Attach to Form 990.

DLN: 93493044025297 OMB No 1545-0047

2015

Depai Freas	rtment of the ury	► Information about Schedule J (Fe	orm 990) and	lits instructions is at <u>www.irs</u>		en to Inspo		
nternal Revenue Service								
The	me of the organız Harry S Truman ⊔br Ional and Intemation	ary Institute			Employer identification 43-6042632	on nun	nber	
Pa	nt Ouesti	ons Regarding Compensation	1		1+3-00+2032			
	- Quidous		•				Yes	No
1a		opiate box(es) if the organization pro Section A , line 1a Complete Part III						
		s or charter travel	· <u> </u>	using allowance or residence fo	_			
		companions	•	ments for business use of per	•			!
	<u> </u>	nification and gross-up payments		alth or social club dues or initia				ļ
	<u> </u>	nary spending account	•	sonal services (e g , maid, cha		j i		
	•				,			Ì
b		xes in line 1a are checked, did the or or provision of all of the expenses de				1 b		
2	-	ation require substantiation prior to r	_		•			
	directors, truste	ees, officers, including the CEO/Exec	utive Directo	or, regarding the items checke	d in line 1a?	1b 2		
3	organization's (ıf any, of the following the filing orgar CEO/Executive Director Check all th ed organization to establish compens	at apply Do	not check any boxes for method	ods			
	√ Compensa	ation committee	☐ Writ	tten employment contract				
	Independe	ent compensation consultant	✓ Cor	mpensation survey or study				
	Form 990	of other organizations	✓ App	proval by the board or compens	sation committee			ļ
4	During the year or a related org	r, did any person listed on Form 990, anization	Part VII, Sec	ction A , line 1a with respect to	the filing organization			
а	Receive a seve	rance payment or change-of-control	payment?			4a		Νo
b	Participate in, c	or receive payment from, a supplemer	ntal nonqualif	fied retirement plan?		4b		Νo
c	Participate in, c	or receive payment from, an equity-ba	sed compen	sation arrangement?		4c		Νo
	If "Yes" to any	of lines 4a-c, list the persons and pro	ovide the app	olicable amounts for each item	ın Part III			
	Only 501(c)(3)	, 501(c)(4), and 501(c)(29) organizat	ions must co	mnlete lines 5-9				
5	For persons list	ted on Form 990, Part VII, Section A contingent on the revenues of		•	e any			
а	The organizatio	-				5a		No
b	Any related org					5b		Νo
	If "Yes," on line	e 5a or 5b, describe in Part III						
6	'	ed on Form 990, Part VII, Section A contingent on the net earnings of	, line 1a, did	the organization pay or accrue	e any			
а	The organizatio	n?				6a		No
b	Any related org	anization?				6b		Νo
	If "Yes," on line	e 6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Section A escribed in lines 5 and 6? If "Yes," d			on-fixed	7		No
8		nts reported on Form 990, Part VII, posting and contract exception described in				8		No
9	If "Yes" on line	8, did the organization also follow the	e rebuttable į	presumption procedure describ	ped in Regulations			

section 53 4958-6(c)?

Page 2

Schedule J (Form 990) 2015

Mote: The sam of columns (b)(i) (iii	ij for each fistea marvia	dar mast equal the tota	ramount of Form 330,	rate VII, Section 74, III	e 14, applicable colai	mi (b) and (c) amound	S for that marviadar
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	` '	(E) Total of columns	• •
	Base	(ii) Bonus & incentive	(iii) Other reportable	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	` '
		Base (i) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 Morgan A Burden	<i>(</i> :)	179.907	0	_	12.020	20 642	212 400	0

12,938

20,643

213,488

Executive Director/Ex Officio

Direct

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015	Page 3					
Part IIII Supplemental Inform	nation					
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information						
Return Reference	Explanation					

Schedule J (Form 990) 2015

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE M**

DLN: 93493044025297 OMB No 1545-0047

2015

Open to Public

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Department of the Treasury

(Form 990)

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

nter	nal Revenue Service					HE SEE	<u> ПОШ</u>	
	ne of the organization				Employer identificati	ion numb	er	
	Harry S Truman Library Institute anal and International Affairs				43-6042632			
Pa	art I Types of Property				13 0012032			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribi	- etermının	_	s
2	Art—Works of art Art—Historical treasures Art—Fractional interests							
6	Books and publications Clothing and household goods Cars and other vehicles Boats and planes							
8	Intellectual property Securities—Publicly traded .	X	2	35,670	Fair Market Value			
10	Securities—Closely held stock . Securities—Partnership, LLC,			,				
	or trust interests							
	contribution—Historic structures							
	Qualified conservation contribution—Other Real estate—Residential .							
	Real estate—Commercial Real estate—Other							
	Collectibles Food inventory							
21	Drugs and medical supplies . Taxidermy							
23	Historical artifacts							
25	Archeological artifacts Other ► ()							
27	O ther ► () O ther ► () O ther ► ()							
	Number of Forms 8283 received for which the organization comple				29			
30a	During the year, did the organiza	ation receiv	e by contribution any prope	rty reported in Part I, lines	1 through 28, that	Y	es	No
	it must hold for at least three ye for exempt purposes for the enti			ition, and which is not requ	red to be used	30a		Νo
1 31	 If "Yes," describe the arrangement Does the organization have a gif 			review of any non-standard	contributions?	31		Νo
32a	Does the organization hire or us	·		·	Ī			

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

contributions?

b If "Yes," describe in Part II

describe in Part II

32a

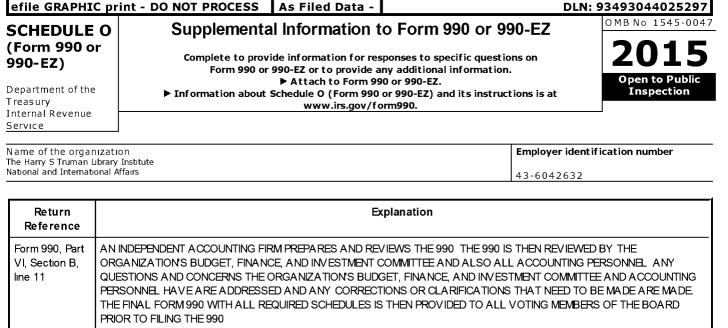
Νo

Schedule M (Form 990) (2015)

Page 2

Schedule M (Form 990) (2015)

Return Reference Explanation



Return Reference	Explanation
Form 990, Part	AT THE TIME OF HIRE OR ELECTION (IN THE CASE OF DIRECTORS) AND ANNUALLY HEREAFTER, THE OFFICERS,
VI, Section B,	DIRECTORS, AND KEY EMPLOYEES SHALL PROVIDE THE APPLICABLE CONFLICT OF INTEREST DISCLOSURES WHICH WILL
line 12c	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

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 CHAIR WILL APPOINT A COMPENSATION SUBCOMMITTEE OF THE BUDGET, FINANCE AND INVESTMENT COMMITTEE. THE SUBCOMMITTEE, WHICH INCLUDES THE BOARD CHAIR, WILL DETERMINE THE TOTAL COMPENSATION PACKAGE FOR THE EXECUTIVE DIRECTOR. THE EXECUTIVE DIRECTOR SHALL MAKE RECOMMENDATIONS FOR THE SALARIES AND INCENTIVE PAY MENTS FOR OTHER EXECUTIVES OR SALARIED EMPLOY EES THESE AMOUNTS WILL BE PROVIDED ANNUALLY TO THE COMPENSATION SUBCOMMITTEE FOR REVIEW AND APPROVAL THE SUBCOMMITTEE WILL REPORT THE AGGREGATE INCREASES TO THE BUDGET, FINANCE AND INVESTMENT COMMITTEE, THE EXECUTIVE COMMITTEE AND THE BOARD OF DIRECTORS FOR APPROVAL VIA THE ANNUAL FISCAL YEAR BUDGET PROCESS OR ANY SUBSEQUENT BUDGET AMMENDMENT 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 COMPENSATION SUBCOMMITTEE MEMBERS WHO WERE PRESENT DURING THE DEBATE AND THOSE WHO VOTED TO A PPROVE A COMPENSATION DECISION, D) ANY ACTIONS TAKEN WITH RESPECT TO THE INVOLVEMENT OF A MEMBER WHO MAY HAVE A CONFLICT OF INTEREST

Return Reference	Explanation
Form 990, Part VI, Section	THE INSTITUTE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE
C, line 19	AVAILABLE TO THE PUBLIC UPON REQUEST

Return Reference	Explanation
Form 990, Part IX, line 24e	Exhibits Program service expenses 40,926 Management and general expenses 0 Fundraising expenses 0 Total expenses 40,926 summer Teacher Institute Program service expenses 37,383 Management and general expenses 0 Fundraising expenses 0 Total expenses 37,383 contingency/other Program service expenses 31,932 Management and general expenses 348 Fundraising expenses 0 Total expenses 32,280 WHITE HOUSE DECISION CENTER. Program service expenses 31,849 Management and general expenses 0 Fundraising expenses 31,849 annual membership programs Program service expenses 0 Management and general expenses 0 Fundraising expenses 21,345 Total expenses 21,345 TRU MAGAZINE PUBLICATION Program service expenses 11,422 Management and general expenses 0 Total expenses 11,422 PREventative Maintenance Program service expenses 6,630 Management and general expenses 0 Fundraising expenses 0 Total expenses 0 Total expenses 6.630 VOLUNTEER/INTERN SERVICES Program service expenses 5,110 Management

and general expenses 0 Fundraising expenses 0 Total expenses 5,110

Return Reference	Explanation
FORM 990, PART IV. LINE 12 &	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
W 20	SELECTION OF AN INDEPENDENT ACCOUNTANT ACCOUNTING METHOD USED TO PREPARE FORM 990 FORM 990, PART
	XII, 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