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# Return of Organization Exempt From Income Tax

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

DLN: 93493044016009 OMB No 1545-0047

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:<sub>orm</sub>990

foundations) Do not enter social security numbers on this form as it may be made public

Open to Public ▶ Information about Form 990 and its instructions is at www IRS gov/form990 Inspection For the 2017 calendar year, or tax year beginning 10-01-2017 , and ending 09-30-2018 C Name of organization THE HARRY S TRUMAN LIBRARY INSTITUTE D Employer identification number ☐ Address change NATIONAL AND INTERNATIONAL AFFAIRS 43-6042632 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) 5151 TROOST AVENUE NO 300 ☐ Amended return ☐ Application pending (816) 400-1212 City or town, state or province, country, and ZIP or foreign postal code KANSAS CITY, MO  $\,$  64110  $\,$ G Gross receipts \$ 17,793,608 Name and address of principal officer H(a) Is this a group return for CLYDE E WENDEL ☐Yes ☑No subordinates? 5151 TROOST AVENUE NO 300 H(b) Are all subordinates KANSAS CITY, MO 64110 ☐ Yes ☐No included? Tax-exempt status 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW TRUMANLIBRARYINSTITUTE ORG L Year of formation 1957 M State of legal domicile **K** Form of organization lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities TO PRESERVE AND PROMOTE THE ENDURING LEGACY OF HARRY S. TRUMAN, AMERICA'S 33RD PRESIDENT Activities & Governance Check this box  $\blacktriangleright$   $\square$  if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 11 Total number of volunteers (estimate if necessary) . . 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 **7**b 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **Current Year** 2,626,654 3,589,917 8 Contributions and grants (Part VIII, line 1h) . 82,975 **9** Program service revenue (Part VIII, line 2g) . . . 72,034 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 620,552 1,163,628 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -39,762 -41,959 3,279,478 4,794,561 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . 90,156 75,567 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 999,356 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶802,229 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . 2,272,704 2,452,753 3,160,672 3,527,676 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . 118,806 1,266,885 Assets or d Balances **Beginning of Current Year End of Year** 12,759,299 13,733,703 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 12,759,299 13,733,703 22 Net assets or fund balances Subtract line 21 from line 20 . Part III 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 2019-02-04 Signature of officer Sign Here JOHN A MACDONALD TREASURER Type or print name and title Print/Type preparer's name SUZANNE B KIMBROUGH Preparer's signature SUZANNE B KIMBROUGH Date PTIN Check | If P01320005 Paid self-employed Firm's name RUBINBROWN LLP Firm's EIN > 43-0765316 **Preparer** 

May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions.

Firm's address ► 1200 MAIN STREET SUITE 1000

KANSAS CITY, MO 64105

Use Only

Form **990** (2017) Cat No 11282Y

✓ Yes 🗆 No

Phone no (816) 472-1122

Form	990 (2017)					Page <b>2</b>
Par	t IIII Statement	of Program Servic	e Accomplis	hments		
	Check if Sched	dule O contains a respo	nse or note to a	any line in this Part III		🗹
1	Briefly describe the oi	rganızatıon's mıssıon				
AND THE THE POLI	OUTREACH ACTIVITIES NATIONAL ARCHIVES A ENDURING LEGACY OF	S OF THE HARRY'S TR IND RECORDS ADMINI AMERICA'S 33RD PRE THE INSTITUTE PROV	UMAN LIBRARÝ STRATION TOG SIDENT TO ENR IDES FUNDING	ÁNÓ MUSEUM, ONE ÓI ETHER WITH ITS PUBL ICH THE PUBLIC'S UNI AND SUPPORT FOR TH	IS DEDICATED TO THE PRESERVA FOUR NATION'S 14 PRESIDENTIA LIC PARTNER, THE TRUMAN LIBRA DERSTANDING OF HISTORY, THE E HARRY S TRUMAN LIBRARY AN UTREACH PROGRAMS	L LIBRARIES OVERSEEN BY ARY INSTITUTE PRESERVES PRESIDENCY, PUBLIC
2	Did the organization i	undertake any significa	nt program serv	vices during the year w	hich were not listed on	
	the prior Form 990 or	990-EZ?				🗌 Yes 🗹 No
	If "Yes," describe the	se new services on Sch	nedule O			
3	Did the organization of	cease conducting, or m	ake significant i	changes in how it cond	ucts, any program	
	services?					🗌 Yes 🗹 No
	If "Yes," describe the	se changes on Schedul	e O			
4	Section 501(c)(3) and	ition's program service d 501(c)(4) organizatio ue, if any, for each pro	ns are required	to report the amount	largest program services, as mea of grants and allocations to others	asured by expenses s, the total
4a	(Code	) (Expenses \$	359,844	including grants of \$	75,567 ) (Revenue \$	88,625 )
	See Additional Data					, . 
4b	(Code	) (Expenses \$	198,044	including grants of \$	) (Revenue \$	)
	See Additional Data					<u> </u>
4c	(Code	) (Expenses \$	58,607	ıncludıng grants of \$	) (Revenue \$	)
	See Additional Data					
	(Code	) (Expenses \$	1,678,411	including grants of \$	) (Revenue \$	6,341 )
4d	Other program servic	es (Describe in Schedi	ıle O )			
	(Expenses \$	1,678,411 ıncl	uding grants of	\$	) (Revenue \$	6,341)
4e	Total program serv	ice expenses ▶	2,294,9	06		

Yes

Page 3

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or X as applicable

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 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?

**Checklist of Required Schedules** 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 1 2 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🛸 . . . Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 for public office? If "Yes," complete Schedule C, Part I 💆 . . . . . . . . . . . . . . Section 501(c)(3) organizations.

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

ın Part X, lıne 16? *If "Yes," complete Schedule D, Part IX* 😼 . . . . . . . . . . . . . . . . .

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .

**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 . . . . . . . . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

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 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . . .

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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25b

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28b

28c

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35h

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Yes

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Yes

Yes

Par	Checklist of Required Schedules (continued)			
			Yes	No
20a	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		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	21		No

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
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
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

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

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? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

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

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)?

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

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

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

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

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

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 conservation

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

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

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

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

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

instructions for applicable filing thresholds, conditions, and exceptions)

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

current and former officers, directors, trustees, key employees, and highest compensated employees? If "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

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 38	1 1		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return	4 1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
-		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<u> </u>		
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
_	1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
_		8		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter  Institution foce and capital contributions included on Part VIII. June 12			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders			
	Gross income from members or snareholders			
ט	against amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for			
	additional information the organization must report on Schedule O  Enter the amount of reserves the organization is required to maintain by the states in	13a		
	which the organization is licensed to issue qualified health plans	]		
C	Enter the amount of reserves on hand			
<b>4</b> a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	-		

Par	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	No" respo	nse to li	nes
	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	30		
	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	29		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	on 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<u> </u>		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year bethe following	у		
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Rever	าue Code	⊋.)	
			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 activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exemp status with respect to such arrangements?			
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only available for public inspection. Indicate how you made these available. Check all that apply	/)		
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	— (			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			

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Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part V	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
ear	e this table for all persons require										-
of compensa	of the organization's <b>current</b> off tion Enter -0- in columns (D), (	E), and (F) if no	compe	nsatı	on v	vas į	paid			-	
	of the organization's <b>current</b> key		•								
vho received organization	organization's five <b>current</b> high d reportable compensation (Box and any related organizations	5 of Form W-2	and/or E	Зох 7	of F	orm	1099	-MIS	SC) of more than \$1	00,000 from the	
of reportable	of the organization's <b>former</b> office compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	-				
List all operation	of the organization's <b>former dire</b> , more than \$10,000 of reportab	ectors or trust le compensation	<b>ees</b> that n from t	t rece the or	gan	l, ın ızatı	the ca	paci any	ty as a former direc v related organization	tor or trustee of the ons	9
	in the following order individua d employees, and former such p		ectors, i	ınstıtı	utior	nal t	rustee	s, of	ficers, key employe	es, highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed orgar	nizatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related	rage Position (do not check more than one box, unless person is both an officer and a director/trustee)					on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Former Highest compensated employee Key employee Officer	,	MISC)	related organizations			
See Additiona	al Data Table										

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (D) (A) (B) (C) (E) (F) Name and Title Position (do not check more Average Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation director/trustee) organization (Worganizations (Wany hours from the for related 2/1099-MISC) 2/1099-MISC) organization and Individual trustee or director Highest compensated employee Former Officer organizations related Institutional below dotted organizations employee line) Trustee See Additional Data Table • c Total from continuation sheets to Part VII, Section A . • 283,645 0 61,207 d Total (add lines 1b and 1c) . . . . . . 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 1 Yes No 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . 3 Nο 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such ındıvıdual . 4 Yes Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for 5 services rendered to the organization  $^2$  If "Yes," complete Schedule J for such person . . . . . . . . . 5 Νo Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year (A) (B) (C) Name and business address Description of services Compensation **GALLAGHER & ASSOCIATES** MUSEUM REDESIGN PLANNING 1,144,224 8665 GEORGIA AVENUE SILVER SPRING, MD 20910

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

MONADNOCK MEDIA 59 NORTH STREET HATFIELD, MA 01038

compensation from the organization ▶ 2

268,000

MUSEUM REDESIGN PLANNING -

AUDIO/VISUALS

Part \	<u> </u>			a respo	onse or note to any	line in this Part VI	II			$\square$
		5.153.11.11	<u> </u>	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(A) Total revenue	( <b>B</b> ) Related exemp	or ot on	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
10	<b>1</b> a	a Federated campaig	ns	1a			Tevent	16		312-314
ints unt	ı	<b>b</b> Membership dues		<b>1</b> b	267,995					
9 5 5 E	(	c Fundraising events		1c	473,909					
fiş _A		<b>d</b> Related organizatio	ns	1d						
<u>.</u> 		e Government grants (co	ontributions)	1e						
Contributions, Gifts, Grants and Other Similar Amounts	1	<ul> <li>All other contributions, and similar amounts n above</li> </ul>	, gıfts, grants, ot ıncluded	1f	2,848,013					
Contributions, Gifts, Grants and Other Similar Amounts		Noncash contribution     In lines 1a-1f \$      Tata   Add lines 1a-1		89,3						
ھ ت	n	<b>Total.</b> Add lines 1a-1	т	• •	<del></del> -	3,589,917				
골	٦-				Business	900099	93.075	82.0	_	
7	2a	WHITE HOUSE DECISIO	N CENTER REV	ΞN		900099	82,975	82,97	5	
ı, αξ	b	· <del></del>		_						
5	c d									
<u>چ</u>	e									
Program Service Revenue	_	All other program se	rvice revenue	<u> </u>						
Ě	g.	Total.Add lines 2a-2f	·		<b>&gt;</b>	82,975				
		Investment income (ii			interest, and other	1				
		similar amounts) .				281,0	16			281,016
		Income from investme Royalties				`				
	٠,	Koyanies i i i	(ı) Rea		(II) Personal	<u> </u>		+		
	6a	Gross rents			, ,	1				
	h	Less rental expenses				_				
		, Less Terred expenses								
	c	Rental income or (loss)								
	d	Net rental income o	r (loss) .     .			4				
			(ı) Securi		(II) Other					
	7a	Gross amount from sales of				1				
		assets other than inventory	13,	763,959						
	b	<ul> <li>Less cost or other basis and sales expenses</li> </ul>		381,347						
		Gain or (loss)		382,612		]	12			002.64
		I Net gain or (loss) . Gross income from fi			<b>•</b>	882,6	12			882,612
Other Revenue	oa		473,909 ed on line 1c)	of	63,750					
Jev	b	Less direct expense				<b>⊣</b>				
a l		: Net income or (loss)			ents	لـ 53,9!	50			-53,950
o th O	9a	Gross income from g See Part IV, line 19		ies a						
		Less direct expense		b		}				
		: Net income or (loss) aGross sales of invent		activit	ies <b>&gt;</b>	1				
		returns and allowand		a						
	b	Less cost of goods s	sold	b						
	С	Net income or (loss)		invent						
ŀ	11	Miscellaneous MISCELLANEOUS IN			Business Code 900099	9 11,99	91	11,991		
		MISCELLANEOUS IN	ICOME		30003.	11,5		11,551		
	b	·								
	c	:								
	,	All other revenue .								
		Total. Add lines 11a			· . •		+	+		
		: <b>Total revenue.</b> See				11,99	91			
		otal levellue. 3ee	ansu accions	• •	· · · •	4,794,50	51	94,966		0 1,109,678

Form 990 (2017)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete all co	-	·	• •	_
Check if Schedule O contains a response or note to any	line in this Part IX			<u>V</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraisingexpenses
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	60,132	60,132		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16	15,435	15,435		
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	362,239	52,003	189,248	120,988
<b>6</b> 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	422,995	200,821	1,519	220,655
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	26,865	10,571	108	16,186
9 Other employee benefits	130,920	50,763	497	79,660
<b>10</b> Payroll taxes	56,337	18,443	9,427	28,467
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal	34,953		34,953	
c Accounting	25,750		25,750	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	44,291		44,291	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	22,994		22,994	
12 Advertising and promotion	77,361	77,361		
13 Office expenses	77,288		77,288	
<b>14</b> Information technology	46,307	46,307		
15 Royalties				
<b>16</b> Occupancy				
<b>17</b> Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	12,537		12,537	
<b>20</b> Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				

11,929

1,306,536

323,132

198,044

58,608

213,023

3,527,676

1,306,536

198,044

58,608

199,882

2,294,906

11,929

430,541

323,132

13,141

802,229

Form **990** (2017)

23 Insurance . . .

expenses on Schedule O )

**b** FUNDRAISING OTHER DIREC

a CAPITAL PROJECTS

c PUBLIC PROGRAMS

e All other expenses

d EXHIBITS

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

25 Total functional expenses. Add lines 1 through 24e 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)

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10c

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14 15

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34

0

5.976.318

3.279.833

3.503.148

12,759,299

12,759,299

12.710.182

12,759,299

Page **11** 

13.687.831

13,733,703

0

5.435.327

4,745,228

3.553.148

13,733,703

13,733,703

Form **990** (2017)

# Check if Schedule O contains a response or note to any line in this Part IX

Accounts receivable, net .

Part II of Schedule L

II of Schedule L . . . . .

Notes and loans receivable, net . Inventories for sale or use .

Prepaid expenses and deferred charges Land, buildings, and equipment cost or other

basis Complete Part VI of Schedule D Less accumulated depreciation

Intangible assets . . . . .

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here 

and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part

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

10a

10b

		Beginning of year		End of year
1	Cash-non-interest-bearing	49,117	1	45,87
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	

ste
Assets

	1
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Assets	7 8
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34

Liabilities 22

Fund Balances

Assets or 30

Net

Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Nο

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis Consolidated basis ☐ Both consolidated and separate basis

b Were the organization's financial statements audited by an independent accountant? 2b Yes

3a

3b

No

Form 990 (2017)

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

consolidated basis, or both

✓ Separate basis 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? 2c Yes If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

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

Audit Act and OMB Circular A-133?

## **Additional Data**

Software ID:

Software Version:

EIN: 43-6042632

Name: THE HARRY S TRUMAN LIBRARY INSTITUTE

NATIONAL AND INTERNATIONAL AFFAIRS

Form 990 (2017)

### Form 990, Part III, Line 4a:

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 2017-2018 SCHOOL YEAR WAS 49,212 WITH AN ADDITIONAL 57,528 PARTICIPATING IN ONLINE PROGRAMS 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' ACADEMIC CAREERS 6,412 STUDENTS AND ADULTS PARTICIPATED IN THE WHITE HOUSE DECISION CENTER DURING THE FY18 PERIOD (95,000 SINCE 2001) COMMUNITY EDUCATION SCHOLARSHIPS - THE TRUMAN LIBRARY INSTITUTE IS COMMITTED TO PROVIDING AS MANY STUDENTS AS POSSIBLE WITH ACCESS TO THE TRUMAN LIBRARY OVER THE PAST FOURTEEN YEARS, OUR SCHOLARSHIP FUND HAS ALLOWED MORE THAN 55,600 STUDENTS FROM ECONOMICALLY CHALLENGED SCHOOL DISTRICTS TO VISIT AND EXPERIENCE THE TRUMAN LIBRARY'S EDUCATIONAL PROGRAMS AND EXHIBITION'S AT MINIMAL OR NO COST DURING THE 2017-2018 SCHOOL YEAR, 9,661 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 ACTIVITIES IN THE HARRY S 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 2017-2018 SCHOOL YEAR, 13,559 STUDENTS PARTICIPATED IN THE TRUMAN LIBRARY'S MUSEUM TOUR PROGRAM TRUMAN FOOTLOCKER - 4.411 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 3, 2018, 450 STUDENTS COMPETED IN THIS REGIONAL EVENT OF THESE, EIGHTY-EIGHT STUDENTS WENT ON TO COMPETE AT THE MISSOURI STATE LEVEL AND FOURTEEN FINISHED FIRST, SIXTEEN OF THESE THEN WENT ON TO COMPETE IN THE NATIONAL FINALS AND ONE PLACED FIRST 15TH ANNUAL SUMMER TEACHER CONFERENCE - "THE UNITED STATES AND WORLD WAR I " FIFTY-FOUR TEACHERS FROM ACROSS THE NATION ATTENDED A WEEK-LONG EDUCATORS' CONFERENCE AT THE TRUMAN LIBRARY JULY 16-20, 2018 CURRICULUM MATERIALS BASED ON THE CONFERENCE WERE DEVELOPED FOR USE IN THE CLASSROOM AND POSTED ON THE TRUMAN LIBRARY'S WEBSITE TO DATE, APPROXIMATLEY 400 LESSON PLANS HAVE BEEN POSTED ONLINE READING LIKE A HISTORIAN THIRD GRADE PROGRAM - THIS IS A MUSEUM-BASED, TRUMAN-FOCUSED, AND FIRST-OF-ITS-KIND INTERACTIVE EDUCATIONAL EXPERIENCE FOR THIRD GRADE STUDENTS. THE STUDENTS INVESTIGATE THE TRUMAN LIBRARY MUSEUM'S EXHIBITS AS THEY STUDY THE THREE BRANCHES OF GOVERNEMENT THEIR FOCUS IN THE MUSEUM IS THE EXECUTIVE BRANCH, THE PRESIDENT'S RESPONSIBILITIES AND HARRY TRUMAN'S EXPERIENCES AND CHARACTER TRAITS LEADING UP TO, AND DURING, HIS PRESIDENCY DURING THE 2017-2018 SCHOOL YEAR, 1,186 THIRD-GRADERS FROM NINETEEN INDEPENDENCE ELEMENTARY SCHOOLS PARTICIPATED IN THE PROGRAM AN EXTENSION OF THE THIRD GRADE PROGRAM WILL BE PILOTED IN THE 2018-2019 SCHOOL YEAR WITH FIVE SCHOOLS FROM THE KANSAS CITY, KANSAS SCHOOL DISTRICT READING LIKE A HISTORIAN MIDDLE AND HIGH SCHOOL PROGRAM - IS AN IN-CLASSROOM EXPERIENCE RATHER THAN A MUSEUM-BASED EXPERIENCE TEN MIDDLE AND HIGH SCHOOL TEACHERS FROM THE INDEPENDENCE SCHOOL DISTRICT WERE IMMERSED IN AN INTENSIVE WEEK OF CURRICULUM DEVELOPMENT TEACHERS ARE PROVIDED WITH ACCESS TO EXPERTS IN THE SUBJECT AREA AND ARCHIVISTS TO ASSIST WITH CONTENT AND RESOURCES ULTIMATELY, THIS PROGRAM PROVIDES TEACHERS WITH A TRUMAN CURRICULUM, COMPLETE INVESTIGATIVE UNITS, LESSON PLANS, AND RESOURCES EACH UNIT IS DESIGNED TO DEVELOP STUDENTS' CRITICAL THINKING AND INVESTIGATIVE SKILLS AND USES PRIMARY SOURCE MATERIALS FROM THE TRUMAN LIBRARY TO TEACH THEM ABOUT HISTORY AND PRESIDENT TRUMAN ADDITIONAL EDUCATIONAL RESOURCES PROVIDED TO TEACHERS AND STUDENTS INCLUDE CURRICULUM GUIDES, MEDIA LENDING LIBRARY, CLASSROOM PRESENTATIONS, PRESIDENTIAL TRIVIA CONTEST, EDUCATOR WORKSHOPS, AND AN 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 2018, THE INSTITUTE AWARDED TWENTY RESEARCH GRANTS, ONE JOHN K HULSTON SCHOLARSHIP, ONE DISSERATION YEAR FELLOWSHIP, ONE SENIOR SCHOLAR'S AWARD, AND ONE TRUMAN BOOK AWARD. A TOTAL OF \$75.567 WAS EXPENDED THIS FISCAL YEAR ON THE GRANTS AND AWARDS PROGRAM DIGITAL ARCHIVES - 2018 ACCOMPLISHMENTS 2,349 PHOTOGRAPHS WERE TAKEN OF 1,348 THREE-DIMENSIONAL COLLECTION OBJECTS AND 631 TWO-DIMENSIONAL OBJECTS WERE SCANNED 73 BOXES (APPROXIMATELY 32 LINEAR FEET) FROM TRUMAN'S POST-PRESIDENTIAL PAPERS WERE PROCESSED APPROXIMATELY 4,600 PAGES OF SPECIALLY PROTECTED HOLDINGS (HARRY TRUMAN'S AND OTHER VIP HANDWRITING) WERE PHOTOCOPIED TO PRESERVE FILE ORIGINALS 544 PHOTOS WERE DESCRIBED FROM THE RICHARD BECKMAN COLLECTION 122 PHOTOS FROM THE RAYMOND FOLEY COLLECTION WERE ACCESSIONED, SCANNED AND DESCRIBED 124 PHOTOS WERE ACCESSIONED AND SCANNED FROM HARRY TRUMAN'S 1948 NEW YORK CAMPAIGN AND HIS 1949 INAUGURATION 3,535 PHOTOGRAPH DESCRIPTIONS WERE VERIFIED IN FY18, BRINGING THE TOTAL NUMBER OF PHOTOS IN THE ONLINE DATABASE TO 53,640 TRUMANLIBRARY ORG SUPPORTED WITH INSTITUE FUNDING, THIS WEBSITE CONTINUES TO BE A RICH ONLINE ARCHIVAL RESOURCE FOR RESEARCHERS HISTORIANS, AUTHORS, STUDENTS, AND EDUCATORS WORLDWIDE DURING FY18, WEBSITE PAGEVIEWS TOTALED 2,400,000 TRUMANLIBRARYINSTITUTE ORG STATE-OF-THE-ART AND VISUALLY STUNNING, THE INSTITUTE'S WEBSITE WAS DESIGNED TO COMPLEMENT THE NATIONAL ARCHIVES AND RECORDS ADMINISTRATION'S TRUMANLIBRARY ORG WEBSITE DURING FY18. WEBSITE PAGEVIEWS TOTALED 104.912

#### Form 990, Part III, Line 4b:

INCLUDE 6.022 FACEBOOK (14% INCREASE), 1.741 TWITTER (27.5% INCREASE), AND 1.75 INSTAGRAM (NEW) FOLLOWERS E-NEWS SUBSCRIBERS TOTALED 9.289 NEW TRUMAN LEGACY SERIES INTRODUCED IN FISCAL YEAR 2018 NOVEMBER 16, 2017 - "THE ACCIDENTAL PRESIDENT HARRY S TRUMAN AND THE FOUR MONTHS THAT CHANGED THE WORLD" FEATURING AUTHOR A J BAIME AND PRESENTED IN PARTNERSHIP WITH RAINY DAY BOOKS ATTENDANCE ESTIMATED AT 331 DECEMBER 19. 2017 - "ULTIMATE INSIDERS. WHITE HOUSE PHOTOGRAPHERS AND HOW THEY SHAPE HISTORY" PRESENTED BY WHITE HOUSE CORRESPONDENT FOR U.S. NEWS AND WORLD REPORT KENNETH T. WALSH, ATTENDANCE ESTIMATED AT 130, MAY 14, 2018 - 70TH ANNIVERSARY OF PRESIDENT TRUMAN'S RECOGNITION OF THE FLEDGLING STATE OF ISRAEL FEATURING ECONOMIST AND ACTOR BEN STEIN ATTENDANCE ESTIMATED AT 239 MAY 24, 2018 - "THE SOUL OF AMERICA" THE BATTLE FOR OUR BETTER ANGELS" FEATURING AUTHOR ION MEACHAM IN CONVERSATION WITH WASHINGTON POST COLUMNIST DAVID VON DREHLE ATTENDANCE ESTIMATED AT 708 1ULY 26, 2018 - "SERVING AS ONE" THE 70TH ANNIVERSARY OF PRESIDENT TRUMAN'S EXECUTIVE ORDER 9981 DESEGREGATING THE ARMED FORCES FEATURING COL NORMA J BRADFORD (RET.) AND RAWN JAMES, AUTHOR OF "DOUBLE V. HOW WARS, PROTEST AND HARRY TRUMAN DESEGREGATED AMERICA'S MILITARY." ATTENDANCE ESTIMATED AT 148 JULY 16-AUGUST 23, 2018 - THREE "CAPTAIN TRUMAN IN WORLD WAR I" PROGRAMS, PRESENTED IN PARTNERSHIP WITH THE NATIONAL WORLD WAR I MUSEUM AND MEMORIAL 1) "AMERICAN JEWS IN WORLD WAR I" FEATURING 2016 TRUMAN BOOK AWARD WINNER MICHAEL NEIBERG, 2) "MISREADING RUSSIA FOR 101 YEARS" FEATURING WILL ENGLUND OF THE WASHINGTON POST, 3) "HARRY S TRUMAN THE SOLDIER FROM INDEPENDENCE" FEATURING LOCAL AUTHOR DENNIS GIANGRECO COMBINED ATTENDANCE ESTIMATED AT 576 SEPTEMBER 27, 2018 - AWARD CEREMONY AND BOOK PROGRAM FEATURING 2018 TRUMAN BOOK AWARD WINNER KEVIN PERAINO FOR "A FORCE SO SWIFT MAO, TRUMAN, AND THE BIRTH OF MODERN CHINA, 1949 " ATTENDANCE ESTIMATED AT 106 OTHER SIGNATURE AND SPECIAL EVENTS OFFERED BY THE TRUMAN LIBRARY INSTITUTE DURING THE FISCAL YEAR 2018 PERIOD INCLUDED OCTOBER 23, 2017 - THE BIENNIAL TRUMAN MEDAL FOR ECONOMIC POLICY AWARDED TO ROBERT J. SHILLER FOR EXTRAORDINARY ACHIEVEMENT IN THE FORMATION AND CONDUCT OF ECONOMIC POLICY

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 COMBINED PROGRAM ATTENDANCE FOR FISCAL YEAR 2018 TOTALED APPROXIMATELY 12.839 PEOPLE (AN INCREASE OF 19.5%)

ADDITIONALLY, TENS OF THOUSANDS OF PEOPLE WERE REACHED THROUGH WEBCASTS, RADIO INTERVIEWS AND TELEVISION BROADCASTS SOCIAL MEDIA INITIATIVES

PROGRAM ATTENDANCE ESTIMATED AT 350 NOVEMBER 4, 2017 - ELEVENTH ANNUAL HOWARD & VIRGINIA BENNETT FORUM ON THE PRESIDENCY WITH PRESIDENTIAL HISTORIAN DORIS KEARNS GOODWIN AND WASHINGTON POST COLUMNIST DAVID VON DREHLE DISCUSSING "THE PRESIDENCY IN THE POST-TRUTH ERA " PROGRAM ATTENDANCE ESTIMATED AT 1,150 NOVEMBER 12, 2017 - SIXTH ANNUAL HON IKE SKELTON VETERANS DAY SALUTE, PRESENTED IN PARTNERSHIP WITH THE CITY OF INDEPENDENCE THIS PROGRAM WAS CREATED BOTH TO HONOR VETERANS AND TO RECOGNIZE THE MILITARY SERVICE OF HARRY S. TRUMAN AND THE ADVOCACY OF

FORMER CONGRESSMAN AND U.S. HOUSE ARMED SERVICES COMMITTEE CHAIR IKE SKELTON. THE KEYNOTE ADDRESS WAS GIVEN BY BRIG. GEN (RET.) PATRICK MORDENTER PROGRAM ATTENDANCE ESTIMATED AT 127 APRIL 5, 2018 - "THE SUPREME COURT IN THE AGE OF PRESIDENT TRUMP" PRESENTED IN PARTNERSHIP WITH THE HISTORICAL SOCIETY FOR THE WESTERN DISTRICT OF MISSOURI, FEATURING CNN SUPREME COURT ANALYST JOAN BISKUPIC AND WASHINGTON POST COLUMNIST DAVID VON DREHLE PROGRAM ATTENDANCE ESTIMATED AT 475 APRIL 19, 2018 - 19TH ANNUAL "WILD ABOUT HARRY" PROGRAM PULITZER PRIZE-WINNING TRUMAN

BIOGRAPHER DAVID MCCULLOUGH GAVE THE KEYNOTE ADDRESS AND WAS AWARDED THE 2018 HARRY S. TRUMAN LEGACY OF LEADERSHIP AWARD. PROGRAM ATTENDANCE ESTIMATED AT 850 MAY - AUGUST 2018 - "VETS VISIT FREE" APPRECIATION TO OUR COUNTRY'S VETERANS FOR THEIR SERVICE FROM ALL WARS 3.251

VETERANS WERE TREATED TO FREE MUSEUM ADMISSION DURING THE 2018 PERIOD (9.466 SINCE THE PROGRAM WAS INTRODUCED IN 2016)

#### Form 990, Part III, Line 4c:

PERIOD WAS 90,458

TRUMAN'S EXTREME MAKEOVER" ON DISPLAY AT THE HARRY S. TRUMAN LIBRARY AND MUSEUM FROM MARCH 10, 2017 THROUGH DECEMBER 31, 2017. IN 1948, PRESIDENT HARRY TRUMAN. ENJOYING A BATH ON THE WHITE HOUSE'S SECOND FLOOR. ALMOST PLUNGED THROUGH THE CEILING OF THE BLUE ROOM INTO A TEA PARTY FOR THE DAUGHTERS OF THE AMERICAN REVOLUTION A HANDPICKED TEAM OF THE COUNTRY'S TOP ARCHITECTS CONDUCTED A SECRET INSPECTION OF THE TROUBLED MANSION AND DECLARED IT IN IMMINENT DANGER OF COLLAPSE. WHAT FOLLOWED WOULD BE THE MOST HISTORICALLY SIGNIFICANT AND POLITICALLY COMPLEX HOME-IMPROVEMENT JOB IN U.S. HISTORY A \$5.7 MILLION, 1.222-DAY, TOP-TO-BOTTOM RENOVATION OF THE WHITE HOUSE COMPLEX. THIS EXHIBITION

SEE SCHEDULE OEXHIBITIONS DURING FISCAL YEAR 2018 PERIOD, THE TRUMAN LIBRARY INSTITUTE PROVIDED FINANCIAL SUPPORT FOR "SAVING THE WHITE HOUSE

FEATURED THE WORK OF WHITE HOUSE PHOTOGRAPHER ABBIE ROWE. A NATIONAL PARK SERVICE PHOTOGRAPHER WITH UNPRECEDENTED ACCESS TO THE WHITE

HOUSE AND THE PRESIDENCY HIS PHOTOGRAPHS OF THE TRUMAN RENOVATION - BEFORE, DURING AND AFTER - FORM A UNIQUE AND INVALUABLE VISUAL RECORD OF ONE OF THE NATION'S MOST IMPORTANT ARCHITECTURAL AND ENGINEERING CHALLENGES OF THE TIME. MUSEUM VISITORS ALSO EXPERIENCED NEVER-BEFORE-SEEN WHITE HOUSE FILM FOOTAGE. ALONG WITH STUNNING ARTIFACTS FROM AMERICA'S FIRST "EXTREME MAKEOVER" "HEROES OR CORPSES CAPTAIN TRUMAN IN WORLD WAR I" ON DISPLAY AT THE HARRY S. TRUMAN LIBRARY AND MUSEUM FROM MARCH 10, 2018 THROUGH DECEMBER 31, 2018. HARRY TRUMAN WAS THE ONLY AMERICAN PRESIDENT TO SERVE IN COMBAT IN WORLD WAR I AS THE CAPTAIN OF AN ARTILLERY BATTERY OF ABOUT 200 MEN, HE TOOK FIRE FROM GERMAN FORCES IN EASTERN

FRANCE DURING THE CLOSING MONTHS OF THE WAR THIS EXHIBITION FOLLOWS TRUMAN'S PERSONAL JOURNEY THROUGH MONTHS OF TRAINING AND COMBAT THE STORY IS TOLD LARGELY IN HIS OWN WORDS PENNED IN LETTERS TO HIS FIANCE BESS WALLACE, IN DIARY ENTRIES, AND IN LATER RECOLLECTIONS IN ADDITION TO ORIGINAL LETTERS AND DOCUMENTS, THE EXHIBITION WILL FEATURE NEARLY THREE DOZEN ITEMS FROM TRUMAN'S OWN COMBAT GEAR, AS WELL AS MATERIALS FROM OTHER MEN WHO SERVED WITH TRUMAN DURING THE WAR AND WENT ON TO PLAY SIGNIFICANT ROLES IN HIS PERSONAL LIFE AND POLITICAL CAREER WHILE

FOCUSING ON TRUMAN'S OWN JOURNEY. THE EXHIBITION IS SET AGAINST THE BACKGROUND OF THE WAR ITSELF AND FEATURES A NUMBER OF IMPORTANT ORIGINAL ITEMS FROM THE WAR, INCLUDING A SHIP'S MANIFEST FROM THE RMS LUSITANIA, THE ZIMMERMANN TELEGRAM, AND A CEREMONIAL COPY OF THE VERSAILLES TREATY THE ZIMMERMAN TELEGRAM AND THE VERSAILLES TREATY ARE ON LOAN FROM THE NATIONAL ARCHIVES 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 SOUARE-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 SOUARE-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 OUIZ WHERE VISITORS 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 DIGNATARIES AND CELEBRITIES FOLLOWING MR TRUMAN'S DEATH IN 1972, THE OFFICE BECAME A

PERMANENT 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, ALONG WITH PHOTOGRAPHIC WALL PANELS EXPLAINING THE OFFICE'S RICH HISTORY AND CONTENTS TOTAL VISITATION FOR THE FY18

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

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

	any hours	and	a dır	recto	or/tr	ustee)	)	organization	organizations	from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
ALAN L ATTERBURY DIRECTOR	1 00	×						0	0	0	
MERILYN BERENBOM DIRECTOR	1 00	х						0	0	0	
PAUL M BLACK DIRECTOR	1 00	x						0	0	0	
MORGANI A BURDEN	40 00										

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DIRECTOR A DIRECTOR	
BIRECION	
PAUL M BLACK 1 00 X	0
DIRECTOR	
MORGAN A BURDEN 40 00 X X 189,1	8
EXECUTIVE DIRECTOR/EX OFFICIO DIRECTOR	

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and Independent Contractors

KIRK W CARPENTER

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

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MAUREEN MCMEEL CARROLL

CLIFTON TRUMAN DANIEL

HONORARY CHAIR

ROBERT P DUNN

JOSH EARNEST

SUSIE S EVANS

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

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

	any hours							organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
KURT GRAHAM	1 00	х						0	0	0
EX OFFICIO DIRECTOR										
GREG GUNDERSON	1 00	х						0	0	0
DIRECTOR		,,								-
LISA HARDWICK SECRETARY/DIRECTOR	1 00	Х		х				0	0	0

LA OFFICIO DIRECTOR						
GREG GUNDERSON	1 00	х			0	
DIRECTOR		^				
LISA HARDWICK	1 00	X	х		0	
SECRETARY/DIRECTOR		χ.	ζ		Ű	
MARY ANN HEISS	1 00	X			0	
DIRECTOR		X			Ĭ	

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and Independent Contractors

DIRECTOR

DIRECTOR

KAY MARTIN

DIRECTOR

DIRECTOR

DIRECTOR

**DENNIS MERRILL** 

HARVEY L KAPLAN

JOHN A MACDONALD

TREASURER/DIRECTOR

**BRIDGET MCCANDLESS** 

......

DIRECTOR								
LISA HARDWICK	1 00	×		х		0	0	
SECRETARY/DIRECTOR		,,				J	,	
MARY ANN HEISS	1 00	l ↓				0	0	
DIRECTOR		_ ^				٥	0	
MARY HUNKELER	1 00	1						
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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the compensation from related and a director/trustee) any hours from the

organization

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organizations

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

					,	/	·		(11)	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	eevoldme Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JANET NAPOLITANO DIRECTOR	1 00	x						0	0	0
LEIGH NOTTBERG DIRECTOR	1 00	х						0	0	0
JAMES B NUTTER JR VICE CHAIR/DIRECTOR	1 00	х		х				0	0	0
KAREN D PACK DIRECTOR	1 00	х						0	0	0
JASON C PARKER	1 00	l .								

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DIRECTOR

JAMES D RINE

ADAM P SACHS

MARNY SHERMAN

MEYER SOSLAND

VICE CHAIR/DIRECTOR

JEANNINE STRANDJORD

VICE CHAIR/DIRECTOR

......

DIRECTOR

DIRECTOR

DIRECTOR

and Independent Contractors

and Independent Contractors (A) (B) (C) (D) Name and Title Position (do not check more Reportable Average than one box, unless compensation hours per

	any hours					ustee		organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
TIMOTHY W TRIPLETT DIRECTOR	1 00	×						0	0	0	
DAVID J VON DREHLE DIRECTOR	1 00	×						0	0	0	
EILEEN WEIR DIRECTOR	1 00	×						0	0	0	
CLYDE F WENDEL CHAIR/DIRECTOR	1 00	х		×				0	0	0	

1 00

40 00

Х

THOMAS R BUZZ WILLARD

DIRECTOR

CFO/CAO

LISA A SULLIVAN

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

person is both an officer

(E)

Reportable

compensation

from related

from the

94,487

(F)

Estimated

amount of other

compensation

21,520

efil	e GR	APHIC prii	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9	3493044016009		
SC	H <b>ED</b> m 99	ULE A		Public (	Charity Statu rganization is a sect 4947(a)(1) nonexe  Attach to Form	ion 501(c)(3) o empt charitable	organization or trust.	ort	2017		
•		the Treasury	► Inf	ormation abou	ıt Schedule A (Form			ıctions is at	Open to Public Inspection		
Nam THE H	<b>e of th</b> ARRY S	nue Service he organiza TRUMAN LIBR	ARY INSTITUT	E	www.sig	<u> </u>		Employer identific	<u> </u>		
	rt I	Reason :		Charity State	us (All organization	s must comple	te this part ) 9	143-6042632 See instructions			
					ent is (For lines 1 thro			occ macractions.			
1	П	A church, c	onvention of	churches, or as	sociation of churches	described in <b>sec</b> t	tion 170(b)(1)	(A)(i).			
2	$\overline{\Box}$	A school de	scribed in <b>se</b>	ection 170(b)(	<b>1)(A)(ii).</b> (Attach Scl	nedule E (Form 9	90 or 990-EZ))				
3					vice organization desc	•	• •				
4		A medical r	•	•	ed in conjunction with			•	nter the hospital's		
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170</b> (b)(1)(A)(iv). (Complete Part II )									
6		A federal, s	tate, or local	government or	governmental unit de	escribed in <b>sectio</b>	on 170(b)(1)(A	\)(v).			
7	<b>✓</b>	section 17	0(b)(1)(A)	(vi). (Complete			-	init or from the gener	al public described in		
8		A communi	ty trust desc	ribed in <b>sectior</b>	170(b)(1)(A)(vi)	(Complete Part I	Ι)				
9		An agricultural research organization described in 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university.									
10		An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)									
11		An organiza	ition organiz	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).			
12		more public	ly supported	l organizations o	d exclusively for the be described in <b>section 5</b> the type of supporting	<b>i09(a)(1)</b> or <b>se</b> d	ction 509(a)(2	). See <b>section 509(</b> a			
a		<b>Type I.</b> A so	upporting or n(s) the pow	ganızatıon oper	ated, supervised, or cappoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by			
b		<b>Type II.</b> A manageme	supporting on t of the sup	organization sup porting organiza	ervised or controlled i ation vested in the sar						
C		Type III f	ınctionally		and C. supporting organizatio ions) You must com				ted with, its		
d		Type III n functionally	on-function	nally integrate The organizatio	d. A supporting organ n generally must satis t IV, Sections A and	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	` '		
е		Check this	oox if the org	ganization recei	ved a written determing integrated supporting	nation from the II		pe I, Type II, Type II	functionally		
f	Enter			d organizations	zegratea sapporting	, organización					
g	Provi	de the follow	ing informat	ion about the su	ipported organization(	s)		_			
	(i) N	Name of supp organizatior		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	in your governing document? monetary support other supposes (see instructions) instructions					
						Yes	No				
Tota	ı			1		I		I	i		

supported organization

ightharpoons

Page 2

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part

	III. If the organization fa	alls to qualify und	der the tests liste	ed below, please	e complete Part	III.)		
5	Section A. Public Support							
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2	2017	(f) Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and							
_	membership fees received (Do not	1,072,128	1,647,422	1,455,801	2,626,654		3,589,917	10,391,922
	include any "unusual grant ")	, ,	, ,	· '	, ,		, , ,	, ,
2	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	<b>Total.</b> Add lines 1 through 3	1,072,128	1,647,422	1,455,801	2,626,654		3,589,917	10,391,922
5	The portion of total contributions by							
	each person (other than a							
	governmental unit or publicly							3,205,883
	supported organization) included on line 1 that exceeds 2% of the							3,203,663
	amount shown on line 11, column (f)							
	amount shown on line 11, column (1)							
6	Public support. Subtract line 5							7.406.000
_	from line 4							7,186,039
9	Section B. Total Support							
	Calendar year	(a)2013	<b>(b)</b> 2014	(c)2015	(d)2016	(e)2	017	(f)Total
	(or fiscal year beginning in) ▶							
7	Amounts from line 4	1,072,128	1,647,422	1,455,801	2,626,654		3,589,917	10,391,922
8								
	dividends, payments received on	202,107	232,304	225,574	240,733		281,016	1,181,734
	securities loans, rents, royalties and	,	,	,	,		,	-,,
_	income from similar sources Net income from unrelated business							
9	activities, whether or not the							
	business is regularly carried on							
10								
-0	or loss from the sale of capital	65,107	85,486	96,814	72,402		75,741	395,550
	assets (Explain in Part VI )	, i	,	,	<i>'</i>		´	,
11								11,969,206
	10							11,909,200
12	Gross receipts from related activities,	etc (see instruction	ns)			12		
13	First five years. If the Form 990 is fo	r the organization'	s first, second, thir	d, fourth, or fifth	tax year as a secti	on 501(	c)(3) orga	nızatıon,
	check this box and <b>stop here</b>							ŕ
-	Section C. Computation of Public					• • •	<i></i> .	
	Public support percentage for 2017 (lir			olumn (f))		144		60 040 %
				, a		14		
	Public support percentage for 2016 Sc				4.4 22	15		63 710 %
16	a <b>33 1/3% support test—2017.</b> If the	organization did n	ot check the box o	n line 13, and line	14 is 33 1/3% or	more, c	neck this b	
	and stop here. The organization quali 33 1/3% support test—2016. If th				nd line 15 is 33 1/	3% or m	ore, check	<b>▶</b> ✓
١	box and <b>stop here.</b> The organization	<del>-</del>		•	23 13 33 17.			▶ □
					12 16 16-		1.4	
17	a 10%-facts-and-circumstances test is 10% or more, and if the organizatio							
	in Part VI how the organization meets							
	<del>-</del>	and racis-anu-circ	amatances test I	ne organization q	aamies as a public	, supp	, teu	. □
	organization							▶□
Ŀ	10%-facts-and-circumstances tes						nd line	
	15 is 10% or more, and if the organize Explain in Part VI how the organization						clv	
	Explain in Fall VI HOW the Organization		and chicalitycalice	- Lest file organ	quantico as	. a pabil	7	

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,	)	
	Calendar year	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6 ) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
Ь	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						
12	regularly carried on Other income Do not include gain or						
12	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 for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and <b>stop here</b>			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	<b>016</b> Schedule A, I	Part III, line 17			18	
	<b>331/3% support tests—2017.</b> If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations

Yes

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
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 <b>Part VI</b> when and how the organization made the			
	determination	3b		

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 <b>Part VI</b> when and how the organization made the determination						
	determination 3						
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?						
	'Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use						
4a	Vas any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
	checked 12a or 12b in Part I, answer (b) and (c) below	4a					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported						

				3.
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 <b>Part VI</b> what controls the organization put in place to ensure such use	-		
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b ın 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		$\overline{}$	
	supervised by or in connection with its supported organizations	4b		
С	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 <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes		$\overline{}$	
		4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	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 <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	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 <b>Part VI</b> what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
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 <b>Part VI</b> , 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		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing		
	organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as		i

```
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.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	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 <b>Part VI</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 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 <b>Part VI</b> how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
		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 <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct  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  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a 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 <b>Part VI identify those supported organizations and explain</b> 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 <b>Part VI</b> 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>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b		

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

Section C - Distributable Amount Current Year Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 5 Income tax imposed in prior year 6

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

details in Part VI) See instructions Distributable amount for 2017 from Section C, line 6 (ii) (iii)

**10** Line 8 amount divided by Line 9 amount Section E - Distribution Allocations (see (i) Underdistributions Distributable instructions) **Excess Distributions** Pre-2017 Amount for 2017 1 Distributable amount for 2017 from Section C, line

2 Underdistributions, if any, for years prior to 2017

(reasonable cause required-- explain in Part VI)

See instructions		
3 Excess distributions carryover, if any, to 2017		
a		
<b>b</b> From 2013		
c From 2014		
<b>d</b> From 2015		
e From 2016		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
<b>h</b> Applied to 2017 distributable amount		
<ul> <li>Carryover from 2012 not applied (see instructions)</li> </ul>		
j Remainder Subtract lines 3g, 3h, and 3i from 3f		
4 Distributions for 2017 from Section D, line 7		
<u>      \$                              </u>		
Applied to underdistributions of prior years		

b Applied to 2017 distributable amount c Remainder Subtract lines 4a and 4b from 4

Schedule A (Form 990 or 990-EZ) (2017)

5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions 7 Excess distributions carryover to 2018. Add lines

c Excess from 2015. . . . .

See instructions

d Excess from 2016. Excess from 2017.

31 and 4c 8 Breakdown of line 7 a Excess from 2013. **b** Excess from 2014.

## Additional Data

## Software ID: Software Version:

**EIN:** 43-6042632

Name: THE HARRY S TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS

Page 8

Schedule A (Form 990 or 990-EZ) 2017 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI

Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

# Facts And Circumstances Test

**SCHEDULE C** 

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

DLN: 93493044016009

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Inspection

● S f the	Section 527 organizations Complete organization answered "Yes" of Section 501(c)(3) organizations that	501(c)(3)) organizations Complete Parts te Part I-A only n <b>Form 990, Part IV, Line 4, or Form 9</b> t have filed Form 5768 (election under s t have NOT filed Form 5768 (election ur	90-EZ, Part VI, Iin ection 501(h)) Co	e <b>47 (Lobbying Activities</b> mplete Part II-A Do not co	mplete Part II-B
f the		n Form 990, Part IV, Line 5 (Proxy Tax s), then			
THE	ne of the organization HARRY S TRUMAN LIBRARY INSTITUTE IONAL AND INTERNATIONAL AFFAIRS			Employer ider 43-6042632	tification number
Par	t I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is	a section 527 organi	zation.
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political can	npaign activities in	Part IV (see instructions f	or definition of
2	Political campaign activity expend	litures (see instructions)		<b>&gt;</b>	\$
3	Volunteer hours for political camp	• • • • • • • • • • • • • • • • • • • •			
Par	t I-B Complete if the orga	nization is exempt under section	n 501(c)(3).		
1	•	ax incurred by the organization under se		<b>&gt;</b>	\$
2		ax incurred by organization managers u		<b>&gt;</b>	\$
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for t	:his year?		🗌 Yes 🔲 No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV		- F01(-)		
	<u> </u>	nization is exempt under section			
1	·	led by the filing organization for section	•		\$
2	Enter the amount of the filing org function activities	anızatıon's funds contributed to other o	rganizations for se	ction 527 exempt	\$
3	Total exempt function expenditure	es Add lines 1 and 2 Enter here and or	n Form 1120-POL,	line 17b ►	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly deliver ee (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing organization's funds olitical organization, such a	Also enter the amount
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
1					
2					
3					
4					
5					
6					
For P	aperwork Reduction Act Notice, see	the instructions for Form 990 or 990-EZ.	Cat	No 500845 Schedule C (	Form 990 or 990-EZ) 2017

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) Total beginning in) 2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures

Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2017 activity

Volunteers?

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

(b)

Amount

(a)

No

Yes

				1			
b	Paid staff or management (include	e compensation in expenses reported on lines 1c through 1i)?	Yes				
С	Media advertisements?				7		
d	Mailings to members, legislators,	or the public?					
е	Publications, or published or broad	dcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, the	eir staffs, government officials, or a legislative body?	Yes				0
h	Rallies, demonstrations, seminars	, conventions, speeches, lectures, or any similar means?					
i	Other activities?						
j	Total Add lines 1c through 1i						
2a	Did the activities in line 1 cause the	he organization to be not described in section 501(c)(3)?		No			
ь	If "Yes," enter the amount of any	tax incurred under section 4912					
С	If "Yes," enter the amount of any	tax incurred by organization managers under section 4912					
d	If the filing organization incurred	a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under section $501(c)(4)$ , section $501(c)$	(5), o	r secti	on		
						Yes	No
1	Were substantially all (90% or mo	ore) dues received nondeductible by members?		Γ	1		
2	Did the organization make only in	-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carr	y over lobbying and political expenditures from the prior year?			3		
	and if either (a) Board answered "Yes."	ganization is exempt under section 501(c)(4), section 501(c) OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part	III-A			·01(C	)( <del>0</del> )
1	Dues, assessments and similar an		1				
2	expenses for which the section	oying and political expenditures (do not include amounts of political					
а	Current year	10 22 (1) tax mas para).	2a				
b	Carryover from last year		2b				
С	Total		2c				
3	Aggregate amount reported in sec	ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		unt on line 2c exceeds the amount on line 3, what portion of the excess does er to the reasonable estimate of nondeductible lobbying and political	4				
5	Taxable amount of lobbying and p	political expenditures (see instructions)	5				
Pa	art IV Supplemental Info	ormation	•	•			
		art l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list), o, complete this part for any additional information	Part II-	A, lines	1 an	d 2 (se	e
	Return Reference	Explanation					
PART	II-B, LINE 1	THE INSTITUTE'S BOARD CHAIR AND EXECUTIVE DIRECTOR HAD A MEETING	WITH	MISSOU	JRI G	OVERN	OR
	, := =	MALLE DADGON ON OVOLATO DISCUSS THE TRUMAN LIBRARY'S DIANNER R		TTON AN	ID TI		

MIKE PARSON ON 9/21/18 TO DISCUSS THE TRUMAN LIBRARY'S PLANNED RENOVATION AND THE

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

## **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.

Department of the Treasury Internal Revenue Service Name of the organization

THE HARRY S TRUMAN LIBRARY INSTITUTE

(Form 990)

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

Open to Public **Inspection Employer identification number** 

DLN: 93493044016009 OMB No 1545-0047

NAT	TONAL AND INTERNATIONAL AFFAIRS		43-6042632
Pa	Organizations Maintaining Donor Advi Complete if the organization answered "Ye		ls or Accounts.
	,	(a) Donor advised funds	(b)Funds and other accounts
	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
ļ	Aggregate value at end of year		
i	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex		r advised funds are the
5	Did the organization inform all grantees, donors, and donoritable purposes and not for the benefit of the donor private benefit?		
Pai	rt II Conservation Easements. Complete if the	ne organization answered "Yes" on F	Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the orga	nızatıon (check all that apply)	
	$\square$ Preservation of land for public use (e g , recreatio	n or education) $\qed$ Preservation o	f an historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in the	e form of a conservation
	easement on the last day of the tax year	•	Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified history	c structure included in (a)	2c
d	Number of conservation easements included in (c) acquistructure listed in the National Register	ired after 8/17/06, and not on a historic	2d
3	Number of conservation easements modified, transferre tax year ▶	ed, released, extinguished, or terminated	by the organization during the
ı	Number of states where property subject to conservation	on easement is located <b>&gt;</b>	
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		ing of violations,
5	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of violations, and enforcin	ng conservation easements during the year
,	Amount of expenses incurred in monitoring, inspecting,  ▶ \$	handling of violations, and enforcing cor	nservation easements during the year
3	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(II)^2$	above satisfy the requirements of section	on 170(h)(4)(B)(ı)
)	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the organization's financial s	
ar	Organizations Maintaining Collections Complete If the organization answered "Ye	·	Other Similar Assets.
la	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	public exhibition, education, or research	ın furtherance of public service,
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items		
(	i) Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
(i	i)Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS		
а	Revenue included on Form 990, Part VIII, line 1	· -	<b>▶</b> \$
b	Assets included in Form 990, Part X		▶\$
	Paperwork Reduction Act Notice, see the Instructio	ns for Form 990. Cat	No 52283D Schedule D (Form 990) 2017

(1)	Organizations Maintaining Co	liections of Art, Hi	Storie	cai ire	eas	ures, or	Othe	:r Simi	iar Assets (	continuea)
3	Using the organization's acquisition, accession items (check all that apply)	n, and other records, c		ny of t	he fo	ollowing t	hat are	a signi	ficant use of it	s collection
а	Public exhibition		d		Loar	or excha	ange pi	ograms		
b	Scholarly research		e		Othe	er				
c	Preservation for future generations									
4	Provide a description of the organization's co	llections and explain ho	w the	y furthe	er th	e organız	ation's	exemp	t purpose in	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to							imilar	□ <b>y</b>	es 🗆 No
Pai	rt IV Escrow and Custodial Arrange Complete if the organization answ X, line 21.		ı 990,	, Part 1	۱V, ۱	ıne 9, oı	repo	rted an	amount on	Form 990, Part
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	an or other intermedia	ry for	contrib	utior	ns or othe	er asse	s not	□ <b>Y</b>	es 🗌 No
ь	If "Yes," explain the arrangement in Part XII.	I and complete the follo	wing	table		[			Amount	
С	Beginning balance	'	_			l	1c			
d	Additions during the year						<b>1</b> d			
е	Distributions during the year						1e			
f	Ending balance						1f			
<b>2</b> a	Did the organization include an amount on Fo	orm 990, Part X, line 2:	l, for e	escrow	or c	ustodial a	ccount	liability	? <b>1</b> Ye	es 🗆 No
b	If "Yes," explain the arrangement in Part XIII	Check here if the evn	Janaty	on hac	haar	nrovide/	d in Dai	+ ٧111		
	art V Endowment Funds. Complete if	<u> </u>				•				·· <u> </u>
		(a)Current year		or year	T	(c)Two ye			hree years back	(e)Four years back
1a	Beginning of year balance	8,375,121		7,744,	253		7,292,4		7,423,244	6,728,677
b	Contributions	50,000		2,	958		5,0	34	275,276	250,500
С	Net investment earnings, gains, and losses	538,299		914,	013		693,4	04	-142,981	649,647
d	Grants or scholarships									
	Other expenditures for facilities and programs	863,087		286,	103		246,6	18	263,106	205,580
f	Administrative expenses									
g	End of year balance	8,100,333		8,375,	121		7,744,2	.53	7,292,433	7,423,244
2	Provide the estimated percentage of the curr	ent year end balance (I	line 1g	ı, colum	nn (a	a)) held a	s			
а	Board designated or quasi-endowment ▶	31 720 %								
b	Permanent endowment ► 43 860 %									
С	Temporarily restricted endowment ► 24	420 %								
	The percentages on lines 2a, 2b, and 2c show	ıld equal 100%								
3а	Are there endowment funds not in the posses organization by	ssion of the organizatio	n that	are he	ld ar	nd admini	stered	for the		Yes No
	(i) unrelated organizations								3	Yes No
	(ii) related organizations									a(ii) No
b			Sche	dule R?					<u> </u>	3b
4	Describe in Part XIII the intended uses of the	organızatıon's endowr	nent f	unds					_	
Pai	rt VI Land, Buildings, and Equipme									
	Complete if the organization answ							d deprec		ne 10. (d) Book value
	Description of property (a) Cost or ot (investment)		other	Dasis (O	.iiei)	(C) ACC	umurace	a deprec	lation	(u) book value
1a	Land									
b	Buildings									
c	Leasehold improvements									
d	Equipment									
	Other									
Tota	al. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part X,	colun	$nn \overline{(B)}$	line	10(c)		<b>&gt;</b>		0

Part VII	Saa Form GGII Darf Y lina 17				
	See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)		(b) Book value		Method of valuation end-of-year market value
	al derivatives				
	Tied equity interests				
A)					
(B)					
(C)					
(D)					
(E)					
F)					
(G)					
(H)					
	nn (b) must equal Form 990, Part X, col (B) line 12 )	•			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on  (a) Description of investment		art IV, line		990, Part X, line 13. Method of valuation
	(a) bescription of investment	(0) 50	ok value		end-of-year market value
(1)					
(2)					
(3)					
4)					
5)					
6)					
(7)					
(8)					
(9) 「otal. (Colum	on (b) must equal Form 990, Part X, col (B) line 13 )  Other Assets. Complete if the organization answere	ed 'Yes' on Forr	n 990, Part	IV, line 11d See	Form 990, Part X, line 15
9)  Total. (Column  Part IX			n 990, Part	IV, line 11d See	Form 990, Part X, line 15  (b) Book value
9)  Total. (Column  Part IX  1)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
Fotal. (Column Part IX 1)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
Part IX  1) 2)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
(9)  Fotal. (Column Part IX  1)  2)  3)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
(9)  Fotal. (Column Part IX  1)  2)  3)  4)	Other Assets. Complete if the organization answere		n 990, Part	IV, line 11d See	
9)  Total. (Column Part IX  1)  2)  3)  4)  5)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
(9)  Fotal. (Column Part IX  1)  2)  3)  4)  5)  6)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
9)  Fotal. (Column Part IX  1)  2)  3)  4)  5)  6)  7)	Other Assets. Complete if the organization answere		m 990, Part	IV, line 11d See	
9)  Part IX  1)  2)  3)  4)  5)  6)  7)  8)	Other Assets. Complete if the organization answere  (a) Description		m 990, Part	IV, line 11d See	(b) Book value
9)  Fotal. (Column Part IX  1)  2)  3)  4)  5)  6)  7)  8)	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization	on .			(b) Book value
9)  Total. (Column Part IX  1)  2)  3)  4)  5)  6)  7)  8)  9)  Total. (Column Part X	Other Assets. Complete if the organization answere  (a) Description  (b) must equal Form 990, Part X, col (B) line 15	on .			(b) Book value
(9)  Total. (Column Part IX  1)  2)  3)  4)  5)  6)  7)  8)  9)  Total. (Column Part X	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) Must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.	on .	es' on Form		(b) Book value
9)  Fotal. (Column Part IX  1)  2)  3)  4)  5)  6)  7)  8)  9)  Fotal. (Column Part X  1) Federal (	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	on .	es' on Form		(b) Book value
9)  Total. (Column Part IX  1)  2)  3)  4)  5)  6)  7)  8)  9)  Fotal. (Column Part X  1) Federal (1)	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	on .	es' on Form		(b) Book value
9)  Fotal. (Column Part IX  1)  2)  3)  4)  5)  6)  7)  8)  Fotal. (Column Part X  1) Federal (1)  2)  3)	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	on .	es' on Form		(b) Book value
9)  Total. (Column Part IX  1)  2)  3)  4)  5)  6)  7)  8)  9)  Total. (Column Part X  1) Federal (1)  2)  3)	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	on .	es' on Form		(b) Book value
9)  Total. (Column Part IX  1)  2)  3)  4)  5)  6)  7)  8)  9)  Total. (Column Part X  1) Federal (1)  2)  3)  4)	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	on .	es' on Form		(b) Book value
9)  Total. (Column Part IX  1)  2)  3)  4)  5)  6)  7)  8)  9)  Total. (Column Part X  1) Federal (  2)  3)  4)  5)	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	on .	es' on Form		(b) Book value
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 66) 7) 88) 9) Fotal. (Column Part X 1) Federal (1) Federal (2) 3) 4) 5) 6)	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	on .	es' on Form		(b) Book value
Fotal. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7) Part X 1. 1) Federal (1) 2) 3) 4) 5) 6) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7) 7)	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	on .	es' on Form		(b) Book value
(9)  Fotal. (Column Part IX  (1) (2) (3) (4) (5) (6) (7) (8) Fotal. (Column Part X  1.	Other Assets. Complete if the organization answere  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization See Form 990, Part X, line 25.  (a) Description of liability	on .	es' on Form		(b) Book value

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue, gains, and other support per audited financial statements . . . . .

Page 4

4,502,080

3,527,676

3.527.676

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

Part XI

1

c

d

3 4

b

5

Part XIII

See Additional Data Table

Return Reference

Other (Describe in Part XIII ) . . . . . .

Add lines 2a through 2d . . . . . .

**Supplemental Information** 

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . .

Add lines **4a** and **4b** . . . . . . . . . . . . . . . .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . .

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

2e -292,481 e 3 3 4,794,561 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b b Add lines **4a** and **4b** . . . . . . . 4c c

n Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . 5 5 4,794,561 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1

3,527,676 Amounts included on line 1 but not on Form 990, Part IX, line 25

2 Donated services and use of facilities . . . 2a 2b 

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

2c

2d

4a

4b

Explanation

2e

3

4c

5

Page <b>5</b>		Schedule D (Form 990) 2017
	ormation (continued)	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2017

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	THE INTENDED PURPOSE OF THE ENDOWMENT IS TO CONTINUE TO PROVIDE CONTINUOUS 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 THA TATTEMPT TO PRESERVE AND ENHANCE THE PURCHASING POWER OF THE ENDOWMENT ENDOWMENT ASSETS THA TATTEMPT 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 PERPET UITY 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 INTENDE D TO PRODUCE A MODERATE RETURN WHILE ASSUMING A MINIMAL LEVEL OF INVESTMENT RISK. THE INSTITUTE HAS A POLICY (THE SPENDING POLICY) OF APPROPRIATING FOR EXPENDITURES EACH YEAR AN A MOUNT EQUAL TO 4% OF THE TRAILING 12-QUARTER AVERAGE MARKET VALUE OF THE ASSETS IN THE VAR IOUS ENDOWMENT AND OTHER FUND ACCOUNTS THAT ARE SUBJECT TO THE INSTITUTE'S STATEMENT OF IN VESTMENT POLICY AND OBJECTIVE WILL BE DISTRIBUTED ANNUALLY TO SUPPORT THE INSTITUTE'S BUDG ETED EXPENDITURES THIS DISTRIBUTION PERCENTAGE WILL BE APPLIED PURSUANT TO THE ABOVE FORM ULA TO EACH INDIVIDUAL ACCOUNT NOT SUBJECT TO INCOME RESTRICTIONS OR OTHER PAYOUT AGREEMEN TS, WHICH WOULD SUPERCEDE THE DISTRIBUTION POLICY KEMPTON ENDOWMENT PER THE TERMS OF GRE TA KEMPTON'S 1991 WILL, 25% OF HER ESTATE GIFT WAS USED BY THE INSTITUTE FOR ITS GENERAL PURPOSES THE UNRESTRICT ED INVESTMENT INCOME CAN BE EXPENDED DURING THE FISCAL YEAR FOR PURPOSES THE UNRESTRICT ED INVESTMENT INCOME CAN BE EXPENDED DURING THE FISCAL YEAR FOR PURPOSES DEEMED APPROPRIAT E AND NECESSARY BY THE INSTITUTE FOR ITS GENERAL PURPOSES THE UNRESTRICT ED INVESTMENT INCOME CAN BE EXPENDED DOWNENT FIND, WHICH RESULTS FROM AN INTERNAL DESIGNATION, IS NOT DONOR-RESTRICTED AND IS CLASSIFIED AS UNRESTRICTED TO SUBSIDIZE EXPENSES ASSOCIATED WITH THE ANOUAL "HOWARD AND VIRGINIA BENN ETT FORM

Return Reference	Explanation
PART V, LINE 4	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 IN STITUTE AGREES TO SUPPLEMENT THE INVESTMENT PROCEEDS FROM THE HULSTON ENDOWMENT FUND WITH GENERAL UNRESTRICTED FUNDS TO ENSURE THAT THIS GRANT IS AVAILABLE EACH YEAR HUNKELER FAMI LY ENDOWMENT IN FY18, THE HUNKELER FAMILY ESTABLISHED A PERMANENTLY RESTRICTED \$350,000 E NDOWMENT FUND. THE TERMS AND CONDITIONS ESTABLISHED WITH THE DONOR STIPULATE THAT THE

Supplemental Information

\$350 ,000 GIFT (PAYABLE OVER 7 YEARS) WILL BE USED TO ENDOW THE INSTITUTE'S SCHOLAR'S AWARD

AND THE TRUMAN BOOK AWARD

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493044016009 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2017 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. Open to Public ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** THE HARRY S TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS 43-6042632 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed ) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e q, program service, describe for and investments and independent fundraising, program specific type of in region region contractors in services, investments, grants service(s) in region to recipients located in the region region) (1) (2) (3) (4) (5) 3a Sub-total b Total from continuation sheets to Part I c Totals (add lines 3a and 3b) O For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W Schedule F (Form 990) 2017

(1)				
( 2)				
(3)				

(4)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . . . . . . .

Schedule F (Form 990) 2017

(a) Type of grant or assistance

Part III can be duplicated if additional space is needed.

(c) Number of

(b) Region

(h) Method of

		recipients	cash grant	disbursement	non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, other)
( 1) RESEARCH GRANTS	EUROPE	2	6,393	CHECK, WIRE TRANSFER			
( 2) RESEARCH GRANTS	RUSSIA	1	2,727	CHECK, WIRE TRANSFER			
(3) RESEARCH GRANTS	SOUTH AMERICA	1	3,541	CHECK, WIRE TRANSFER			
( 4) RESEARCH GRANTS	MIDDLE EAST	1	2,774	CHECK, WIRE TRANSFER			
( 5)							
(6)							
(7)							

(e) Manner of cash

(f) Amount of

(g) Description

( 6)				
(7)				
(8)				
(9)				

(d) Amount of

(7)				
(8)				
(9)				
( 10)				
( 11)				
( 12)				
( 13)				

(8)				
(9)				
( 10)				
( 11)				
( 12)				
( 13)				
( 14)				
( 15)				
(16)				

( 12)				
( 13)				
( 14)				
( 15)				
( 16)				
( 17)				

Sche	dule F (Form 990) 2017		Page <b>4</b>
Pai	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	<b>✓</b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	□Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	□Yes	<b>☑</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	☐Yes	<b>✓</b> No
	Schedul	e F (Form 9	990) 2017

Schedule F (Form 990) 2017 Page 5 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). Return Explanation Reference

PART I. AS PART OF OUR MISSION, TRUMAN LIBRARY INSTITUTE GRANTS & AWARDS ARE GIVEN FOR THE PURPOSE OF LINE 2 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 INSTITUTE'S 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 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 PAYABLE TO THE

THE TRUMAN LIBRARY WITH COPIES OF ANY PUBLICATION RESULTING FROM RESEARCH SUPPORTED BY ONE OF THE THE TRUMAN ADMINISTRATION PUBLISHERS ARE REQUIRED TO SUBMIT FIVE COPIES OF AN APPROPRIATE ENTRY TO AWARDEE AND REQUIRE NO FURTHER MONITORING

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493044016009 OMB No 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **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 Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. 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 Part I 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 e Solicitation of non-government grants ☐ 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 services? ☐ Yes ☐ 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 individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No 1 8 10 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 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2017

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a)Event #1 (b) Event #2 (c)Other events (d) Total events WILD ABOUT (add col (a) through **HARRY** (event type) (total number) col (c)) (event type) Revenue 1 Gross receipts. 537,659 537,659 2 Less Contributions. 473,909 473,909 3 Gross income (line 1 minus 63,750 line 2) 63,750 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs 7 Food and beverages 69,093 69,093 8 Entertainment **9** Other direct expenses 48,607 48,607 **10** Direct expense summary Add lines 4 through 9 in column (d) 117,700 11 Net income summary Subtract line 10 from line 3, column (d) . . . . -53,950 Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/Instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue . Expenses | 2 Cash prizes Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes Yes % Yes\_\_\_\_ 6 Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities \_ ☐ Yes ☐ No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain . 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No If "Yes," explain \_

Sche	dule G (Form 990 or 990-EZ) 2017				F	Page <b>3</b>			
11	Does the organization conduct gaming	activities with nonmembers?		Yes	□No				
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust or a member of a partnership or other entit	ΣY	□Yes	□No				
13	Indicate the percentage of gaming acti	vity conducted in							
а	The organization's facility		13	а		%			
b	An outside facility		13	ь		%			
14	Enter the name and address of the per	son who prepares the organization's gaming/special events books	and record	s					
	Name ►								
	Address •								
15a	Does the organization have a contract revenue?	with a third party from whom the organization receives gaming		□Yes	□No				
Ь	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$								
c	If "Yes," enter name and address of the	e third party							
	Name •								
	Address ►								
16	Gaming manager information								
	Name ►								
	Gaming manager compensation ▶ \$	······································							
	Description of services provided ►								
	☐ Director/officer	☐ Employee ☐ Independent contractor							
17	Mandatory distributions								
а	Is the organization required under state retain the state gaming license?	e law to make charitable distributions from the gaming proceeds to	)	□Yes	Пио				
b	Enter the amount of distributions requing the organization's own exempt activities.	red under state law distributed to other exempt organizations or spities during the tax year <b>&gt;</b> \$	pent	63					
Pai		on. Provide the explanations required by Part I, line 2b, col 5c, 16, and 17b, as applicable. Also provide any additional				s).			
	Return Reference	Explanation							

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC prin	t - DO N	OT PROCESS	As Filed Data -				DL	N: 934930440	16009
Schedule I (Form 990)  Department of the Treasury Internal Revenue Service		Co	Governments  mplete if the organize	Other Assistand and Individual ation answered "Yes,"  Attach to Form 1900) and its	S in the Unite on Form 990, Part IV 1 990.	d States , line 21 or 22.	C	2017 Open to Public Inspection	
Name of the organization THE HARRY S TRUMAN L	IBRARY IN	NSTITUTE					Employer identific	ation number	
NATIONAL AND INTERNA	TIONAL A	FFAIRS	and Assistance				43-6042632		
Does the organizate the selection criter Describe in Part IV Part II Grants and	tion maint la used to the organ	ain records to subsolution award the grants nization's procedur	stantiate the amount of or assistance? res for monitoring the us nestic Organizations a	se of grant funds in the Ui	nited States	for the grants or assistance of the grants or assistance of the grants o	990, Part IV, line	✓ Yes	□ <b>No</b>
that receive  (a) Name and addre  organization  or government		nan \$5,000 Part II (b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of ash assistance	(h) Purpose of or assistance	f grant
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
			<del>-</del>	s listed in the line 1 table			 <b>▶</b>		
For Paperwork Reduction	Act Notice	, see the Instructio	ns for Form 990.		Cat No 50055	5P	Sch	edule I (Form 990	2017

Schedule I (Form 990) 2017

Page 2

	recipients	cash grant	noncash assistance	FMV, appraisal, other)			
(1) RESEARCH GRANT	12	13,631					
(2) DISSERTATION YEAR FELLOWSHIP	3	24,000					
(3) SCHOLAR'S AWARD	1	15,000					
(4) TRUMAN BOOK AWARD	1	2,500					
(5) JOHN K HULSTON RESEARCH GRANT	2	5,000					
(5)							
(6)							
(7)							
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.							

(d) Amount of

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

(c) Amount of

PAYABLE TO THE AWARDEE AND REQUIRE NO FURTHER MONITORING

Return Reference						
Part IV	Suppleme					
(7)						

PART I, LINE 2

Schedule I (Form 990) 2017

Part III

**Explanation** 

AS PART OF OUR MISSION, TRUMAN LIBRARY INSTITUTE GRANTS & AWARDS ARE GIVEN FOR THE PURPOSE OF SUPPORTING SCHOLARSHIP BASED ON SOME ASPECT

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 REOUIRE 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 REOUIRED 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 DISPERSED DIRECTLY AND

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 OUALITY, ORIGINALITY, SIGNIFICANCE OF THE PROJECT AND ITS RELATIONSHIP TO THE EXSITING TRUMAN

(e) Method of valuation (book,

efil	e GRAPHIC pr	int - DO NOT PROCESS As Filed Data -	DLN: 934	9304	4016	009
Sch	edule J	Compensation Informat	ion om	B No	1545-0	0047
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest				
		Compensated Employees  ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.			2017 Open to Public	
_	▶ Attach to Form 990.					
Department of the Treasury Internal Revenue Service  Internal Revenue Service  Internal Revenue Service  Internal Revenue Service  Internal Revenue Service  Internal Revenue Service						
	ne of the organiza HARRY S TRUMAN I		Employer identificati	on nu	ımber	
	IONAL AND INTERNA		43-6042632			
Pa	rt I Questi	ons Regarding Compensation	·			
			Γ		Yes	No
1a		opiate box(es) if the organization provided any of the following to or forection A, line 1a Complete Part III to provide any relevant information				
			or residence for personal use			
			ess use of personal residence			
			o dues or initiation fees			
	☐ Discretion	ary spending account LJ Personal services (e	g , maid, chauffeur, chef)			
b		xes in line 1a are checked, did the organization follow a written policy ill of the expenses described above? If "No," complete Part III to expl		1b		
2		ation require substantiation prior to reimbursing or allowing expenses		2		
	directors, truste	es, officers, including the CEO/Executive Director, regarding the item	s checked in line 1a/			
3		If any, of the following the filing organization used to establish the co				
		EO/Executive Director Check all that apply Do not check any boxes and organization to establish compensation of the CEO/Executive Direct				
	✓ Compens	- World-on-annual Company	ttun-et			
		ation committee				
		· ·	ard or compensation committee			
			·			
4	related organiza	, did any person listed on Form 990, Part VII, Section A, line 1a, with ition	respect to the filing organization or a			
а	Receive a sever	ance payment or change-of-control payment?		4a		No
b		r receive payment from, a supplemental nonqualified retirement plan	,	4b		No
c	Participate in, o	r receive payment from, an equity-based compensation arrangement		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and provide the applicable amounts for $\epsilon$	each Item In Part III			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29) organizations must complete line	es 5-9			
5		ed on Form 990, Part VII, Section A, line 1a, did the organization pay				
		ontingent on the revenues of	,			
а	The organization	٦٦		5a		No
b	Any related orga			5b		No
	•	5a or 5b, describe in Part III				
6		ed on Form 990, Part VII, Section A, line 1a, did the organization pay ontingent on the net earnings of	or accrue any			
а	The organization	17		<b>6</b> a		No
b	Any related orga			6b		No
_	•	6a or 6b, describe in Part III				
7	payments not d	ed on Form 990, Part VII, Section A, line 1a, did the organization provescribed in lines 5 and 6? If "Yes," describe in Part III		7		No
8		nts reported on Form 990, Part VII, paid or accured pursuant to a cor nitial contract exception described in Regulations section 53 4958-4(a				
				8		No
9	If "Yes" on line 8	8, did the organization also follow the rebuttable presumption procedu	ure described in Regulations section	9		
For F		action Act Notice, see the Instructions for Form 990.	Cat No 50053T Schedule 16		990)	2017

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation in column (B) reported other deferred benefits (B)(i)-(D) (i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 MORGAN A BURDEN 189,158 (i) 0 13,585 228.845 26,102 EXECUTIVE DIRECTOR/EX OFFICIO DIRECT 0 (ii) 0

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation

Schedule 1 (Form 990) 2017

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN:	9349304	4016	009
SCH	EDULE M			Jonesch Contri	hutions		OMB No 1	.545-0	047
(For	m 990)	►Complete if the	Noncash Contributions  e if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.					<b>17</b>	<u> </u>
		► Attach to Form	990.						
•	tment of the Treasury al Revenue Service	▶Information abo	ut Schedu	ıle M (Form 990) and its i	nstructions is at <u>www.ir</u>	s.gov/form990	Open to		
	e of the organizat IARRY S TRUMAN LIE					Employer identi	fication n	umbei	r
	NAL AND INTERNAT					43-6042632			
Pa	rt I Types	of Property							
			(a) Check ıf applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	noncash cor	(d) of determin stribution a		
2 3 4 5	Art—Works of and Art—Historical transfer of the Art—Fractional in Books and public Clothing and hou goods Cars and other v Boats and planes	easures							
8	Intellectual prope Securities—Public	erty	X	10	89,34	5 FMV			
	Securities—Close Securities—Partr or trust interest	nership, LLC,							
12 13	Securities—Misce Qualified conserv contribution—Hi structures .	vation istoric							
	Qualified conserve contribution—Of	vation ther							
	Real estate—Res								
16 17	Real estate—Oth								
18	Collectibles .								
19	Food inventory								
20	Drugs and medic								
21	Taxidermy .								
22	Historical artifact	ts							
23	Scientific specim	ens							
	Archeological art						•		
	Other ▶ (								
	Other ▶ (								
	Other ▶ (	•							
28	Other ▶ (	)							
29				ation during the tax year for 3, Part IV, Donee Acknowled		29		Yes	No
30a	must hold for at	least three years fro	om the date	y contribution any property is e of the initial contribution, a	and which is not required to	be used for exem	pt <b>30a</b>	100	No
	•	e the arrangement II							
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the review	v of any nonstandard contr	ibutions?	31		No
	contributions?			or related organizations to s		ash · · · ·	32a		No_
	If "Yes," describ If the organizati describe in Part	on did not report an	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
For D	anerwork Peductic	on Act Notice, see the	Instruction	s for Form 990	Cat No. 512271	Schedu	le M (Form	0001	(2017)

Schedule M (Fo	rm 990) (2017)	Page <b>2</b>
Part II	Supplemental Info	rmation.
	Provide the informat	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part
	I, column (b), the nu	imber of contributions, the number of items received, or a combination of both. Also complete
	this part for any add	itional information.
Ret	urn Reference	Explanation
		Schedule M (Form 990) (2017)

efile GRAPH	DLN	LN: 93493044016009		
SCHEDUL (Form 990 or EZ)	990- Complete to provide information for responses to specific form 990 or 990-EZ or to provide any additiona Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) at www.irs.gov/form990.	on about Schedule O (Form 990 or 990-EZ) and its instructions is at		
THE HARRY S TRUMAN LIBRARY INSTITUTE		43-6042632	nployer identification number -6042632	
Return Reference	Explanation			
FORM 990, PART VI, SECTION B, LINE 11B	AN INDEPENDENT ACCOUNTING FIRM PREPARES AND REVIEWS THE HE ORGANIZATION'S BUDGET, FINANCE, AND INVESTMENT COMMITTINEL ANY QUESTIONS AND CONCERNS THE ORGANIZATION'S BUDGE EE AND ACCOUNTING PERSONNEL HAVE ARE ADDRESSED AND ANY NEED TO BE MADE ARE MADE THE FINAL FORM 990 WITH ALL REQUITOR ALL VOTING MEMBERS OF THE BOARD PRIOR TO FILING THE 990	EE AND ALSO ALL ACCOUN T, FINANCE, AND INVESTME CORRECTIONS OR CLARIFI	INTING PERSON MENT COMMITT FICATIONS THAT	

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	AT THE TIME OF HIRE OR ELECTION (IN THE CASE OF DIRECTORS) AND ANNUALLY HEREAFTER, THE OFF ICERS, DIRECTORS, AND KEY EMPLOYEES SHALL PROVIDE THE APPLICABLE CONFLICT OF INTEREST DISC LOSURES WHICH WILL 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 REP ORT SHALL BE SUBMITTED TO THE BOARD'S EXECUTIVE COMMITTEE CONCERNING ANY CONFLICT OF INTER EST 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 ORGANI ZATIONS OR INSTITUTIONS WHICH CAN INCLUDE LOCAL AND REGIONAL NONPROFITS AND MUSEUMS, AS WE LL AS REGIONAL AND NATIONAL PRESIDENTIAL LIBRARY FOUNDATIONS BASE SALARIES WILL BE POSITI ONED TO QUALIFICATIONS, EXPERIENCE, PERFORMANCE AND TENURE 2 THE BOARD CHAIR WILL APPOIN T A COMPENSATION SUBCOMMITTEE OF THE BUDGET, FINANCE AND INVESTMENT COMMITTEE THE SUBCOMM ITTEE, WHICH INCLUDES THE BOARD CHAIR, WILL DETERMINE THE TOTAL COMPENSATION PACKAGE FOR T HE EXECUTIVE DIRECTOR SHALL MAKE RECOMMENDATIONS FOR THE SALARIES AND INCENTIVE PAYMENTS FOR OTHER EXECUTIVES OR SALARIED EMPLOYEES THESE AMOUNTS WILL BE P ROVIDED ANNUALLY TO THE COMPENSATION SUBCOMMITTEE FOR REVIEW AND APPROVAL THE SUBCOMMITTE E 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 INSTITUT E 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 NAND THE DATE IT WAS APPROVED, B) THE COMPARABILITY DATA, C) THE COMPENSATION SUBCOMMITTE E MEMBERS WHO WERE PRESENT DURING THE DEBATE AND THOSE WHO VOTED TO APPROVE A COMPENSATION DECISION, D) ANY ACTIONS TAKEN WITH RESPECT TO THE INVOLVEMENT OF A MEMBER WHO MAY HAVE A CONFLICT OF INTEREST

Return Explanation
Reference

FORM 990, PART VI, AVAILABLE TO THE PUBLIC UPON REQUEST SECTION C, LINE 19

Return Reference	Explanation
FORM 990, PART IX, LINE 24E	CONTINGENCY/OTHER PROGRAM SERVICE EXPENSES 44,895 MANAGEMENT AND GENERAL EXPENSES 0 FUN DRAISING EXPENSES 0 TOTAL EXPENSES 44,895 WHITE HOUSE DECISION CENTER PROGRAM SERVICE E XPENSES 44,553 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 44,553 EDUCATION PROGRAM SERVICE EXPENSES 40,737 MANAGEMENT AND GENERAL EXPENSES 0 FUN DRAISING EXPENSES 0 TOTAL EXPENSES 40,737 SUMMER TEACHER INSTITUTE PROGRAM SERVICE EXPENSES 40,690 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 40,690 TRU MAGAZINE PUBLICATION PROGRAM SERVICE EXPENSES 25,574 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 25,574 ANNUAL MEMBERSHIP PROGRAMS PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 13,141 TOTA L EXPENSES 13,141 VOLUNTEER/INTERN SERVICES PROGRAM SERVICE EXPENSES 2,508 MANAGEMENT A ND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 0,508 PREVENTATIVE MAINTENA NCE PROGRAM SERVICE EXPENSES 925 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 925

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