

THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS 5151 TROOST AVENUE, NO. 300 KANSAS CITY, MO 64110

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0027

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** PUBLIC DISCLOSURE COPY **

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

2018 A For the 2017 calendar year, or tax year beginning OCT 1, 2017 and ending SEP 30, Check if applicable: C Name of organization D Employer identification number THE HARRY S. TRUMAN LIBRARY INSTITUTE Address change NATIONAL AND INTERNATIONAL AFFAIRS Name change 43-6042632 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 5151 TROOST AVENUE 816-400-1212 300 17,793,608. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return KANSAS CITY, MO 64110 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: CLYDE F WENDEL for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status: X = 501(c)(3) = 501(c)4947(a)(1) or 527) ◀ (insert no.) If "No," attach a list. (see instructions) J Website: ► WWW.TRUMANLIBRARYINSTITUTE.ORG **H(c)** Group exemption number ▶ **K** Form of organization: **X** Corporation Trust Other > L Year of formation: 1957 M State of legal domicile: MO Association Part I Summary Briefly describe the organization's mission or most significant activities: TO PRESERVE AND PROMOTE THE Activities & Governance ENDURING LEGACY OF HARRY S. TRUMAN, AMERICA'S 33RD PRESIDENT. if the organization discontinued its operations or disposed of more than 25% of its net assets. 30 3 Number of voting members of the governing body (Part VI, line 1a) $\overline{29}$ Number of independent voting members of the governing body (Part VI, line 1b) 4 11 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Prior Year Current Year** 2,626,654. 3,589,917. Contributions and grants (Part VIII, line 1h) 8 72,034. 82,975. Program service revenue (Part VIII, line 2g) 620,552. 1,163,628. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 -39,762.-41,959. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 4,794,561. 3,279,478. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 90,156. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 75,567. 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 797,812. 999,356. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 2,272,704. 2,452,753. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) $3,\overline{5}27,676$. $3,160,\overline{672}$ 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 118,806. 1,266,885. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 12,759,299. 13,733,703 20 Total assets (Part X, line 16) 0. 21 Total liabilities (Part X, line 26) 三年 759,299. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign JOHN A MACDONALD, TREASURER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature SUZANNE B. KIMBROUGH P01320005 Paid self-employed Firm's name ► RUBINBROWN LLP Firm's EIN ▶ 43-0765316 Preparer Firm's address 1200 MAIN STREET, SUITE 1000 Use Only Phone no. 816-472-1122 KANSAS CITY, MO 64105

X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

Pa	rt III Statement of Program	_		
		s a response or note to any line in this Part III		X
1	Briefly describe the organization's n	nission:		
	SEE SCHEDULE O			
2	Did the organization undertake any	significant program services during the year when the second services during the year when the second secon	aich ware not listed on the	
2				Yes X No
	If "Yes," describe these new service	on Schadula O		1e51NO
3	,	ing, or make significant changes in how it cond	ducts any program services?	Yes X No
3	If "Yes," describe these changes on		nucis, any program services:	165110
4		n service accomplishments for each of its three	largest program services, as measured	hy expenses
7		nizations are required to report the amount of		
	revenue, if any, for each program se		grants and anocations to others, the tot	ar experiece, and
4a	(Code:) (Expenses \$	359,844. including grants of \$	75,567.) (Revenue \$	88,625.
	SEE SCHEDULE O	moleaning grante of \$\frac{1}{2}	, (,
4b	(Code:) (Expenses \$	198,044. including grants of \$) (Revenue \$)
	SEE SCHEDULE O			
4c	(Code:) (Expenses \$	58,607. including grants of \$) (Revenue \$)
	SEE SCHEDULE O			·
4d	Other program services (Describe in	n Schedule O.)		
		. 1 • including grants of \$) (Revenue \$ 6,3	41.)
4e	Total program service expenses	2,294,906.		
				Faura 990 (0017

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			7.7
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			37
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		7.7	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			7.7
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			37
	complete Schedule G. Part III	19	000	X

Part IV | Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		_X_
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 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
		24u		
2 5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		Х
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	258		
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			v
	Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		_X_
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	00		
J-T		34		х
352	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	•	334		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256		
26	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
07	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

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Form 990 (2017) NATIONAL AND INTERNATIONAL AFFAIRS Part V Statements Regarding Other IRS Filings and Tax Compliance

Enter the number reported in Box 3 of Form 1006. Enter 0- if not applicable 1a 38 38 b Enter the number of Forms W2G included in line 1a. Enter 0- if not applicable 1b 0 0 0 did the organization comply with backing visit withouting rules for reportable payments to vendors and reportable gaming (gambling) withings to pize withrefully rules for reportable payments to vendors and reportable gaming (gambling) withings to pize withrefully rules for reportable payments to vendors and reportable gaming (gambling) withings to pize withrefully rules for reportable payments to vendors and reportable gaming (gambling) withings to pize withrefully rules for reportable payments to vendors and reportable gaming (gambling) withings to pize with rules of the control of the control of the pize		Check if Schedule O contains a response or note to any line in this Part V			
ta Enter the number reported in Box 3 of Form 1006. Enter -01 find applicable 1				Yes	No
b Enter the number of Forms W2G included in line 1s. Enter of in or applicable	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2					
2a Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 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) 3a IV the Vest, this is tilled a Form 990-T for this year? If Yes, 1 file 8b, provide an explanation in Schedule O 3b If Yes, 1 has it filed a Form 990-T for this year? If Yes, 1 file 8b, provide an explanation in Schedule O 3b If Yes, 1 files the name of the foreign country. b If Yes, 1 enter the name of the foreign country. 5co instructions for filing requirements for FinicPEN Form 114, Report of Foreign Bank and Financial accounts (FBAR). 5co with the second party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5co In Yes, 1 file in Sa or 5b, did the organization file Form 8886-17 6co Does the organization and prospective that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6co If Yes, 1 did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 organizations that may receive deductible contributions under section 170(c). 8 of If Yes, 1 did the organization notify the donor of the value of the goods or services provided? 7 organization receive a payment in eccess of \$75 made party sa contribution and party for goods and services provided to the payor? 7a IX or IV Yes, 1 did the organization received an contribution of care, boats of the goods or services provided? 7b If Yes, 1 did the organization received an contribution of care, boats and party for goods and services provided to the payor and party of the paymentation received an contribution of a distribution	С				
2a Earter the number of employees reported on Form W.3. Transmittat of Wage and Tax Statements, Eac 1.1 b if al least one is reported on line 2a, did the organization life 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-fig (see instructions) 3a Did the organization have unrelated Business gross income of \$1,000 or more during the year? 3a A Tarny time during the calendar year, did the organization for 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 in a foreign country. ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5b If *Yes,* inter 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 aparty to a prohibited tax whether transaction at any time during the tax year? 5c If *Yes,* to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5b If *Yes,* in the Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If *Yes,* to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If *Yes,* to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If *Yes,* to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If *Yes,* to line Sa or 5b, did the organization the organization that were not tax deductible? 6c If *Yes,* to line so organization that were not tax deductible contributions under section 170(c). a bit the organization that may receive a payment in excess of \$5\structure and the section 170(c). b If *Yes,* indicate the number of Forms 822? fled during the year			1c	Х	
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 g-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X b If "Yes," has it filed a Form 990 T for this year? If "No," to fine 3b, provide an explanation in Schedule O 4a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a X b If "Yes," enter the name of the foreign country. ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5b Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b If Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 8886:T? 6a Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b Organizations that may receive deductible as charitable contributions? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8c If Yes," did the organization notify the donor of the value of the goods or services provided? 7c If If If Yes," did the organization notify the donor of the value of the goods or services provided? 7c If If If Yes," an include with every solicitation and party for goods and services provided to the payor? 8c If Yes," an include the unimary testing the provided to the property for which it was required? 7d If Yes," an include the organization of	2a				
b If a 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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a A Tany time during the calendary year, did the organization have an interest in, or a signature or other authority ower, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a At any time the manne 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? 5b If Yes, "to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5b If Yes, "to line 5a or 5b, did the organization that If was or is a party to a prohibited tax shelter transaction? 5c If Yes, "to line 5a or 5b, did the organization that If was or is a party to a prohibited tax shelter transaction? 5c If Yes, "to line 5a or 5b, did the organization include with evary solicitation an express statement that such contributions or gitts were not tax deductible? 7c Organizations that may receive deductible contributions? 8d If Yes, "did the organization include with evary solicitation an express statement that such contributions or gitts were not tax deductible? 7c Organization receive a payment in excess of \$75 made party is a contribution and party for goods and services provided to the payor? 7a If Yes, "did the organization notify the donor of the value of the goods or services provided? 7b If Yes, "did the organization notify the donor of the value of the goods or services provided? 7c If If Yes, "Indicate the number of Forms 8282 filed during the year? 9c If the organization receive any funds, directly or indirectly, to pay premiu					
3a	b		2b	Х	
b If "Yes," has it filled a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. 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 (FBAF). 5a Was the organization a party to a prohibited tax shetter transaction at any time during the tax year? 5b Id any taxable party notify the organization file Form 89861? 6c If "Yes," to line 5a or 5b, did the organization file Form 89861? 6d 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? 6e X 5 If "Yes," do line do granization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charitable contributions. 6 Organizations that may receive deductible contributions under section 170(c). a Id the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Id the organization sell exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822? b If "Yes," indicate the number of Forms 8282 filed during the year b If "Yes," indicate the number of Forms 8282 filed during the year c If the organization receive a portion of the value of the goods or services provided? 7 The Id the organization receive and contribution of cars, boats, ariphanes, or other vehicles, did the organization that year and the preference of t		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. ▶ 5b If "Yes," enter the name of the foreign country. ▶ 5e instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAF). 5a Was the organization approach to a problem that a was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was 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 form 88861T? 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? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 bid the organization receive a payment in excess of \$76 made partly as a contribution and partly for goods and services provided to the payor? 7 Tess," did the organization notity the donor of the value of the goods or services provided? 7 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1088-C? 8 Sponsoring organizations make any stable distributions under section 4966? 9 Sponsoring organization make any stable distributions under section 4966? 9 Sponsoring organization make any stable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring org	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

The Enter the number of voting members of the governing body at the end of the tax year 1a Enter the number of voting members of the governing body, at the end of the tax year 1b there are netter differences in using a simple of the governing body, or if the governing body billegisled bread authority to an executive committee or similar committies, optain in Schiebulle 0. 1b Enter the number of voting members included in line 1a, above, who are independent 20 Did any officer, director, trustee, or key employee? 2 Did any officer, director, trustee, or key employee? 3 Did the organization of heights of comployee? 4 Did the organization become aware during the year of a significant charges or to its governing documents since the prior Form 990 was filled? 4 Did the organization become aware during the year of a significant charges or the organization states are significant charges to its governing documents since the prior Form 990 was filled? 4 Did the organization have members a stockholders? 5 Did the organization have members as too the organization of the organization have members as too third organization and the prior form 990 was filled? 5 Did the organization have members, stockholders? 6 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? 5 Did the organization the significant plots of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 5 Did the organization the significant plots? 5 Did the organization than the power plots of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 5 Did the organization than than the power plots of the organization reserved to the power plots of the power pl		Check if Schedule O contains a response or note to any line in this Part VI			X						
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)	June			C)			(D)	(E)	(F)
Name and Title	Average hours per week	box	not cl	heck i	more rson i	than o s both or/trus	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ALAN L ATTERBURY DIRECTOR	1.00	Х						0.	0.	0.
(2) MERILYN BERENBOM	1.00	-25						· · ·	•	•
DIRECTOR		Х						0.	0.	0.
(3) PAUL M BLACK	1.00								-	
DIRECTOR		Х						0.	0.	0.
(4) MORGAN A BURDEN	40.00									
EXECUTIVE DIRECTOR/EX OFFICIO DIRECT		Х		Х				189,158.	0.	39,687.
(5) KIRK W CARPENTER	1.00									
DIRECTOR		Х						0.	0.	0.
(6) MAUREEN MCMEEL CARROLL	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(7) CLIFTON TRUMAN DANIEL	1.00	ļ								
HONORARY CHAIR	1 00	Х						0.	0.	0.
(8) ROBERT P DUNN	1.00								_	
DIRECTOR	1 00	Х						0.	0.	0.
(9) JOSH EARNEST	1.00	3,7							_	_
DIRECTOR (10) GUILL G FUNG	1 00	Х						0.	0.	0.
(10) SUSIE S EVANS DIRECTOR	1.00	Х						0.	0.	_
(11) KURT GRAHAM	1.00	Λ						· ·	0.	0.
EX OFFICIO DIRECTOR	1.00	Х						0.	0.	0.
(12) GREG GUNDERSON	1.00	77							<u></u>	-
DIRECTOR	1.00	х						0.	0.	0.
(13) LISA HARDWICK	1.00									
SECRETARY/DIRECTOR		Х		х				0.	0.	0.
(14) MARY ANN HEISS	1.00								-	
DIRECTOR		Х						0.	0.	0.
(15) MARY HUNKELER	1.00									
DIRECTOR		Х						0.	0.	0.
(16) HARVEY L KAPLAN	1.00									
DIRECTOR		Х						0.	0.	0.
(17) JOHN A MACDONALD	1.00									
TREASURER/DIRECTOR		Х		Х				0.	0.	0.
732007 11-28-17										Form 990 (2017)

732007 11-28-17

Form 990 (2017)

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	jH t	ghes	st C	ompensated Employee	s (continued)				
(A)	(B) Average			(C Pos	C)	1		(D)	(E)		_	(F)	
Name and title	hours per		not c	heck	more	than d is both		Reportable compensation	Reportable compensation			timate nount	
	week	offic				or/trus		from	from related			other	
	(list any	director						the	organizations	_		pensa	
	hours for related	or di	tee			Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC	"		om the anizati	
	organizations	trustee or	al trus		99/	mpen		(88-27 1099-181130)			_	arıızatı d relatı	
	below	Individual t	nstitutional trustee	la la	Key employee	est co	- La					anizatio	
	line)	Indiv	Instit	Officer	Key e	High	Former			\perp			
(18) KAY MARTIN	1.00												
DIRECTOR		Х						0.	1	0.			0.
(19) BRIDGET MCCANDLESS	1.00												_
DIRECTOR	1 00	Х						0.		0.			0.
(20) DENNIS MERRILL	1.00	.,								,			^
DIRECTOR	1 00	Х				-		0.		0.			0.
(21) JANET NAPOLITANO DIRECTOR	1.00	Х						0.		0.			^
(22) LEIGH NOTTBERG	1.00	Λ				\vdash		1	,	"			0.
DIRECTOR	1.00	Х						0.		0.			0.
(23) JAMES B NUTTER JR	1.00					\vdash				- 			<u> </u>
VICE CHAIR/DIRECTOR	1,00	х		х				0.		0.			0.
(24) KAREN D PACK	1.00									+			
DIRECTOR		Х						0.	(0.			0.
(25) JASON C PARKER	1.00												
DIRECTOR		Х						0.	1	0.			0.
(26) JAMES D RINE	1.00												
DIRECTOR		Х						0.		0.			0.
1b Sub-total								189,158.		0.		9,68	
c Total from continuation sheets to Part VI								94,487.		0.		1,5	
d Total (add lines 1b and 1c)							<u> </u>	283,645.		0.		1,20	<i>J</i> / •
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	oove	e) wh	o re	eceived more than \$100,	000 of reportable				1
compensation from the organization												Yes	No
3 Did the organization list any former officer,	director or tru	ietad	a ka	w en	nnlo	N/AA	or l	highest compensated er	nnlovee on			100	-110
line 1a? If "Yes," complete Schedule J for s	•			•	•	•			iipioyee oii		3		Х
4 For any individual listed on line 1a, is the su									he organization				
and related organizations greater than \$150											4	х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	plete Schedule	e J fo	or su	ıch ı	pers	on					5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest co	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of compe	nsatio	on fro	m	
the organization. Report compensation for	the calendar ye	ear e	ndir	ng w	ith c	or wi	thin		ear.				
(A) Name and business	addrass							(B) Description of s	envices	Ca	(C		^
CALLACUED : ACCOCTATEC		DC.	T 7				_	MIICUIM DEDEC			, iibei	nsatio	1

GALLAGHER & ASSOCIATES, 8665 GEORGIA
AVENUE, SILVER SPRING, MD 20910

MONADNOCK MEDIA
59 NORTH STREET, HATFIELD, MA 01038

MUSEUM REDESIGN
MUSEUM REDESIGN
PLANNING - AUDIO/VIS 268,000.

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

2

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990

	L AND INT	ER	NA	TI	ON	AL	A	FFAIRS	43-604	2632
Part VII Section A. Officers, Directors,	Trustees, Key En	nplo	yee	s, aı	nd F	lighe	est (Compensated Employe	es (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition	1		Reportable	Reportable	Estimated
	hours	(cl	heck				ly)	compensation	compensation	amount of
	per							from	from related	other
	week) yee		the	organizations	compensation
	(list any	recto				em plc		organization	(W-2/1099-MISC)	from the
	hours for	ordi	ee.			sated		(W-2/1099-MISC)		organization
	related organizations	.nstee	l trust		99	n pen s				and related organizations
	below	Individual trustee or director	nstitutional trustee	_	nploy	stcor	-			Organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			
(27) ADAM P SACHS	1.00									
VICE CHAIR/DIRECTOR		х		Х				0.	0.	0.
(28) MARNY SHERMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(29) MEYER SOSLAND	1.00									
DIRECTOR		Х						0.	0.	0.
(30) JEANNINE STRANDJORD	1.00									
VICE CHAIR/DIRECTOR		Х		Х				0.	0.	0.
(31) TIMOTHY W TRIPLETT	1.00									
DIRECTOR		Х						0.	0.	0.
(32) DAVID J VON DREHLE	1.00									
DIRECTOR		Х						0.	0.	0.
(33) EILEEN WEIR	1.00									
DIRECTOR		Х						0.	0.	0.
(34) CLYDE F WENDEL	1.00									
CHAIR/DIRECTOR		Х		X				0.	0.	0.
(35) THOMAS R "BUZZ" WILLARD	1.00									
DIRECTOR		Х						0.	0.	0.
(36) LISA A SULLIVAN	40.00									
CFO/CAO				Х				94,487.	0.	21,520.
		ł								
		ŀ								
		<u> </u>	\vdash				<u> </u>			
			\vdash							
	<u> </u>	Ī								
		<u> </u>			<u> </u>	l	<u> </u>			
Tatal to Dout VIII. Cooking A. Page 4.								94,487.		21,520.
Total to Part VII, Section A, line 1c								74,40/•		41,340

Form 990 (2017) NATIONA
Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
			<u></u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Ŋυ	1 a	Federated campaigns	1a					312 311
ant	. u	Membership dues		267,995.				
P, G	c	Fundraising events		473,909.				
ifts, r A	q	Related organizations		, -				
nia	۰ و	Government grants (contributi						
ons	f	All other contributions, gifts, gran						
uti		similar amounts not included above		2,848,013.				
ot	а	Noncash contributions included in lines		89,345.				
Contributions, Gifts, Grants and Other Similar Amounts	b h	Total. Add lines 1a-1f			3,589,917.			
<u> </u>				Business Code				
ø)	2 a	WHITE HOUSE DECISION CE	ENTER REVEN	900099	82,975.	82,975.		
vic	b				,	,		
Ser	c							
am.	d							
Program Service Revenue	e							
Pro	f	All other program service reve	nue					
		Total. Add lines 2a-2f			82,975.			
	3	Investment income (including						
		other similar amounts)			281,016.			281,016.
	4	Income from investment of tax						
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	13,763,959.					
	b	Less: cost or other basis						
		and sales expenses	12,881,347.					
	С	Gain or (loss)	882,612.					
	d	Net gain or (loss)			882,612.			882,612.
anu	8 a	Gross income from fundraising including \$ 473						
Other Revenu		contributions reported on line						
Ŗ		Part IV, line 18	a	63,750.				
:hei	b	Less: direct expenses		4400				
Ö		Net income or (loss) from fund		>	-53,950.			-53,950.
		Gross income from gaming ac		,				
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less	returns					
		and allowances	a					
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenue	e	Business Code				
	11 a	MISCELLANEOUS INCOME		900099	11,991.	11,991.		
	b							
	С							
		All other revenue			44.00			
		Total. Add lines 11a-11d			11,991.	0,, 0,5	-	1 100 550
	12	Total revenue. See instructions.		▶	4,794,561.	94,966.	0.	1,109,678.

Part IX | Statement of Functional Expenses

	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
_	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	60 122	60 122		
_	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, lines 15 and 16	15,435.	15,435.		
4	Benefits paid to or for members	13,433.	13,433.		
- 5	Compensation of current officers, directors,				
,		362,239.	52,003.	189,248.	120,988
6	Compensation not included above, to disqualified	302,2331	32,0031	103,2101	120,300
•	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
, B	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
0	Payroll taxes	56,337.	18,443.	9,427.	28,467
1	Fees for services (non-employees):	,	,	,	•
а	Management				
b	Legal	34,953.		34,953.	
	Accounting	25,750.		25,750.	
	Lobbying				
е	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 Sch 0.)	22,994.		22,994.	
2	Advertising and promotion	77,361.	77,361.		
3	Office expenses	77,288.		77,288.	
4	Information technology	46,307.	46,307.		
5	Royalties				
3	Occupancy				
7	Travel				
3	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings	12,537.		12,537.	
)	Interest				
I	Payments to affiliates				
2	Depreciation, depletion, and amortization	11 000		11 000	
3	Insurance	11,929.		11,929.	
1	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
а	amount, list line 24e expenses on Schedule 0.) CAPITAL PROJECTS	1,306,536.	1,306,536.		
a b	FUNDRAISING OTHER DIREC	323,132.	-,500,550.		323,132
C	PUBLIC PROGRAMS	198,044.	198,044.		525,152
d	EXHIBITS	58,608.	58,608.		
e	All other expenses SEE SCH O	213,023.	199,882.		13,141
5	Total functional expenses. Add lines 1 through 24e	3,527,676.	2,294,906.	430,541.	802,229
<u> </u>	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)				

Form 990 (2017)
Part X Balance Sheet

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	49,117.	1	45,872.
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
ا ي	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
8 B	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges		9	
10:	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D10a			
- -	Less: accumulated depreciation 10b		10c	
11	Investments - publicly traded securities	12,710,182.	11	13,687,831
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	12,759,299.	16	13,733,703
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ທ 22	Loans and other payables to current and former officers, directors, trustees,			
<u> </u>	key employees, highest compensated employees, and disqualified persons.			
Liabilities	Complete Part II of Schedule L		22	
ے 23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	0
	Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗓 and			
န္မ	complete lines 27 through 29, and lines 33 and 34.			_ ,
ဋိ 27	Unrestricted net assets	5,976,318.	27	5,435,327
28	Temporarily restricted net assets	3,279,833.	28	4,745,228
<u>2</u> 29	Permanently restricted net assets	3,503,148.	29	3,553,148
호	Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
5	and complete lines 30 through 34.			
हु 30	Capital stock or trust principal, or current funds		30	
§ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances 1	Retained earnings, endowment, accumulated income, or other funds	10 750 000	32	10 700 700
00	Total net assets or fund balances	12,759,299.	33	13,733,703
34	Total liabilities and net assets/fund balances	12,759,299.	34	13,733,703. Form 990 (2017

Form **990** (2017)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,79		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,52		
3	Revenue less expenses. Subtract line 2 from line 1	3		.,266,885. 2,759,299.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				
5	Net unrealized gains (losses) on investments	5		-29	2,4	81.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	<u> 13</u>	<u>,73</u>	3,7	<u>03.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
	Accounting method used to prepare the Form 990: Cash Accrual X Other MODIFIE	ח כיז	∆ Ç∐		Yes	No
1			1011			
•	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule			0-		x
Za	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		
	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				v	
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Au	dit			
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed aud	tit			
	ar audita, avalain why in Cahadula O and describe any stone taken to undergo auch audita			26		I

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

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NATIONAL AND INTERNATIONAL AFFAIRS 43-6042632 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 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 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed n your governing document? (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2017 NATIONAL AND INTERNATIONAL AFFAIRS

43-6042632 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) T 1072128. 1647422. 1455801. 2626654. 3589917. 10391					
membership fees received. (Do not include any "unusual grants.") 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 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) 6 A Gross income from interest, dividends, payments received on securities loans, rents, royalties,					
include any "unusual grants.") 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 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties,					
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 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) T					
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8 Gross income from interest, dividends, payments received on securities loans, rents, royalties,					
dividends, payments received on securities loans, rents, royalties,	1922.				
securities loans, rents, royalties,					
	1724				
···	<u> 1734.</u>				
9 Net income from unrelated business					
activities, whether or not the					
business is regularly carried on					
10 Other income. Do not include gain					
or loss from the sale of capital assets (Explain in Part VI.) 65,107. 85,486. 96,814. 72,402. 75,741. 395,	EEO				
7	9206.				
	9200.				
12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)					
organization, check this box and stop here Section C. Computation of Public Support Percentage					
14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 60.0	04 %				
15 Public support percentage from 2016 Schedule A, Part II, line 14 15 63.7					
16a 33 1/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and					
stop here. The organization qualifies as a publicly supported organization	\mathbf{X}				
b 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box					
and stop here. The organization qualifies as a publicly supported organization	ightharpoons				
17a 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,					
and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization					
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	ightharpoons				
b 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or					
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the					
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization					
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions					

Schedule A (Form 990 or 990-EZ) 2017 NATIONAL AND INTERNATIONAL AFFAIRS

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services 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 under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	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 Se	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Net income from unrelated business activities not included in line 10b, whether or not the business is						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)				1		<u></u>
14	First five years. If the Form 990 is for	ŭ		•	•		
So	check this box and stop here	c Support Do	rentage				P
	•			olumn (fl)		15	0/
	Public support percentage for 2017 (I					15	<u>%</u>
16 Se	Public support percentage from 2016 ction D. Computation of Inves					10	<u>%</u>
	Investment income percentage for 20			no 13 column (fl)		17	%
	Investment income percentage from					18	——————————————————————————————————————
18 19:	a 33 1/3% support tests - 2017. If the						
196	more than 33 1/3%, check this box ar						`
k	33 1/3% support tests - 2016. If the	organization did r	not check a box on	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che						▶∐
20	Drivate foundation If the organization	n did not chack a	hay on line 14 10	a or 10h chack th	nic hay and can in	etructions	

Schedule A (Form 990 or 990-EZ) 2017 NATIONAL AND INTERNATIONAL AFFAIRS

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	-		
	2		
	2-		
	3a		
	3b		
	0-		
	Зс		
	4a		
	4.		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	-		
	10b		<u> </u>
9	90 or 99	0-EZ)	2017

Pa	t IV Supporting Organizations (continued)			
	, and the second		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
<u></u>	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations			
	an Divin Type in Supporting Significations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	-		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions)		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	2a		
h	that these activities constituted substantially all of its activities. Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	Za		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations			
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. A					
	other Type III non-functionally integrated supporting organizations must of	omplete Sec	tions A through E.			
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
_1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
_4	Add lines 1 through 3	4				
_5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
_ 7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
a	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
c	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
_3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions)	4				
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
_6	Multiply line 5 by .035	6				
_7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	tion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functional	ally integrate	d Type III supporting orga	anization (see		

Schedule A (Form 990 or 990-EZ) 2017

instructions).

	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continued)	C CC = CC = Tage T
Secti	on D - Distributions	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(OONEMACO)	Current Year
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		Г	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2017 distributable amount			
<u> </u>	Carryover from 2012 not applied (see instructions)			
_ <u>i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
U	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3			
'	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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Schedule A	(Form 990 or 990-EZ) 20	017 NATIONA I	L AND	INTERNATION	IAL AFFAIRS	43-6042632 Page 8
Part VI	Supplemental Inf	ormation. Provide	de the exp	lanations required by F	Part II. line 10: Part II. line	17a or 17b; Part III, line 12;
	Part IV, Section A, line	s 1, 2, 3b, 3c, 4b, 4c	c, 5a, 6, 9	a, 9b, 9c, 11a, 11b, an	d 11c; Part IV, Section B,	, lines 1 and 2; Part IV, Section C,
	line 1; Part IV, Section	D, lines 2 and 3; Pa	rt IV, Sect	tion 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, a	nd 8; and Part V, Se	ection E, li	nes 2, 5, and 6. Also co	omplete this part for any	additional information.
	(See instructions.)					
						

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No. 1545-0047

Name of the organization

THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS

Employer identification number

43-6042632

Organization type (check one):						
Filers of	:	Section:				
Form 990	or 990-EZ	$\boxed{\textbf{X}}$ 501(c)(3) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990)-PF	501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	nly a section 501(c)(covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
	_	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special l	Rules					
X	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from fouring the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.				
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III.				
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year				
		at inn't covered by the Conerel Bule and/or the Special Bules deepn't file Schedule B (Form 900, 900 EZ, or 900 BE)				

but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization
THE HARRY S. TRUMAN LIBRARY INSTITUTE
NATIONAL AND INTERNATIONAL AFFAIRS

Employer identification number

43-6042632

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Name, audress, and ZIP + 4	\$ 1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 717,150.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$	Person X Payroll
(a)	(b)	(c)	(d)
	Name, address, and ZIP + 4	* 267,486.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 103,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
THE HARRY S. TRUMAN LIBRARY INSTITUTE
NATIONAL AND INTERNATIONAL AFFAIRS

Employer identification number

43-6042632

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		Oahadula D /Farms /	000 000-E7 or 000-DE\ (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS 43-6042632 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
ŀ			

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy

Tax) (see separate instructions), then				
•	Section 501(c)(4), (5), or (6) organization	tions: Complete Part III.			
		RY S. TRUMAN LIBE	RARY INSTITU	JTE Emp	loyer identification number
	NATIONA	L AND INTERNATION	NAL AFFAIRS		43-6042632
Pa	art I-A Complete if the org	ganization is exempt unde	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organize Political campaign activity expendition Volunteer hours for political campa	tures			S
Pa	art I-B Complete if the org	ganization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization under	er section 4955	> \$	S
2	Enter the amount of any excise tax	incurred by organization manage	rs under section 4955	▶ \$	S
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 t	for this year?		Yes No
4a	a Was a correction made?				Yes No
	If "Yes," describe in Part IV.	 	504/ \	1 1' 504/	\(\alpha\)
		ganization is exempt unde		<u>`</u>	** *
	Enter the amount directly expended				S
2	Enter the amount of the filing organ	nization's funds contributed to oth	ner organizations for se	ection 527	
	exempt function activities				S
3	Total exempt function expenditures			,	
	line 17b				
	Did the filing organization file Form				
5	Enter the names, addresses and er	· ·	•	-	
	made payments. For each organiza				•
	contributions received that were pr			· · · · · · · · · · · · · · · · · · ·	e segregated fund or a
	political action committee (PAC). If	T		T	T
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

THE HARRY S. TRUMAN LIBRARY INSTITUTE

Schedule C (Form 990 or 990-EZ) 2017 No. 12 Part II-A Complete if the organization					5042632 Page 2 ection under
section 501(h)).					
		affiliated group (and list i	n Part IV each affiliated	group member's nam	ne, address, EIN,
expenses, and share	•	· ,			
B Check ▶ if the filing organization	ion checked box A	A and "limited control" pr	ovisions apply.		1
	s on Lobbying Ex itures" means an	penditures nounts paid or incurred	.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinio	n (grass roots lobbying)			
b Total lobbying expenditures to influe	ence a legislative l	oody (direct lobbying)			
c Total lobbying expenditures (add lin	es 1a and 1b)				
d Other exempt purpose expenditures	3				
e Total exempt purpose expenditures	(add lines 1c and	1d)			
f Lobbying nontaxable amount. Enter	the amount from	the following table in bo	th columns.		
If the amount on line 1e, column (a) or	(b) is: The	lobbying nontaxable an	nount is:		
Not over \$500,000	20%	of the amount on line 1e).		
Over \$500,000 but not over \$1,000,	000 \$100	0,000 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,50	0,000 \$175	5,000 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	00,000 \$225	5,000 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	00,000.				
g Grassroots nontaxable amount (ent	er 25% of line 1f)				
h Subtract line 1g from line 1a. If zero	or less, enter -0-				
i Subtract line 1f from line 1c. If zero	or less, enter -0-				
j If there is an amount other than zero	o on either line 1h	or line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this y	ear?				Yes No
	4-Year	Averaging Period Unde	r section 501(h)		
(Some organizations the		• •	•	f the five columns b	elow.
	See the sep	parate instructions for li	ines 2a through 2f.)		
	Lobbying Ex	penditures During 4-Ye	ar Averaging Period		_
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
On Labbying postovable amount					
2a Lobbying nontaxable amount b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2017

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

	(a)		(b)	
Yes	No	Amo	ount	
X				
X				
	X			
<u> </u>		<u></u>		
on 501(c)(5)	, or sec	tion		
		Yes	No	
	1			
Cai				
	2a			
	_			
cess				
oolitical				
	4			
	. 4			
	. 4			
	5	nd 2 (see		
	5	nd 2 (see		
o list); Part II-A	, lines 1 ai			
o list); Part II-A	, lines 1 ar			
o list); Part II-A	, lines 1 ar			
o list); Part II-A	, lines 1 ar			
D A MEET	, lines 1 ar			
i	he prior year? on 501(c)(5) "No," OR (X X Don 501(c)(5), or second	X X X In 501(c)(5), or section Yes 1 2 In 2 In 501(c)(5), or section "No," OR (b) Part III-A, line 1 Inicial 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS

Employer identification number 43-6042632

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, lin	e 6.				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	ed funds			
	are the organization's property, subject to the organization's $% \left(1\right) =\left(1\right) \left(1$					
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only			
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose	conferring			
	impermissible private benefit?		Yes No			
Par			Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (e.g., recreation or e		torically important land area			
	Protection of natural habitat	Preservation of a cer	tified historic structure			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form				
	day of the tax year.		Held at the End of the Tax Year			
	Total number of conservation easements		I I			
b	Total acreage restricted by conservation easements					
	Number of conservation easements on a certified historic stru					
d	Number of conservation easements included in (c) acquired a		I I			
	listed in the National Register					
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax			
	year ▶					
4	Number of states where property subject to conservation eas					
5	Does the organization have a written policy regarding the per					
_	violations, and enforcement of the conservation easements it					
6	Staff and volunteer hours devoted to monitoring, inspecting,	nandling of violations, and enforcing cons	servation easements during the year			
_	<u> </u>					
7	Amount of expenses incurred in monitoring, inspecting, hand	iling of violations, and enforcing conserva	tion easements during the year			
			I-\/4\/D\/3\			
8	Does each conservation easement reported on line 2(d) abov					
•	and section 170(h)(4)(B)(ii)?					
9	include, if applicable, the text of the footnote to the organization	-				
	conservation easements.	tion's illiancial statements that describes	the organization's accounting for			
Par	t III Organizations Maintaining Collections of	Art. Historical Treasures. or Ot	her Similar Assets.			
	Complete if the organization answered "Yes" on Form	•				
	If the organization elected, as permitted under SFAS 116 (AS		nent and halance sheet works of art			
14	historical treasures, or other similar assets held for public exh					
	the text of the footnote to its financial statements that descril		noc or public corrido, provido, irri dicixiii,			
b	If the organization elected, as permitted under SFAS 116 (AS		and balance sheet works of art, historical			
-	treasures, or other similar assets held for public exhibition, ed					
	relating to these items:	addation, or recourse in farther areas of par	one convice, provide the following amounts			
	(i) Revenue included on Form 990, Part VIII, line 1		> \$			
			. .			
2						
_	the following amounts required to be reported under SFAS 1:		. g, p. e			
а	Revenue included on Form 990, Part VIII, line 1		> \$			
	Assets included in Form 990, Part X					

732051 10-09-17

Schedule D (Form 990) 2017

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

Pai	t III Organizations Maintaining Co	llections of Art	, Historical Tre	asures, or Othe	r Simila	r Assets	(continue	ed)
3	Using the organization's acquisition, accessio	n, and other records	, check any of the f	ollowing that are a s	ignificant ι	se of its c	ollection ite	ems
	(check all that apply):							
а	Public exhibition	d	Loan or excl	hange programs				
b	Scholarly research	е		0 1 0				
С	Preservation for future generations							
4	Provide a description of the organization's col	lections and explain	how they further th	e organization's exe	mot purpo	se in Part	XIII	
5	During the year, did the organization solicit or					oc iiii aic	AIII.	
	to be sold to raise funds rather than to be mai						Yes	☐ No
Pai	t IV Escrow and Custodial Arrang							
	reported an amount on Form 990, Part		·· · · · · · · · 9-			.,, .	,	
1a	Is the organization an agent, trustee, custodia	n or other intermedia	ary for contributions	or other assets not	included			
	on Form 990, Part X?		•				Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the follo	owing table:				_	
	3	· ·	3				Amount	
С	Beginning balance				1c			
	Additions during the year							
e	Distributions during the year							
f					1f			
	Ending balance Did the organization include an amount on Fo						Yes	No
	_				шу:		_ 1es	
	If "Yes," explain the arrangement in Part XIII. Or V Endowment Funds. Complete if				10			
	Zindowinone i dindoi Complete il					roore book	(-) Four \"	
	5 , , ,	(a) Current year 8,375,121.	(b) Prior year	(c) Two years back	· · ·	years back		
1a	Beginning of year balance	· · · +	7,744,253.	7,292,433.	<u> </u>	23,244.		28,677.
b	Contributions	50,000.	2,958.	5,034.		75,276.		50,500.
С	Net investment earnings, gains, and losses	538,299.	914,013.	693,404.	-1	42,981.	6	49,647.
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs	863,087.	286,103.	246,618.	2	63,106.	2	05,580.
f	Administrative expenses							
g	End of year balance	8,100,333.	8,375,121.	7,744,253.	7,2	92,433.	7,4	23,244.
2	Provide the estimated percentage of the curre	ent year end balance	(line 1g, column (a)) held as:				
а	Board designated or quasi-endowment	31.72	_%					
b	Permanent endowment ► 43.86	%						
С	Temporarily restricted endowment ▶ 24	·· 4 2 %						
	The percentages on lines 2a, 2b, and 2c shou							
За	Are there endowment funds not in the posses	sion of the organizat	ion that are held an	d administered for the	ne organiza	ation		
	by:	3			3		Y	es No
	(i) unrelated organizations							X
	(ii) related organizations						3a(ii)	Х
h	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	d on Schedule R?					
4	Describe in Part XIII the intended uses of the						0.0	
	t VI Land, Buildings, and Equipme		mont farias.					
	Complete if the organization answered		Part IV line 11a S	ee Form 990 Part X	line 10			
	Description of property	(a) Cost or ot			Accumulate	24	(d) Book v	·oluo
	Description of property	basis (investm	• •	1 ' '	epreciation	I	(u) book v	alue
10	Land	· ·		(=, 0.,				
_	Land							
b	Buildings							
C	Leasehold improvements							
d	Equipment							
	Other					_		
ı ota	l. Add lines 1a through 1e. (Column (d) must eq	ual Form 990. Part X	(. column (B). line 10	Oc.)				0.

Schedule D (Form 990) 2017

THE HARRY S	. TRUMAN LI	BRARY INSTITU	UTE		
		ONAL AFFAIRS		-6042632	Page (
Part VII Investments - Other Securities.					
Complete if the organization answered "Yes"					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	valuation: Cost or end	l-of-year market v	alue
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.					
	5 000 D 1 N	" 44 0 5 000	D 1 V II 10		
Complete if the organization answered "Yes" (a) Description of investment	on Form 990, Part IV, (b) Book value		Part X, line 13. /aluation: Cost or end	l of year market y	value.
	(b) book value	(c) Method of V	valuation. Cost of end	r-or-year market v	alue
(1)					
(2)					
(3)					
(4)					
<u>(5)</u> (6)					
(7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.	<u> </u>				
Complete if the organization answered "Yes"	on Form 990. Part IV.	line 11d. See Form 990.	Part X. line 15.		
	Description	,	,	(b) Book va	alue
(1)	·				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	e 15.)		>		
Complete if the organization answered "Yes"	on Form 990. Part IV.	line 11e or 11f. See Forn	n 990. Part X. line 25.		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
(4)					
(5)					

 \triangleright Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

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

Sche	THE HARRY S. TRUMAN LIBRARY sedule D (Form 990) 2017 NATIONAL AND INTERNATIONAL			43-6	5042632 Page 4
	rt XI Reconciliation of Revenue per Audited Financial Statemer				, ugo
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	4,502,080.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-292,481.		
b					
С					
d	Other (Describe in Part XIII.)	1 1			
е	Add lines 2a through 2d			2e	-292,481.
3	Subtract line 2e from line 1			3	4,794,561.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	4,794,561.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents With	n Expenses per f	Returr	۱.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	3,527,676.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С					
d	Other (Describe in Part XIII.)	1 1			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	3,527,676.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			5	3,527,676.
Pa	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit			; Part X	(, line 2; Part XI,
PAI	RT V, LINE 4:				
THI	E INTENDED PURPOSE OF THE ENDOWMENT IS TO C	ONTIN	UE TO PROVI	DE C	CONTINUOUS
SUI	PPORT TO THE INSTITUTE, THE HARRY S. TRUMAN	LIBR	ARY AND MUS	EUM,	AND TO
PRO	OMOTE THE LEGACY OF HARRY S. TRUMAN.				
THI	E INSTITUTE HAS ADOPTED INVESTMENT AND SPEN	DING	POLICIES FO	R EN	IDOWMENT
	SETS THAT ATTEMPT TO PRESERVE AND ENHANCE T				

ENDOWMENT. ENDOWMENT ASSETS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED ENDOWMENT FUNDS THE INSTITUTE MUST HOLD IN PERPETUITY OR FOR DONOR-SPECIFIED PERIODS, AS WELL AS THOSE OF BOARD DESIGNATED ENDOWMENT FUNDS. UNDER THE INSTITUTE'S POLICIES, ENDOWMENT ASSETS ARE INVESTED IN A MANNER THAT IS INTENDED TO PRODUCE A MODERATE RETURN WHILE ASSUMING A 732054 10-09-17

Schedule D (Form 990) 2017

Part XIII | Supplemental Information (continued)

MINIMAL LEVEL OF INVESTMENT RISK.

THE INSTITUTE HAS A POLICY (THE SPENDING POLICY) OF APPROPRIATING FOR

EXPENDITURES EACH YEAR: AN AMOUNT EQUAL TO 4% OF THE TRAILING 12-QUARTER

AVERAGE MARKET VALUE OF THE ASSETS IN THE VARIOUS ENDOWMENT AND OTHER FUND

ACCOUNTS THAT ARE SUBJECT TO THE INSTITUTE'S STATEMENT OF INVESTMENT

POLICY AND OBJECTIVE WILL BE DISTRIBUTED ANNUALLY TO SUPPORT THE

INSTITUTE'S BUDGETED EXPENDITURES. THIS DISTRIBUTION PERCENTAGE WILL BE

APPLIED PURSUANT TO THE ABOVE FORMULA TO EACH INDIVIDUAL ACCOUNT NOT

SUBJECT TO INCOME RESTRICTIONS OR OTHER PAYOUT AGREEMENTS, WHICH WOULD

SUPERCEDE THE DISTRIBUTION POLICY.

KEMPTON ENDOWMENT:

PER THE TERMS OF GRETA KEMPTON'S 1991 WILL, 25% OF HER ESTATE GIFT WAS

USED BY THE INSTITUTE FOR ITS GENERAL PURPOSES. THE REMAINING 75% CORPUS

IS HELD IN A PERMANENTLY RESTRICTED ENDOWMENT FUND WITH THE INCOME THERE

FROM TO BE USED BY THE INSTITUTE FOR ITS GENERAL PURPOSES. THE

UNRESTRICTED INVESTMENT INCOME CAN BE EXPENDED DURING THE FISCAL YEAR FOR

PURPOSES DEEMED APPROPRIATE AND NECESSARY BY THE INSTITUTE'S BUDGET,

FINANCE AND INVESTMENT COMMITTEE.

JOHNSTON ENDOWMENT: TERMS STATE THAT THE CORPUS IS PERMANENTLY

RESTRICTED. INVESTMENT INCOME IS TEMPORARILY RESTRICTED TO SUBSIDIZE

EXPENSES ASSOCIATED WITH THE ANNUAL "HOWARD AND VIRGINIA BENNETT FORUM ON

THE PRESIDENCY." ADDITIONALLY, INVESTMENT INCOME CAN BE EXPENDED TO

SUPPORT AN ANNUAL ARCHIVAL RESEARCH INTERNSHIP.

BOARD-DESIGNATED ENDOWMENT FUND, WHICH RESULTS FROM AN INTERNAL

Schedule D (Form 990) 2017

Part XIII | Supplemental Information (continued)

DESIGNATION, IS NOT DONOR-RESTRICTED AND IS CLASSIFIED AS UNRESTRICTED NET ASSETS. UP TO 5% OF THE FUND'S PRINCIPAL CAN BE EXPENDED ON AN ANNUAL THESE ASSETS MAY BE EARMARKED FOR FUTURE PROGRAMS, PURCHASE OR CONSTRUCTION OF FIXED ASSETS, CONTINGENCIES OR OTHER USES AS DETERMINED BY THE INSTITUTE'S EXECUTIVE COMMITTEE OR BOARD OF DIRECTORS WITH PRIOR RECOMMENDATION FROM THE BUDGET, FINANCE AND INVESTMENT COMMITTEE. SPECIAL EXCEPTIONS TO THIS POLICY TO ALLOW FURTHER REDUCTION OF THE PRINCIPAL WILL BE APPROVED BY A FORMAL VOTE OF THE INSTITUTE'S BOARD OF DIRECTORS.

HULSTON FAMILY ENDOWMENT: IN FY13, THE HULSTON FAMILY FOUNDATION DONATED \$50,000 TO THE INSTITUTE FOR THE PURPOSE OF ESTABLISHING A PERMANENTLY RESTRICTED ENDOWMENT FUND. THE TERMS AND CONDITIONS ESTABLISHED WITH THE DONOR STIPULATE THAT THE INITIAL \$50,000 GIFT WILL BE PRESERVED IN PERPETUITY WHILE THE INVESTMENT INCOME WILL BE USED TO FUND A SPECIAL \$2,500 JOHN K. HULSTON SCHOLARSHIP ON AN ANNUAL BASIS. WHEN NECESSARY, THE INSTITUTE AGREES TO SUPPLEMENT THE INVESTMENT PROCEEDS FROM THE HULSTON ENDOWMENT FUND WITH GENERAL UNRESTRICTED FUNDS TO ENSURE THAT THIS GRANT IS AVAILABLE EACH YEAR.

HUNKELER FAMILY ENDOWMENT: IN FY18, THE HUNKELER FAMILY ESTABLISHED A PERMANENTLY RESTRICTED \$350,000 ENDOWMENT FUND. THE TERMS AND CONDITIONS ESTABLISHED WITH THE DONOR STIPULATE THAT THE \$350,000 GIFT (PAYABLE OVER 7 YEARS) WILL BE USED TO ENDOW THE INSTITUTE'S SCHOLAR'S AWARD AND THE TRUMAN BOOK AWARD.

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

THE HARRY S. TRUMAN LIBRARY INSTITUTE

NATIONAL AND INTERNATIONAL AFFAIRS General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

Employer identification number

43-6042632

Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in the region (e) If activity listed in (d) (f) Total employees, agents, and independent expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in the region in the region in the region

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

0

0

0

0

0

Schedule F (Form 990) 2017

0.

0.

and 3b)

3 a Sub-total **b** Total from continuation

> sheets to Part I Totals (add lines 3a

Schedule F (Form 990) 2017

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	ch the grantee or cou	nsel has provided a sect	recognized as charities by the fiction 501(c)(3) equivalency letter					1

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if	additional space is need	ed.	,				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
RESEARCH GRANTS	EUROPE	2	6,393.	CHECK, WIRE TRANSFER	0.		
RESEARCH GRANTS	RUSSIA	1	2,727.	CHECK, WIRE TRANSFER	0.		
RESEARCH GRANTS	SOUTH AMERICA	1	3,541.	CHECK, WIRE TRANSFER	0.		
RESEARCH GRANTS	MIDDLE EAST	1	2,774.	CHECK, WIRE TRANSFER	0.		

Schedule F (Form 990) 2017

Part IV Foreign Forms 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes." the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Yes X No Corporation (see Instructions for Form 926) 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 Yes X No Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) 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) 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 Yes X No (see Instructions for Form 8621) 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 Yes X No Foreign Partnerships (see Instructions for Form 8865)

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; don't file with Form 990)

Schedule F (Form 990) 2017

X No

Yes

6

Schedule F (Form 990) 2017 NATIONAL 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.

PART I, LINE 2:

AS PART OF OUR MISSION, TRUMAN LIBRARY INSTITUTE GRANTS & AWARDS ARE

GIVEN FOR THE PURPOSE OF SUPPORTING SCHOLARSHIP BASED ON SOME ASPECT OF

THE LIFE AND CAREER OF HARRY S. TRUMAN OR OF THE PUBLIC AND FOREIGN

POLICY ISSUES WHICH WERE PROMINENT DURING THE TRUMAN ADMINISTRATION.

SELECTION IS MADE BY THE INSTITUTE'S COMMITTEE ON RESEARCH, SCHOLARSHIP

AND EDUCATION. FUNDING DECISIONS, VIA AN APPLICATION PROCESS, ARE BASED

ON QUALITY, ORIGINALITY, SIGNIFICANCE OF THE PROJECT AND ITS RELATIONSHIP

TO THE EXSITING TRUMAN HISTORIOGRAPHY, AND TWO LETTERS OF REFERENCE.

RESEARCH GRANTS, AWARDED BIANNUALLY IN APRIL AND OCTOBER, REQUIRE TRAVEL

TO THE TRUMAN LIBRARY FOR STUDY OF ITS ARCHIVAL COLLECTIONS. ONE-TIME

PAYMENTS ARE DISBURSED DIRECTLY AND PAYABLE TO THE AWARDEE UPON

COMPLETION OF THE RESEARCH TRIP AND DO NOT REQUIRE ANY FURTHER

MONITORING.

THE SPRING ROUND OF RESEARCH GRANTS INCLUDES THE AWARD OF ONE ENDOWED

JOHN K. HULSTON SCHOLARSHIP, WHICH PROVIDES \$2,500 TO SUPPORT RESEARCH

FOR A SINGLE PROJECT REQUIRING TRAVEL TO THE TRUMAN LIBRARY AND

ADDITIONAL ARCHIVAL REPOSITORIES. CONVENTIONAL RESEARCH GRANT GUIDELINES

AND EXPECTATIONS APPLY; HOWEVER, APPLICANTS ARE ALSO REQUIRED TO SUBMIT A

DETAILED PROJECT BUDGET OUTLINING THE ADDITIONAL REPOSITORIES TO BE

CONSULTED AND HOW MATERIALS AT THOSE REPOSITORIES FIT INTO THE LARGER

PROJECT.

DECISIONS REGARDING SELECTION OF DISSERTATION YEAR FELLOWSHIP AND SCHOLAR'S AWARD WINNERS ARE MADE VIA A SIMILAR APPLICATION PROCESS.

DISSERTATION YEAR FELLOWSHIP PAYMENTS ARE DISBURSED DIRECTLY AND PAYABLE

Schedule F (Form 990) 2017 NATIONAL 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.

TO THE AWARDEE IN TWO INSTALLMENTS. SCHOLAR'S AWARD PAYMENTS CAN BE

DISBURSED DIRECTLY AND PAYABLE TO THE AWARDEE OR THEIR INSTITUTION AND

ARE PAYABLE IN TWO INSTALLMENTS. AWARDEES ARE REQUIRED TO SUBMIT A

PROGRESS REPORT ON THE WORK DONE NO LATER THAN SIX MONTHS FROM ISSUANCE

OF THE SECOND INSTALLMENT. AWARDEES AGREE TO THE STIPULATION TO PROVIDE

THE TRUMAN LIBRARY WITH COPIES OF ANY PUBLICATION RESULTING FROM RESEARCH

SUPPORTED BY ONE OF THE 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 TRUMAN ADMINISTRATION.

PUBLISHERS ARE REQUIRED TO SUBMIT FIVE COPIES OF AN APPROPRIATE ENTRY TO

THE COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCATION FOR EVALUATION AND

AWARD SELECTION. AWARDS ARE GIVEN IN EVEN-NUMBERED YEARS. ONE-TIME

PAYMENTS ARE DISBURSED DIRECTLY AND PAYABLE TO THE AWARDEE AND REQUIRE NO

FURTHER MONITORING.

Schedule F (Form 990) 2017

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest instructions.

2017

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS

Employer identification number

	D AND INTERNATIONAL		T 77-		143 0042	002						
Part I Fundraising Activities. required to complete this part	Complete if the organization answet.	red "Y	es" or	n Form 990, Part IV, I	ine 17. Form 990-EZ	filers are not						
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.												
a Mail solicitations e Solicitation of non-government grants												
b Internet and email solicitations f Solicitation of government grants												
c Phone solicitations g Special fundraising events												
d In-person solicitations												
2 a 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?												
b If "Yes," list the 10 highest paid indiv	viduals or entities (fundraisers) pursua	ant to	agreer	ments under which th	ne fundraiser is to be)						
compensated at least \$5,000 by the	organization.		_									
	Г	1		Ι		Г						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con	ustody	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser	(vi) Amount paid to (or retained by)						
or oranj (tariaralos)		contrib	utions?		listed in col. (i)	organization						
		Yes	No									
Fotal			•									
3 List all states in which the organizatio	n is registered or licensed to solicit c	ontrib	utions	or has been notified	it is exempt from re	gistration						
or licensing.												

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

Schedule G (Form 990 or 990-EZ) 2017

Schedule G (Form 990 or 990-EZ) 2017 NATIONAL AND INTERNATIONAL AFFAIRS 43-604<u>2632 Page 2</u> 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.

		or randraloning or only continuous and grid		,		9
			(a) Event #1 WILD ABOUT	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			HARRY			
			(event type)	(event type)	(total number)	col. (c))
Revenue				•		
svel.	1	Gross receipts	537,659.			537,659.
æ		C. 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 / 255 /	,			,
	2	Less: Contributions	473,909.			473,909.
	_	2000. 0011110410110				
	3	Gross income (line 1 minus line 2)	63,750.			63,750.
			,			, , , , , , , , , , , , , , , , , , , ,
	4	Cash prizes				
	5	Noncash prizes				
S						
SUS	6	Rent/facility costs				
Direct Expenses						
벙	7	Food and beverages	69,093.			69,093.
j.	•		00,000			00,000
	8	Entertainment				
	9	Other direct expenses				48,607.
	10	Direct expense summary. Add lines 4 through	0: 1 (1)		•	117,700.
		Net income summary. Subtract line 10 from li	. ,			-53,950.
Pa	ırt I	II Gaming. Complete if the organization a				
		\$15,000 on Form 990-EZ, line 6a.				
4)			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) birigo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
eve						
ш	1	Gross revenue				
S	2	Cash prizes				
Direct Expenses						
xpe	3	Noncash prizes				
Ä,						
irec	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
	_					
		ter the state(s) in which the organization condu	_			
		he organization licensed to conduct gaming ac	tivities in each of these s	states?		Yes No
b	If "	No," explain:				
		ere any of the organization's gaming licenses re		rminated during the tax y	rear?	Yes No
b	If "	Yes," explain:				

732082 09-13-17

Schedule G (Form 990 or 990-EZ) 2017

THE HARRY S. TRUMAN LIBRARY INSTITUTE

Sch	edule G (Form 990 or 990-EZ) 2017 NATIONAL AND INTERNATIONAL AFFAIRS 43-6	0426	32	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Y	es/	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	Y	es/	No No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	o An outside facility	13b		
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100		
'-	Line the hame and address of the person who prepares the organization's gaming/special events books and records.			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. — Y	es/	☐ No
k	o If "Yes," enter the amount of gaming revenue received by the organization \$\bigs\tau\$ and the amount			
	of gaming revenue retained by the third party > \$			
	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
á	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	Y	es/	No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, line	nes 9, 9l	b, 10k	o, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	•	,	

THE HARRY S. TRUMAN LIBRARY INSTITUTE 43-6042632 Page 4 NATIONAL AND INTERNATIONAL AFFAIRS Schedule G (Form 990 or 990-EZ) Part IV Supplemental Information (continued)

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990.

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

THE HARRY S. TRUMAN LIBRARY INSTITUTE

2017 Open to Public

OMB No. 1545-0047

Inspection
Employer identification number

Schedule I (Form 990) (2017)

NATIONAL	AND INTER	NATIONAL AF	LAIKS				43-0042032			
Part I General Information on Grants	and Assistance									
1 Does the organization maintain record	ls to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the selectio				
criteria used to award the grants or as							X Yes No			
2 Describe in Part IV the organization's										
Part II Grants and Other Assistance	=				anization answered "\	es" on Form 990, Part I	V, line 21, for any			
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.										
Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
2 Enter total number of section 501(c)(33 Enter total number of other organization	-	~	e line 1 table				>			

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

43-6042632

Schedule I (Form 990) (2017)

Part III

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
ESEARCH GRANT	12	13,631.	0.		
DISSERTATION YEAR FELLOWSHIP	3	24,000.	0.		
CHOLAR'S AWARD	1	15,000.	0.		
RUMAN BOOK AWARD	1	2,500.	0.		
JOHN K. HULSTON RESEARCH GRANT	2	5,000.	0.		

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

PART I, LINE 2:

AS PART OF OUR MISSION, TRUMAN LIBRARY INSTITUTE GRANTS & AWARDS ARE GIVEN FOR THE PURPOSE OF SUPPORTING SCHOLARSHIP BASED ON SOME ASPECT OF THE LIFE AND CAREER OF HARRY S. TRUMAN OR OF THE PUBLIC AND FOREIGN POLICY ISSUES WHICH WERE PROMINENT DURING THE TRUMAN ADMINISTRATION. SELECTION IS MADE BY THE INSTITUTE'S COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCATION. FUNDING DECISIONS, VIA AN APPLICATION PROCESS, ARE BASED ON QUALITY, ORIGINALITY, SIGNIFICANCE OF THE PROJECT AND ITS RELATIONSHIP TO THE EXSITING TRUMAN HISTORIOGRAPHY, AND TWO LETTERS OF REFERENCE. RESEARCH

GRANTS, AWARDED BIANNUALLY IN APRIL AND OCTOBER, REQUIRE TRAVEL TO THE

TRUMAN LIBRARY FOR STUDY OF ITS ARCHIVAL COLLECTIONS. ONE-TIME PAYMENTS

ARE DISBURSED DIRECTLY AND PAYABLE TO THE AWARDEE UPON COMPLETION OF THE

RESEARCH TRIP AND DO NOT REQUIRE ANY FURTHER MONITORING.

THE SPRING ROUND OF RESEARCH GRANTS INCLUDES THE AWARD OF ONE ENDOWED JOHN

K. HULSTON SCHOLARSHIP, WHICH PROVIDES \$2,500 TO SUPPORT RESEARCH FOR A

SINGLE PROJECT REQUIRING TRAVEL TO THE TRUMAN LIBRARY AND ADDITIONAL

ARCHIVAL REPOSITORIES. CONVENTIONAL RESEARCH GRANT GUIDELINES AND

EXPECTATIONS APPLY; HOWEVER, APPLICANTS ARE ALSO REQUIRED TO SUBMIT A

DETAILED PROJECT BUDGET OUTLINING THE ADDITIONAL REPOSITORIES TO BE

CONSULTED AND HOW MATERIALS AT THOSE REPOSITORIES FIT INTO THE LARGER

PROJECT.

DECISIONS REGARDING SELECTION OF DISSERTATION YEAR FELLOWSHIP AND SCHOLAR'S

AWARD WINNERS ARE MADE VIA A SIMILAR APPLICATION PROCESS. DISSERTATION

YEAR FELLOWSHIP PAYMENTS ARE DISBURSED DIRECTLY AND PAYABLE TO THE AWARDEE

IN TWO INSTALLMENTS. SCHOLAR'S AWARD PAYMENTS CAN BE DISBURSED DIRECTLY AND

PAYABLE TO THE AWARDEE OR THEIR INSTITUTION AND ARE PAYABLE IN TWO

INSTALLMENTS. AWARDEES ARE REQUIRED TO SUBMIT A PROGRESS REPORT ON THE

WORK DONE NO LATER THAN SIX MONTHS FROM ISSUANCE OF THE SECOND INSTALLMENT.

AWARDEES AGREE TO THE STIPULATION TO PROVIDE THE TRUMAN LIBRARY WITH COPIES

OF ANY PUBLICATION RESULTING FROM RESEARCH SUPPORTED BY ONE OF ITS GRANTS

OR AWARDS.

THE HARRY S. TRUMAN BOOK AWARD IS GIVEN IN RECOGNITION OF THE BEST BOOK

PUBLISHED WITHIN A TWO-YEAR PERIOD THAT DEALS PRIMARILY AND SUBSTANTIALLY

WITH THE LIFE AND CAREER OF HARRY S. TRUMAN OR OF THE PUBLIC AND FOREIGN

POLICY ISSUES WHICH WERE PROMINENT DURING THE TRUMAN ADMINISTRATION.

Schedule I (Form 990)

Part IV Supplemental Information
PUBLISHERS ARE REQUIRED TO SUBMIT FIVE COPIES OF AN APPROPRIATE ENTRY TO
THE COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCATION FOR EVALUATION AND
AWARD SELECTION. AWARDS ARE GIVEN IN EVEN-NUMBERED YEARS. ONE-TIME
PAYMENTS ARE DISPERSED DIRECTLY AND PAYABLE TO THE AWARDEE AND REQUIRE NO
FURTHER MONITORING.

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

ZUIOpen to Public

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Part I Questions Regarding Compensation

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

THE HARRY S. TRUMAN LIBRARY INSTITUTE

NATIONAL AND INTERNATIONAL AFFAIRS

Employer identification number 43-6042632

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
-	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		<u>х</u> х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
•	Regulations section 53 /458-6/c/2	a		

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

Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

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

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

43-6042632

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-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) MORGAN A BURDEN	(i)	189,158.	0.	0.	13,585.	26,102.	228,845.	0.
EXECUTIVE DIRECTOR/EX OFFICIO DIRECT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i) (i)							
	(') (ii)							
· · · · · · · · · · · · · · · · · · ·	(i)							
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'	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii) (i)							
	(') (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							1 1/5 200) 2047

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.

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

Open To Public

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

Inspection

Name of the organization

► Go to www.irs.gov/Form990 for the latest information. THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS

Employer identification number 43-6042632

Par	t I Types of Property				1			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			<u> </u>
1	Art - Works of art			, , ,				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	10	89,345.	FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other \dots							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other (<u> </u>						
29	Number of Forms 8283 received by the organiz							
	for which the organization completed Form 826	83, Part IV, I	Jonee Acknowledg	gement 29			, T	NI -
20-	Duning the constitution and in the			autadia Daut I liana di Hausu		,	/es	No
30a	During the year, did the organization receive by							
	must hold for at least three years from the date			•		200		Х
L	exempt purposes for the entire holding period? If "Yes," describe the arrangement in Part II.	·				30a		
	Does the organization have a gift acceptance p	ooliov that ro	auiros tha raviou	of any nonetandard contribu	tions?	24		Х
31	Does the organization have a grit acceptance p	-	· · ·	•	LIONS?	31	\dashv	
SZa	contributions?		-	· ·		32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is che	cked,			
	describe in Part II.	` ,			<u> </u>			
	Fau Danamurada Dadustian Ast Nation and				0-11-1-8			

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

Schedule M (Form 990) 2017

THE HARRY S. TRUMAN LIBRARY INSTITUTE

Schedule M	(Form 990) 2017	NATIONAL	AND	INTERNATIONAL	」AFFAIRS	43-6042632	Page 2
Part II	Supplemental	Information.	Provide	the information required b	y Part I, lines 30b,	32b, and 33, and whether the organizated, or a combination of both. Also comp	tion
	is reporting in Part	I, column (b), the	number	of contributions, the num	ber of items receive	ed, or a combination of both. Also comp	lete
	this part for any ac	dditional informatio	on.				
·							
-							
-							

Schedule M (Form 990) 2017

732142 09-07-17

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS

Employer identification number 43-6042632

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE HARRY S. TRUMAN LIBRARY INSTITUTE, A NONPROFIT 501(C)(3) ORGANIZATION, IS DEDICATED TO THE PRESERVATION, ADVANCEMENT, AND OUTREACH ACTIVITIES OF THE HARRY S. TRUMAN LIBRARY AND MUSEUM, ONE OF OUR NATION'S 14 PRESIDENTIAL LIBRARIES OVERSEEN BY THE NATIONAL ARCHIVES AND RECORDS ADMINISTRATION. TOGETHER WITH ITS PUBLIC PARTNER THE TRUMAN LIBRARY INSTITUTE PRESERVES THE ENDURING LEGACY OF AMERICA'S 33RD PRESIDENT TO ENRICH THE PUBLIC'S UNDERSTANDING OF HISTORY, THE PUBLIC POLICY, AND CITIZENSHIP. THE INSTITUTE PROVIDES FUNDING AND SUPPORT FOR THE HARRY S. TRUMAN LIBRARY AND MUSEUM'S EXHIBITIONS, EDUCATION PROGRAMS, CONFERENCES, FORUMS AND OTHER PUBLIC OUTREACH PROGRAMS.

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

EDUCATION:

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, 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

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

FOR OUR NATION'S PRESIDENTIAL LIBRARIES.

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

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTIONAL AND INTERNATIONAL AFFAIRS	JTE Employer identification number 43-6042632
TOTAL STUDENT/TEACHER PARTICIPATION DURING THE 20	17-2018 SCHOOL YEAR
WAS 49,212 WITH AN ADDITIONAL 57,528 PARTICIPATIN	G IN ONLINE PROGRAMS.
MORE SPECIFICALLY:	
THE WHITE HOUSE DECISION CENTER - THIS PROGRAM GI	VES STUDENTS AN
EXTENDED, IMMERSIVE, AND INSPIRATIONAL EXPERIENCE	AT ONE OF KANSAS
CITY'S ICONIC CULTURAL INSTITUTIONS WHILE ALSO PR	
UNIQUE EDUCATIONAL PROGRAM THAT STRENGTHENS MANY	
BY PRESIDENT TRUMAN'S LEGACY OF LEADERSHIP AND DE	
RECOGNIZED EDUCATORS, THIS HANDS-ON HISTORY LAB I	
FLAGSHIP EDUCATION PROGRAM AND THE STANDARD-BEARE	
PROGRAMS AT PRESIDENTIAL LIBRARIES NATIONWIDE. TH	E WHITE HOUSE DECISION
CENTER'S SIMULATIONS IMMERSE STUDENTS IN AMERICAN	HISTORY, GOVERNMENT,
THE PRESIDENCY, AND HIGH-STAKES DECISION MAKING I	N A TRULY UNIQUE
SETTING - A RECREATION OF THE TRUMAN-ERA WEST WIN	G OF THE WHITE HOUSE.
TEACHERS HAVE DESCRIBED IT AS ONE OF THE MOST PRO	FOUND EDUCATIONAL
EXPERIENCES IN THEIR STUDENTS' ACADEMIC CAREERS.	6,412 STUDENTS AND
ADULTS PARTICIPATED IN THE WHITE HOUSE DECISION C	ENTER DURING THE FY18
PERIOD (95,000 SINCE 2001).	
COMMUNITY EDUCATION SCHOLARSHIPS - THE TRUMAN LIB	RARY INSTITUTE IS
COMMITTED TO PROVIDING AS MANY STUDENTS AS POSSIB	LE WITH ACCESS TO THE
TRUMAN LIBRARY. OVER THE PAST FOURTEEN YEARS, OUR	SCHOLARSHIP FUND HAS
ALLOWED MORE THAN 55,600 STUDENTS FROM ECONOMICAL	LY CHALLENGED SCHOOL
DISTRICTS TO VISIT AND EXPERIENCE THE TRUMAN LIBR	ARY'S EDUCATIONAL
PROGRAMS AND EXHIBITIONS AT MINIMAL OR NO COST. D	URING THE 2017-2018

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

Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE **Employer identification number** 43-6042632 NATIONAL AND INTERNATIONAL AFFAIRS 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.

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

15TH ANNUAL SUMMER TEACHER CONFERENCE - "THE UNITED STATES AND WORLD

WAR I." FIFTY-FOUR TEACHERS FROM ACROSS THE NATION ATTENDED A WEEK-LONG

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE **Employer identification number** 43-6042632 NATIONAL AND INTERNATIONAL AFFAIRS 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'

PRESIDENT TRUMAN.

CRITICAL THINKING AND INVESTIGATIVE SKILLS AND USES PRIMARY SOURCE

MATERIALS FROM THE TRUMAN LIBRARY TO TEACH THEM ABOUT HISTORY AND

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE **Employer identification number** 43-6042632 NATIONAL AND INTERNATIONAL AFFAIRS 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

124 PHOTOS WERE ACCESSIONED AND SCANNED FROM HARRY TRUMAN'S 1948 NEW Schedule O (Form 990 or 990-EZ) (2017)

AND DESCRIBED.

· ·		INTERNATIONAL AFFAIRS	TE	43-6042632
YORK CAMPAIGN A	AND HIS 1949	INAUGURATION.		
3,535 PHOTOGRA	APH DESCRIPT	ONS WERE VERIFIED IN F	Y18, BRIN	GING THE
TOTAL NUMBER O	F PHOTOS IN T	THE ONLINE DATABASE TO !	53,640.	
TRUMANLIBRARY.	ORG: SUPPORTI	ED WITH INSTITUE FUNDING	G, THIS W	EBSITE
CONTINUES TO BI	E A RICH ONL	INE ARCHIVAL RESOURCE FO	OR RESEAR	CHERS,
HISTORIANS, AU	THORS, STUDEN	NTS, AND EDUCATORS WORLI	DWIDE. DU	RING FY18,
WEBSITE PAGEVII	EWS TOTALED 2	2,400,000.		
TRUMANLIBRARYII	NSTITUTE.ORG:	: STATE-OF-THE-ART AND	VISUALLY	STUNNING, THE
INSTITUTE'S WEI	BSITE WAS DES	SIGNED TO COMPLEMENT TH	E NATIONA	L ARCHIVES
AND RECORDS ADM	MINISTRATION '	'S TRUMANLIBRARY.ORG WEI	BSITE. DU	RING FY18,
WEBSITE PAGEVII	EWS TOTALED 1	104,912.		
FORM 990, PART	III, LINE 4	B, PROGRAM SERVICE ACCO	MPLISHMEN	TS:
PUBLIC OUTREACE	H PROGRAMS OF	N HISTORY, POLITICS, AND	D DEMOCRA	CY:
THE TRUMAN LIB	RARY INSTITUT	TE CONTINUES ITS ONGOING	G MISSION	OF DEEPENING
THE PUBLIC'S U	NDERSTANDING	OF THE U.S. PRESIDENCY	AND GOVE	RNMENT BY
OFFERING ENGAGE	ING, EDUCATIO	ONAL, AND QUALITY PROGRA	AMMING TO	AUDIENCES OF
ALL AGES. COMB	INED PROGRAM	ATTENDANCE FOR FISCAL Y	YEAR 2018	TOTALED
APPROXIMATELY :	12,839 PEOPLE	E (AN INCREASE OF 19.5%). ADDITI	ONALLY, TENS
OF THOUSANDS O	F PEOPLE WERI	E REACHED THROUGH WEBCAS	STS, RADI	O INTERVIEWS
AND TELEVISION	BROADCASTS.	SOCIAL MEDIA INITIATIV	ES INCLUD	E 6,022
FACEBOOK (14%	INCREASE), 1,	,741 TWITTER (27.5% INC	REASE), A	ND 175
INSTAGRAM (NEW) FOLLOWERS. E-NEWS SUBSCRIBERS TOTALED 9,289.				

Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE **Employer identification number** 43-6042632 NATIONAL AND INTERNATIONAL AFFAIRS 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 JON MEACHAM IN CONVERSATION WITH WASHINGTON POST COLUMNIST DAVID VON DREHLE. ATTENDANCE ESTIMATED AT 708. JULY 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 Schedule O (Form 990 or 990-EZ) (2017)

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE **Employer identification number** 43-6042632 NATIONAL AND INTERNATIONAL AFFAIRS 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. 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.

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE **Employer identification number** 43-6042632 NATIONAL AND INTERNATIONAL AFFAIRS 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, PROGRAM SERVICE ACCOMPLISHMENTS: EXHIBITIONS: DURING FISCAL YEAR 2018 PERIOD, THE TRUMAN LIBRARY INSTITUTE PROVIDED FINANCIAL SUPPORT FOR: "SAVING THE WHITE HOUSE: 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 FEATURED THE WORK OF WHITE HOUSE PHOTOGRAPHER

ABBIE ROWE, A NATIONAL PARK SERVICE PHOTOGRAPHER WITH UNPRECEDENTED

Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE

Employer identification number

43-6042632 NATIONAL AND INTERNATIONAL AFFAIRS 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:

Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE **Employer identification number** 43-6042632 NATIONAL AND INTERNATIONAL AFFAIRS "HARRY S. TRUMAN: THE PRESIDENTIAL YEARS" - THE MAJOR ISSUES AND EVENTS OF HARRY TRUMAN'S PRESIDENCY ARE HIGHLIGHTED IN THIS 10,500 SOUARE-FOOT EXHBIITION GALLERY. FEATURING TWO MULTI-MEDIA DECISION THEATERS, ENHANCED AUDIO AND VIDEO PROGRAMS, AND DOZENS OF INTERACTIVE ELEMENTS DESIGNED FOR THE ENTIRE FAMILY, THIS EXHIBITION FORMS THE CENTERPIECE OF THE TRUMAN LIBRARY'S WORLD-ACCLAIMED MUSEUM. "HARRY S. TRUMAN: HIS LIFE AND TIMES" THE LIFE OF HARRY TRUMAN IS EXPLORED IN THIS 4,500 SQUARE-FOOT EXHIBITION GALLERY AND FOLLOWS TRUMAN'S LIFE FROM HIS EARLY YEARS IN SCHOOL TO HIS LATER EXPERIENCES AS AN ENTREPRENEUR, A FARMER, A WORLD WAR I SOLDIER, AND A HABERDASHER. IT ALSO CHRONICLES HIS POLITICAL CAREER AS A COUNTY JUDGE, U.S. SENATOR, VICE PRESIDENT, AND PRESIDENT. TRUMAN'S POST-PRESIDENTIAL YEARS AND HIS CLOSE FAMILY TIES ARE ALSO EXPLORED. THE EXHIBITION FEATURES FOUR DISCOVERY AREAS AND AN INTERACTIVE 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.

Schedule O (Form 990 or 990-EZ) (2017) Page 2 Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE **Employer identification number** 43-6042632 NATIONAL AND INTERNATIONAL AFFAIRS TOTAL VISITATION FOR THE FY18 PERIOD WAS 90,458. FORM 990, PART VI, SECTION B, LINE 11B: AN INDEPENDENT ACCOUNTING FIRM PREPARES AND REVIEWS THE 990. THE 990 IS THEN REVIEWED BY THE ORGANIZATION'S BUDGET, FINANCE, AND INVESTMENT COMMITTEE AND ALSO ALL ACCOUNTING PERSONNEL. ANY QUESTIONS AND CONCERNS THE ORGANIZATION'S BUDGET, FINANCE, AND INVESTMENT COMMITTEE AND ACCOUNTING PERSONNEL HAVE ARE ADDRESSED AND ANY CORRECTIONS OR CLARIFICATIONS THAT NEED TO BE MADE ARE MADE. THE FINAL FORM 990 WITH ALL REQUIRED SCHEDULES IS THEN PROVIDED TO ALL VOTING MEMBERS OF THE BOARD PRIOR TO FILING THE 990. FORM 990, PART VI, SECTION B, LINE 12C: AT THE TIME OF HIRE OR ELECTION (IN THE CASE OF DIRECTORS) AND ANNUALLY HEREAFTER, THE OFFICERS, DIRECTORS, AND KEY EMPLOYEES SHALL PROVIDE THE APPLICABLE CONFLICT OF INTEREST DISCLOSURES 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 REPORT SHALL BE SUBMITTED TO THE BOARD'S

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

THE TRUMAN LIBRARY INSTITUTE UTILIZES THE FOLLOWING:

COLLECTION AND USE OF COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS OR INSTITUTIONS WHICH CAN INCLUDE LOCAL AND REGIONAL NONPROFITS AND MUSEUMS, AS WELL AS

EXECUTIVE COMMITTEE CONCERNING ANY CONFLICT OF INTEREST DISCLOSED FOR

MONITORING.

Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE

NATIONAL AND INTERNATIONAL AFFAIRS

REGIONAL AND NATIONAL PRESIDENTIAL LIBRARY FOUNDATIONS. BASE SALARIES WILL

REGIONAL AND NATIONAL PRESIDENTIAL LIBRARY FOUNDATIONS. BASE SALARIES WILL BE POSITIONED TO QUALIFICATIONS, EXPERIENCE, PERFORMANCE AND TENURE.

- 2. THE BOARD CHAIR WILL APPOINT A COMPENSATION SUBCOMMITTEE OF THE BUDGET,

 FINANCE AND INVESTMENT COMMITTEE. THE SUBCOMMITTEE, WHICH INCLUDES THE

 BOARD CHAIR, WILL DETERMINE THE TOTAL COMPENSATION PACKAGE FOR THE

 EXECUTIVE DIRECTOR. THE EXECUTIVE DIRECTOR SHALL MAKE RECOMMENDATIONS FOR

 THE SALARIES AND INCENTIVE PAYMENTS FOR OTHER EXECUTIVES OR SALARIED

 EMPLOYEES. THESE AMOUNTS WILL BE PROVIDED ANNUALLY TO THE COMPENSATION

 SUBCOMMITTEE FOR REVIEW AND APPROVAL. THE SUBCOMMITTEE WILL REPORT THE

 AGGREGATE INCREASES TO THE BUDGET, FINANCE AND INVESTMENT COMMITTEE, THE

 EXECUTIVE COMMITTEE AND THE BOARD OF DIRECTORS FOR APPROVAL VIA THE ANNUAL

 FISCAL YEAR BUDGET PROCESS OR ANY SUBSEQUENT BUDGET AMMENDMENT REQUESTS

 THAT MAY FOLLOW.
- 3. THE INSTITUTE WILL RETAIN CONCURRENT WRITTEN OR ELECTRONIC

 DOCUMENTATION OF COMPENSATION DECISIONS AS THEY ARE MADE THAT WILL INCLUDE

 THE FOLLOWING INFORMATION: A) THE TERMS OF THE COMPENSATION AND THE DATE

 IT WAS APPROVED; B) THE COMPARABILITY DATA; C) THE COMPENSATION

 SUBCOMMITTEE MEMBERS WHO WERE PRESENT DURING THE DEBATE AND THOSE WHO VOTED

 TO APPROVE A COMPENSATION DECISION; D) ANY ACTIONS TAKEN WITH RESPECT TO

 THE INVOLVEMENT OF A MEMBER WHO MAY HAVE A CONFLICT OF INTEREST.

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

THE INSTITUTE'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSES:

Name of the organization THE HARRY S. TRUMAN LIBRARY INS NATIONAL AND INTERNATIONAL AFFA	
CONTINGENCY/OTHER:	
PROGRAM SERVICE EXPENSES	44,895.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	44,895.
WHITE HOUSE DECISION CENTER:	
PROGRAM SERVICE EXPENSES	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.
FUNDRAISING 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 732212 09-07-17	0 . Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
TOTAL EXPENSES	25,574.
ANNUAL MEMBERSHIP PROGRAMS:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	13,141.
TOTAL EXPENSES	13,141.
VOLUNTEER/INTERN SERVICES:	
PROGRAM SERVICE EXPENSES	2,508.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,508.
PREVENTATIVE MAINTENANCE:	
PROGRAM SERVICE EXPENSES	925.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	925.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL	213,023.
FORM 990, PART IV, LINE 12 & PART XII, LINE 2B & 2C	
THE FINANCIAL STATEMENTS WERE AUDITED, HOWEVER, THE FINA	NCIAL
STATEMENTS WERE PREPARED ON THE MODIFIED CASH BASIS OF A	CCOUNTING,
WHICH IS A COMPREHENSIVE BASIS OF ACCOUNTING OTHER THAN	ACCOUNTING
PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AM	ERICA. THE
ORGANIZATION DOES HAVE A COMMITTEE THAT ASSUMES RESPONSI	BILITY FOR
OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND S 732212 09-07-17 SG	ELECTION OF AN chedule O (Form 990 or 990-EZ) (2017)

2017.05030 THE HARRY S. TRUMAN LIBRA 20149.01