

PUBLIC DISCLOSURE COPY

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



Form **990**
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

Open to Public Inspection

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

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.

A For the **2019** calendar year, or tax year beginning **OCT 1, 2019** and ending **SEP 30, 2020**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS		D Employer identification number 43-6042632
	Doing business as		E Telephone number 816-400-1212
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 40,326,232.
	5151 TROOST AVENUE Room/suite 300		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	City or town, state or province, country, and ZIP or foreign postal code KANSAS CITY, MO 64110		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: CLYDE F WENDEL SAME AS C ABOVE			H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.TRUMANLIBRARYINSTITUTE.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1957
			M State of legal domicile: MO

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PRESERVE AND PROMOTE THE ENDURING LEGACY OF HARRY S. TRUMAN, AMERICA'S 33RD PRESIDENT.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	34
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	33
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	13
	6 Total number of volunteers (estimate if necessary)	6	32
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 39	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 4,166,547.	Current Year 12,435,971.
	9 Program service revenue (Part VIII, line 2g)	73,681.	28,919.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	733,328.	503,105.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-46,057.	-21,515.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,927,499.	12,946,480.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	68,126.
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		919,199.	955,354.
16a Professional fundraising fees (Part IX, column (A), line 11e)		318,905.	84,412.
b Total fundraising expenses (Part IX, column (D), line 25)		684,853.	
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,752,514.	16,066,658.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,058,744.	17,160,308.	
19 Revenue less expenses. Subtract line 18 from line 12	868,755.	-4,213,828.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 14,419,244.	End of Year 13,752,967.
	21 Total liabilities (Part X, line 26)	0.	3,000,000.
	22 Net assets or fund balances. Subtract line 21 from line 20	14,419,244.	10,752,967.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer		Date		
	JOHN A MACDONALD, TREASURER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	KIMBERLY A RYAN				P00829977
	Firm's name	Firm's EIN			
	RUBINBROWN LLP	43-0765316			
	Firm's address	Phone no.			
	1200 MAIN STREET, SUITE 1000 KANSAS CITY, MO 64105	816-472-1122			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: _____) (Expenses \$ 103,511. including grants of \$ 53,884.) (Revenue \$ 28,919.)
SEE SCHEDULE O

4b (Code: _____) (Expenses \$ 141,053. including grants of \$ _____) (Revenue \$ 5,100.)
SEE SCHEDULE O

4c (Code: _____) (Expenses \$ 15,311,362. including grants of \$ _____) (Revenue \$ _____)
SEE SCHEDULE O

4d Other program services (Describe on Schedule O.)
(Expenses \$ 461,574. including grants of \$ _____) (Revenue \$ 12,016.)

4e Total program service expenses **▶ 16,017,500.**

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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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		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? <i>If "Yes," complete Schedule C, Part III</i>		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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		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 foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

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Part IV Checklist of Required Schedules (continued)

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

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 50	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	

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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		13
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
	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?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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 (such as a bank account, securities account, or other financial account)?		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).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	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).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
	10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?		
	Note: See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
	13b		
c	Enter the amount of reserves on hand		
	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X
	If "Yes," see instructions and file Form 4720, Schedule N.		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		X
	If "Yes," complete Form 4720, Schedule O.		

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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 on Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a	34	
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b	33	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
12c			
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **LISA SULLIVAN - 816-400-1212**
5151 TROOST AVENUE, KANSAS CITY, MO 64110

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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. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MERILYN BERENBOM DIRECTOR	1.00	X					0.	0.	0.	
(2) PAUL M BLACK DIRECTOR	1.00	X					0.	0.	0.	
(3) MORGAN A BURDEN EXECUTIVE DIRECTOR/EX OFFICIO DIRECTOR	40.00	X		X			212,429.	0.	51,169.	
(4) MAUREEN MCMEEL CARROLL DIRECTOR	1.00	X					0.	0.	0.	
(5) DAN CRUMB DIRECTOR	1.00	X					0.	0.	0.	
(6) CLIFTON TRUMAN DANIEL HONORARY CHAIR	1.00	X					0.	0.	0.	
(7) ROBERT P DUNN DIRECTOR	1.00	X					0.	0.	0.	
(8) JOSH EARNEST DIRECTOR	1.00	X					0.	0.	0.	
(9) SUSIE S EVANS DIRECTOR	1.00	X					0.	0.	0.	
(10) KARI FREDERICKSON DIRECTOR	1.00	X					0.	0.	0.	
(11) KURT GRAHAM EX OFFICIO DIRECTOR	1.00	X					0.	0.	0.	
(12) GREG GUNDERSON DIRECTOR	1.00	X					0.	0.	0.	
(13) LISA HARDWICK SECRETARY/DIRECTOR	1.00	X		X			0.	0.	0.	
(14) HARVEY L KAPLAN DIRECTOR	1.00	X					0.	0.	0.	
(15) CHARLOTTE KEMPER DIRECTOR	1.00	X					0.	0.	0.	
(16) JOHN A MACDONALD DIRECTOR/TREASURER	1.00	X		X			0.	0.	0.	
(17) KAY MARTIN DIRECTOR	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BRIDGET MCCANDLESS DIRECTOR	1.00	X						0.	0.	0.
(19) LEIGH NOTTBERG DIRECTOR	1.00	X						0.	0.	0.
(20) JAMES B NUTTER JR DIRECTOR	1.00	X						0.	0.	0.
(21) PATRICK OTTENSMEYER DIRECTOR	1.00	X						0.	0.	0.
(22) KAREN D PACK DIRECTOR	1.00	X						0.	0.	0.
(23) JASON C PARKER DIRECTOR	1.00	X						0.	0.	0.
(24) JAMES D RINE DIRECTOR	1.00	X						0.	0.	0.
(25) CHRISTOPHER ROSSON DIRECTOR	1.00	X						0.	0.	0.
(26) ADAM P SACHS VICE CHAIR/DIRECTOR	1.00	X		X				0.	0.	0.
1b Subtotal								212,429.	0.	51,169.
c Total from continuation sheets to Part VII, Section A								100,210.	0.	28,814.
d Total (add lines 1b and 1c)								312,639.	0.	79,983.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **2**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
J.E. DUNN CONSTRUCTION GROUP, INC. 1001 LOCUST ST., KANSAS CITY, MO 64106	CONSTRUCTION	1,479,742.
MONADNOCK MEDIA 59 NORTH STREET, HATFIELD, MA 01038	MUSEUM REDESIGN PLANNING - AUDIO/VIS	1,021,060.
GALLAGHER & ASSOCIATES, 8665 GEORGIA AVENUE, SILVER SPRING, MD 20910	MUSEUM REDESIGN PLANNING	377,584.
1220 EXHIBITS, INC. 3801 VULCAN DR., NASHVILLE, TN 37211	MUSEUM EXHIBIT FABRICATORS	317,164.
STRATEGIC CAPITOL CONSULTING, LLC, 16141 SWINGLEY RIDGE RD., CHESTERFIELD, MO 63017	FUNDRAISING LOBBYIST	282,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **5**

SEE PART VII, SECTION A CONTINUATION SHEETS

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Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	249,705.				
	c Fundraising events	1c	505,863.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	6,988,500.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	4,691,903.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 1,111,684.				
	h Total. Add lines 1a-1f			12,435,971.			
Program Service Revenue	2 a WHITE HOUSE DECISION CENTER REVEN	Business Code	900099	28,919.	28,919.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			28,919.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			287,379.		287,379.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities				
			(ii) Other				
				27,556,847.			
	b Less: cost or other basis and sales expenses	7b	27,341,121.				
	c Gain or (loss)	7c	215,726.				
d Net gain or (loss)			215,726.		215,726.		
8 a Gross income from fundraising events (not including \$ 505,863. of contributions reported on line 1c). See Part IV, line 18	8a			0.			
b Less: direct expenses	8b	38,631.					
c Net income or (loss) from fundraising events			-38,631.		-38,631.		
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a MISCELLANEOUS INCOME	Business Code	900099	17,116.	17,116.		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			17,116.			
12 Total revenue. See instructions			12,946,480.	46,035.	0.	464,474.	

**THE HARRY S. TRUMAN LIBRARY INSTITUTE
NATIONAL AND INTERNATIONAL AFFAIRS**

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	48,069.	48,069.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	5,815.	5,815.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	412,139.	59,400.	214,399.	138,340.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	351,315.	195,826.	1,745.	153,744.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	24,312.	12,930.	126.	11,256.
9 Other employee benefits	122,510.	73,872.	649.	47,989.
10 Payroll taxes	45,078.	16,405.	11,242.	17,431.
11 Fees for services (nonemployees):				
a Management				
b Legal	81,898.		81,898.	
c Accounting	26,850.		26,850.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	84,412.			84,412.
f Investment management fees	42,535.		42,535.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	27,642.		27,642.	
12 Advertising and promotion	52,192.	52,192.		
13 Office expenses	66,456.	5,765.	41,402.	19,289.
14 Information technology	15,277.	15,277.		
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	4,403.		4,403.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	5,064.		5,064.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CAPITAL PROJECTS	15,285,016.	15,285,016.		
b FUNDRAISING OTHER DIREC	201,556.			201,556.
c PUBLIC PROGRAMS	141,053.	141,053.		
d TRU MAGAZINE PUBLICATIO	41,866.	41,866.		
e All other expenses SEE SCH O	74,850.	64,014.		10,836.
25 Total functional expenses. Add lines 1 through 24e	17,160,308.	16,017,500.	457,955.	684,853.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

**THE HARRY S. TRUMAN LIBRARY INSTITUTE
NATIONAL AND INTERNATIONAL AFFAIRS**

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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
Assets	1 Cash - non-interest-bearing	38,846.	1	799,731.
	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 any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments - publicly traded securities	14,380,398.	11	12,953,236.
	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 33)	14,419,244.	16	13,752,967.	
Liabilities	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	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	3,000,000.
	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	3,000,000.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	4,702,651.	27	4,273,694.
	28 Net assets with donor restrictions	9,716,593.	28	6,479,273.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	14,419,244.	32	10,752,967.
	33 Total liabilities and net assets/fund balances	14,419,244.	33	13,752,967.

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,946,480.
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,160,308.
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,213,828.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	14,419,244.
5	Net unrealized gains (losses) on investments	5	547,551.
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 on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	10,752,967.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other MODIFIED CASH If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2019)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047

2019

Open to Public Inspection

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

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 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).**
- 4 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: _____
- 5 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).**
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 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 university: _____
- 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 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.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving 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.**
 - 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.**
 - 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.**
 - d **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.**
 - e 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.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1455801.	2626654.	3589917.	4166547.	12360971.	24199890.
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	1455801.	2626654.	3589917.	4166547.	12360971.	24199890.
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)						4390617.
6 Public support. Subtract line 5 from line 4.						19809273.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	1455801.	2626654.	3589917.	4166547.	12360971.	24199890.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	225,574.	240,733.	281,016.	331,389.	287,379.	1366091.
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.)						
11 Total support. Add lines 7 through 10						25565981.
12 Gross receipts from related activities, etc. (see instructions)					12	459,297.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	77.48 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	61.73 %
16a 33 1/3% support test - 2019. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2018. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2019. 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		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2018. 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		<input type="checkbox"/>
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		<input type="checkbox"/>

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 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

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as 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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls... b A family member... c A 35% controlled entity...

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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... Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated...

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year... Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected... Row 3: By reason of the relationship described in (2), did the organization's supported organizations have a significant voice...

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). a The organization satisfied the Activities Test... b The organization is the parent of each of its supported organizations... c The organization supported a governmental entity... Row 2: Activities Test. Answer (a) and (b) below. a Did substantially all of the organization's activities during the tax year directly further the exempt purposes... b Did the activities described in (a) constitute activities that, but for the organization's involvement... Row 3: Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees... b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations?

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	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	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

THE HARRY S. TRUMAN LIBRARY INSTITUTE

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Part VI

Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

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

2019

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

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

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

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

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

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

Name of organization THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>3,840,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>3,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>791,718.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>339,631.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>300,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 268,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 255,877.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	CD CORPORATION STOCK _____ MASTERCARD INC. STOCK _____ _____	\$ <u>756,718.</u>	<u>11/13/19</u>
8	HOME DEPOT INC STOCK _____ _____ _____	\$ <u>255,877.</u>	<u>10/01/19</u>
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for 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 Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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.**

OMB No. 1545-0047

2019
Open to Public Inspection

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

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2019

THE HARRY S. TRUMAN LIBRARY INSTITUTE
NATIONAL AND INTERNATIONAL AFFAIRS

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	8,091,633.	8,100,333.	8,375,121.	7,744,253.	7,292,433.
b Contributions	25,000.	150,000.	50,000.	2,958.	5,034.
c Net investment earnings, gains, and losses	668,952.	341,786.	538,299.	914,013.	693,404.
d Grants or scholarships					
e Other expenditures for facilities and programs	383,561.	500,486.	863,087.	286,103.	246,618.
f Administrative expenses					
g End of year balance	8,402,024.	8,091,633.	8,100,333.	8,375,121.	7,744,253.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 30.88 %
 - b Permanent endowment 44.37 %
 - c Term endowment 24.75 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | X | |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 0.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	13,494,031.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	547,551.	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	547,551.	
3	Subtract line 2e from line 1		3	12,946,480.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	12,946,480.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements		1	17,160,308.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		0.
3	Subtract line 2e from line 1		3	17,160,308.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	17,160,308.

Part XIII Supplemental Information.

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

PART V, LINE 4:

THE INTENDED PURPOSE OF THE ENDOWMENT IS TO CONTINUE TO PROVIDE CONTINUOUS SUPPORT TO THE INSTITUTE, THE HARRY S. TRUMAN LIBRARY AND MUSEUM, AND TO PROMOTE THE LEGACY OF HARRY S. TRUMAN.

THE INSTITUTE HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PRESERVE AND ENHANCE THE PURCHASING POWER OF THE ENDOWMENT. ENDOWMENT ASSETS INCLUDE THOSE ASSETS OF DONOR-RESTRICTED ENDOWMENT FUNDS THE INSTITUTE MUST HOLD IN PERPETUITY OR FOR DONOR-SPECIFIED PERIODS, AS WELL AS THOSE OF BOARD DESIGNATED ENDOWMENT FUNDS. UNDER THE INSTITUTE'S POLICIES, ENDOWMENT ASSETS ARE INVESTED IN A MANNER THAT IS INTENDED TO PRODUCE A MODERATE RETURN WHILE ASSUMING A

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

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 BASIS. THESE ASSETS MAY BE EARMARKED FOR FUTURE PROGRAMS, PURCHASE OR CONSTRUCTION OF FIXED ASSETS, CONTINGENCIES OR OTHER USES AS DETERMINED BY THE INSTITUTE'S EXECUTIVE COMMITTEE OR BOARD OF DIRECTORS WITH PRIOR RECOMMENDATION FROM THE BUDGET, FINANCE AND INVESTMENT COMMITTEE. SPECIAL EXCEPTIONS TO THIS POLICY TO ALLOW FURTHER REDUCTION OF THE PRINCIPAL WILL BE APPROVED BY A FORMAL VOTE OF THE 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

2019

Open to Public
Inspection

Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on 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? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
3 a Subtotal	0	0			0.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			0.

THE HARRY S. TRUMAN LIBRARY INSTITUTE
 NATIONAL AND INTERNATIONAL AFFAIRS

43-6042632

Part II **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)

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

3 Enter total number of other organizations or entities ▶ _____

THE HARRY S. TRUMAN LIBRARY INSTITUTE
 NATIONAL AND INTERNATIONAL AFFAIRS

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 needed.

(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 (INCLUDING ICELAND & GREENLAND)	2	2,965.	CHECK, WIRE TRANSFER	0.		
RESEARCH GRANTS	EAST ASIA AND THE PACIFIC	1	2,850.	CHECK, WIRE TRANSFER	0.		

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 Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

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

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 G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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.

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

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

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

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 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? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
STRATEGIC FUNDRAISING CONSULTING - 16141 SWINGLEY	FUNDRAISING		X	3,000,000.	48,000.	0.
MCKELLAR GROUP INC - 230 E LOCH LLOYD PKWY, BELTON, MO	FUNDRAISING		X	0.	20,000.	0.
STACY BENSON - 8411 ENSLEY LN, LEAWOOD, KS 66206	FUNDRAISING		X	0.	16,412.	0.
Total				3,000,000.	84,412.	

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.
- AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND
OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV

THE HARRY S. TRUMAN LIBRARY INSTITUTE

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		WILD ABOUT HARRY		NONE		
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	505,863.			505,863.
	2	Less: Contributions	505,863.			505,863.
	3	Gross income (line 1 minus line 2)				
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	38,631.			38,631.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				38,631.
	11	Net income summary. Subtract line 10 from line 3, column (d)				-38,631.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7	Direct expense summary. Add lines 2 through 5 in column (d)			
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)			

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

THE HARRY S. TRUMAN LIBRARY INSTITUTE

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name 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? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b 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 ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: STRATEGIC FUNDRAISING CONSULTING

(I) ADDRESS OF FUNDRAISER:

16141 SWINGLEY RIDGE ROAD, SUITE 110, CHESTERFIELD, MO 63017

(I) NAME OF FUNDRAISER: MCKELLAR GROUP INC

(I) ADDRESS OF FUNDRAISER: 230 E LOCH LLOYD PKWY, BELTON, MO 64102

Part IV Supplemental Information (continued)

PART I, LINE 2B, COLUMN (V):

STRATEGIC CAPITOL CONSULTING WAS HIRED TO RAISE FUNDS FOR THE RENOVATION
OF THE HARRY S. TRUMAN PRESIDENTIAL LIBRARY. AS A RESULT OF THE
FUNDRAISING, THREE MILLION DOLLARS OF GRANTS/APPROPRIATIONS WERE RECIEVED
FROM THE STATE OF MISSOURI DURING FISCAL YEAR ENDED 9-30-20.

SCHEDULE G, PART II

THIS YEAR'S WILD ABOUT HARRY FUNDRAISING EVENT WAS HELD ON-LINE, DUE TO
COVID-19.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**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.**

OMB No. 1545-0047

2019

**Open to Public
Inspection**

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

**Employer identification number
43-6042632**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) 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	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ _____
- 3** Enter total number of other organizations listed in the line 1 table ▶ _____

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

Schedule I (Form 990) (2019)

THE HARRY S. TRUMAN LIBRARY INSTITUTE
NATIONAL AND INTERNATIONAL AFFAIRS

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
RESEARCH GRANT	4	4,069.	0.		
DISSERTATION YEAR FELLOWSHIP	3	24,000.	0.		
SCHOLAR'S AWARD	1	15,000.	0.		
TRUMAN BOOK AWARD	1	2,500.	0.		
JOHN K HULSTON RESEARCH GRANT	1	2,500.	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

Part IV Supplemental Information

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

Part IV Supplemental Information

POLICY ISSUES WHICH WERE PROMINENT DURING THE TRUMAN ADMINISTRATION.
PUBLISHERS ARE REQUIRED TO SUBMIT FIVE COPIES OF AN APPROPRIATE ENTRY TO
THE COMMITTEE ON RESEARCH, SCHOLARSHIP AND EDUCATION FOR EVALUATION AND
AWARD SELECTION. AWARDS ARE GIVEN IN EVEN-NUMBERED YEARS. ONE-TIME
PAYMENTS ARE DISPERSED DIRECTLY AND PAYABLE TO THE AWARDEE AND REQUIRE NO
FURTHER MONITORING.

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

**THE HARRY S. TRUMAN LIBRARY INSTITUTE
NATIONAL AND INTERNATIONAL AFFAIRS**

Employer identification number

43-6042632

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

3 Indicate which, if any, of the following the 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.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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:

- a** The organization?
- b** Any related organization?
- 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:

- a** The organization?
- b** Any related organization?
- 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

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

THE HARRY S. TRUMAN LIBRARY INSTITUTE
 NATIONAL AND INTERNATIONAL AFFAIRS

43-6042632

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MORGAN A BURDEN EXECUTIVE DIRECTOR/EX OFFICIO DIRECT	(i)	212,429.	0.	0.	14,534.	36,635.	263,598.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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)**

Noncash Contributions

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

Part I Types of Property

	(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 determining noncash contribution amounts
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	11	1,111,684.	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				
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 ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

- 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? **X**
- b If "Yes," describe the arrangement in Part II.
- 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**
- b If "Yes," describe in Part II.
- 33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) 2019

Part II

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

Multiple horizontal lines for supplemental information.

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.

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization	THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OUR MISSION IS TO BRING THE LIFE AND LEGACY OF HARRY S. TRUMAN TO BEAR ON CURRENT AND FUTURE GENERATIONS THROUGH UNDERSTANDING OF HISTORY, THE PRESIDENCY, DOMESTIC AND FOREIGN POLICY, AND CITIZENSHIP. OUR VISION IS TO INSPIRE, ENRICH, AND EMPOWER PEOPLE THROUGH THE MANY RESOURCES OF THE HARRY S. TRUMAN PRESIDENTIAL LIBRARY AND MUSEUM. EACH YEAR, MUSEUM VISITORS, PROGRAM PARTICIPANTS, RESEARCHERS, STUDENTS, AND TEACHERS BENEFIT FROM WORLD-CLASS MUSEUM EXHIBITS, NATIONALLY ACCLAIMED EDUCATION PROGAMS, PUBLIC PROGRAMMING, RESEARCH GRANTS, AND MORE.

"MAKE NO LITTLE PLANS. MAKE THE BIGGEST PLAN YOU CAN THINK OF AND SPEND THE REST OF YOUR LIFE CARRYING IT OUT." - HARRY S. TRUMAN

IN RECOGNITION OF THE 75TH ANNIVERSARY OF TRUMAN'S PRESIDENCY, THE TRUMAN LIBRARY AND TRUMAN LIBRARY INSTITUTE DEVELOPED A MOMENTOUS PLAN TO USE TRUMAN'S LIFE AND LEGACY TO INFORM, INSPIRE, EDUCATE, AND ENGAGE A 21ST-CENTURY AUDIENCE AT AN INCREASINGLY CRITICAL TIME IN OUR NATION'S HISTORY.

AT THE HEART OF THE PLAN IS A COMPLETE RENOVATION OF THE TRUMAN MUSEUM, NOW NEARING COMPLETE. A SUCCESSFUL \$33-MILLION CAPITAL CAMPAIGN (INCREASED FROM THE ORIGINAL \$25-MILLION GOAL), WILL MAKE POSSIBLE ALL-NEW EXHIBITS AND VISITOR EXPERIENCES IN MUSEUM, ENHANCED EDUCATION PROGRAMS, EXPANDED PUBLIC PROGRAMS, AND ENDOWMENT SUPPORT.

THE TRUMAN MUSEUM OFFICIALLY CLOSED TO THE PUBLIC ON JULY 23, 2019 FOR

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2019)

Name of the organization	THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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A YEAR-LONG MAJOR RENOVATION. THE OUTBREAK OF THE NOVEL CORONAVIRUS PANDEMIC IN THE SPRING OF 2020 COMPLICATED REOPENING PLANS SLATED FOR THE FALL OF 2020; GOVERNMENTAL ENTITIES AND NON-ESSENTIAL BUSINESSES WERE PROMPTED TO IMPLEMENT PREVENTATIVE AND PROTECTIVE MEASURES FOR THE REMAINDER OF 2020. ALTHOUGH DISRUPTIVE TO SOME PROGRAMMING, THE INSTITUTE AND LIBRARY STAFFS PIVOTED AND ADAPTED TO THE SITUATION DURING THE TRUMAN LIBRARY AND MUSEUM'S CLOSURE, AND WE CONTINUE TO FIND NEW WAYS TO CONNECT WITH OUR PATRONS.

A MESSAGE FROM THE INSTITUTE'S EXECUTIVE DIRECTOR MORGAN A. BURDEN: AS I REFLECT ON THE TRUMAN LIBRARY INSTITUTE'S EFFORTS OVER THE PAST YEAR IN LIGHT OF ALL WE'VE BEEN THROUGH, I AM AMAZED BY THE SIGNIFICANT PROGRESS OUR INCREDIBLE TEAM MADE IN ADVANCING OUR MISSION. WE WERE, OF COURSE, VERY DISAPPOINTED THAT THE PANDEMIC FORCED US TO ALTER OUR PLANS TO COMMEMORATE THE 75TH ANNIVERSARY OF TRUMAN'S PRESIDENCY. DESPITE THIS, I AM PROUD OF THE FACT THAT THE TRUMAN LIBRARY INSTITUTE AND TRUMAN LIBRARY STAFF ROSE TO THE OCCASION AND DID A WONDERFUL JOB SHARING AND CELEBRATING HARRY TRUMAN'S LEGACY VIRTUALLY. THANKS TO THESE EFFORTS - AND THE INCREDIBLE SUPPORT WE RECEIVED FROM DONORS AND FRIENDS - 2020 WAS, IN FACT, A GREAT YEAR FOR TRUMAN.

HERE ARE JUST A FEW HIGHLIGHTS:

THE TRUMAN LIBRARY'S \$26-MILLION RENOVATION IS APPROACHING A SUCCESSFUL CONCLUSION. THE CONSTRUCTION PHASE OF THE PROJECT IS COMPLETE AND THE INSTALLATION OF THE NEW TRUMAN EXHIBITION IS NEARLY FINISHED. PROGRESS CONTINUES ON THE FINAL ELEMENTS OF THE PLAN WITH THE EXPECTED COMPLETION DATE JUST A FEW WEEKS AWAY. WE LOOK FORWARD TO SHARING THE

Name of the organization	THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number	43-6042632
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INCREDIBLE NEW TRUMAN EXHIBITION WITH YOU AS SOON AS CONDITIONS ALLOW THE LIBRARY TO REOPEN. IN THE MEANTIME, WE WILL CONTINUE TO OFFER UPDATES VIA EMAIL, OUR WEBSITE, AND SPECIAL PRESENTATIONS.

IN MARCH 2020, WE QUICKLY TRANSFORMED OUR PROGRAMMING, MARKETING, AND OUTREACH STRATEGIES AND, IN SO DOING, ENGAGED A BROADER, NATIONWIDE AUDIENCE WITH OUR 75TH COMMEMORATIONS. THE RESPONSE TO THIS ENHANCED DIGITAL OUTREACH, WHICH INCLUDED TARGETED SOCIAL MEDIA CAMPAIGNS, EXPANDED MARKETING, AND INFORMATIVE WEBINARS, WAS TREMENDOUS - FAR SURPASSING OUR EXPECTATIONS FOR PARTICIPATION AND ENGAGEMENT.

THE "STAY TRU" CAMPAIGN CONTINUED TO SECURE FUNDING FOR ALL OF OUR STRATEGIC PRIORITIES. TO DATE, MORE THAN 16,000 DONORS FROM ACROSS THE COUNTRY HAVE CONTRIBUTED \$32 MILLION TOWARDS OUR \$33-MILLION CAMPAIGN GOAL. THANKS TO YOUR INCREDIBLE RESPONSE, WE'VE FULLY FUNDED PHASE I OF THE CAPITAL PROJECT, SECURED VITAL SUPPORT FOR OUR PROGRAMMING AND EDUCATIONAL ACTIVITIES, AND STRENGTHENED THE LONG-TERM SUSTAINABILITY OF THE INSTITUTE BY GROWING THE TRUMAN ENDOWMENT. FUNDRAISING WILL CONTINUE AS WE SEEK SUPPORT FOR PHASE II CAPITAL PROJECTS, SIGNIFICANT 75TH ANNIVERSARY COMMEMORATIONS, AND OTHER IMPORTANT PRIORITIES.

(ADDITIONAL INFORMATION ABOUT THE TRUMAN RENOVATION AND STAY TRU CAMPAIGN ARE AVAILABLE VIA THE TRUMANLIBRARYINSTITUTE.ORG WEBSITE.)

2021 WILL BRING THE CULMINATION OF FIVE YEARS OF RESEARCH, PLANNING, COMMUNITY ENGAGEMENT, CONSTRUCTION, COLLABORATION, AND FUNDRAISING. IT IS AN EXCITING AND IMPORTANT TIME FOR THE TRUMAN LIBRARY AND THOSE OF US WHO WORK TO ADVANCE PRESIDENT TRUMAN'S LEGACY. WE HAVE A LOT TO BE PROUD OF AND, BECAUSE OF THIS, WE HAVE MUCH TO LOOK FORWARD TO AND

Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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CELEBRATE IN THE COMING MONTHS, INCLUDING THE INFORMAL REOPENING AND
 FORMAL REDEDICATION OF THE HARRY S. TRUMAN PRESIDENTIAL LIBRARY AND
 MUSEUM; THE INSTALLATION OF THE NEW TRUMAN STATUE IN THE U.S. CAPITOL
 STATUARY HALL IN WASHINGTON DC; AND, 75TH ANNIVERSARY OBSERVANCES OF
 HISTORIC MOMENTS THAT OCCURRED DURING TRUMAN'S SECOND YEAR IN OFFICE.

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

EDUCATION:

THE TRUMAN LIBRARY OFFERS A SUITE OF ENGAGING ON-SITE AND SCHOOL-BASED
 EDUCATIONAL PROGRAMS THAT MEET STATE AND NATIONAL ACADEMIC STANDARDS.
 THESE CRITICALLY ACCLAIMED PROGRAMS ARE DESIGNED TO TEACH PARTICIPANTS
 ABOUT TRUMAN, DEMOCRACY, THE PRESIDENCY, AND THE IMPORTANCE OF CIVIC
 ENGAGEMENT, WHILE STRENGTHENING IMPORTANT LIFE AND LEADERSHIP SKILLS.

EACH YEAR, TENS OF THOUSANDS OF STUDENTS AND TEACHERS GAIN A DEEPER
 UNDERSTANDING OF OUR NATION'S HISTORY, GOVERNMENT, AND DEMOCRATIC
 IDEALS THROUGH THE LIBRARY'S EDUCATIONAL PROGRAMS. USING PRIMARY SOURCE
 DOCUMENTS AND ARTIFACTS, STUDENTS DRAW CONNECTIONS BETWEEN THE PAST,
 PRESENT, AND FUTURE TO BETTER UNDERSTAND, ANTICIPATE, AND RESOLVE
 PROBLEMS. THE WHITE HOUSE DECISION CENTER IS A NATIONALLY RECOGNIZED
 HANDS-ON HISTORY LAB WHERE PARTICIPANTS STEP INTO THE ROLES OF
 PRESIDENT TRUMAN AND HIS ADVISORS AND WORK WITH FORMERLY CLASSIFIED
 PRIMARY SOURCE DOCUMENTS TO TACKLE SOME OF HISTORY'S GREATEST
 CHALLENGES. READING LIKE A HISTORIAN, BASED ON STANFORD HISTORY
 EDUCATION GROUP CURRICULUM, IS A MUSEUM-BASED, TRUMAN-FOCUSED PROGRAM
 THAT ENGAGES STUDENTS AND TEACHERS IN HISTORICAL INQUIRY WHILE

Name of the organization	THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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IMPROVING LITERACY, COMMUNICATING THE ROLES AND DUTIES OF THE GOVERNMENT, AND FOSTERING A LOVE OF HISTORY. THIS YEAR, IN-PERSON PROGRAMS WERE HELD VIRTUALLY.

INSTITUTE FUNDS ALSO SPONSOR THE GREATER KANSAS CITY REGIONAL NATIONAL HISTORY DAY COMPETITION, THE STUDENT INTERNSHIP PROGRAM, THE IN-CLASSROOM TRUMAN FOOTLOCKER PROGRAM, EDUCATOR WORKSHOPS, AND THE ANNUAL SUMMER TEACHER CONFERENCE. ADDITIONAL EDUCATIONAL RESOURCES INCLUDE CURRICULUM GUIDES, A MEDIA LENDING LIBRARY, AND A PRESIDENTIAL TRIVIA CONTEST.

TRUMAN'S RESEARCH GRANTS PROGRAM CONTINUES TO ATTRACT TOP SCHOLARS AND EXPAND OUR UNDERSTANDING OF TRUMAN AND HIS CONSEQUENTIAL PRESIDENCY. SINCE OPENING IN 1959, THE LIBRARY'S RESEARCH ROOM HAS WELCOMED MORE THAN 15,000 HISTORIANS, WRITERS, AND SCHOLARS FROM MORE THAN 40 NATIONS. FROM THE BEGINNING AND TO THE PRESENT, THE INSTITUTE HAS PROVIDED MORE THAN \$3.3 MILLION IN FINANCIAL SUPPORT TO RESEARCHERS. TODAY, RESEARCH GRANTS, AWARDS, AND FELLOWSHIPS PROVIDE CRUCIAL ASSISTANCE TO EMERGING AND ESTABLISHED SCHOLARS WHOSE CONTRIBUTIONS ILLUMINATE THE CRITICAL ISSUES OF TRUMAN'S PRESIDENCY AND LEGACY.

DISSERTATION YEAR FELLOWSHIPS SUBSIDIZE A DOCTORAL STUDENT'S TEACHING OR EMPLOYMENT INCOME TO FACILITATE COMPLETION OF A DISSERTATION THAT INCLUDES HISTORICAL SCHOLARSHIP OF TRUMAN'S CAREER OR TIME PERIOD. THE SCHOLAR'S AWARD SUPPLEMENTS TEACHING OR EMPLOYMENT SALARIES FOR ESTABLISHED SCHOLARS WORKING ON SOME ASPECT OF TRUMAN OR PUBLIC AND FOREIGN POLICY ISSUES PROMINENT DURING HIS TIME. RESEARCH GRANTS, INCLUDING THE JOHN K. HULSTON SCHOLARSHIP, OFFSET THE COST OF

Name of the organization THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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CONDUCTING ONSITE RESEARCH AT THE TRUMAN LIBRARY. THE BIENNIAL HARRY S. TRUMAN BOOK AWARD RECOGNIZES THE BEST BOOK PUBLISHED WITHIN A TWO-YEAR PERIOD DEALING PRIMARILY AND SUBSTANTIALLY WITH TRUMAN OR THE HISTORY OF THE UNITED STATES DURING HIS PRESIDENCY.

THE INSTITUTE AIMS TO FULFILL PRESIDENT TRUMAN'S WISHES FOR HIS LIBRARY BY ENSURING ACCESS TO HIS PAPERS AND THE STUDY OF THE PRESIDENCY. TO ACCOMPLISH HIS WISHES FOR TODAY AND THE FUTURE, THE INSTITUTE SPONSORS COLLECTION PRESERVATION AND CONSERVATION, AND DIGITAL ARCHIVES SUPPORT. DIGITIZATION CONTINUES TO BE A PRIORITY, NOT ONLY FOR THE TRUMAN LIBRARY BUT ALSO THE NATIONAL ARCHIVES. THE IMPORTANCE OF THIS CONTINUED EFFORT HAS ONLY BEEN MAGNIFIED BY THE GLOBAL PANDEMIC THAT KEEPS HISTORIANS, RESEARCHERS AND MUSEUM VISITORS FROM ACCESSING THE TRUMAN LIBRARY'S RESEARCH ROOM AND ARCHIVAL HOLDINGS IN-PERSON.

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

PUBLIC OUTREACH PROGRAMS AND COMMUNITY EVENTS:

WITH THE GOAL OF INFORMING AND ENGAGING LOCAL, REGIONAL AND NATIONAL AUDIENCES, THE TRUMAN LIBRARY AND INSTITUTE PRESENT DISTINGUISHED AUTHORS, HISTORIANS, JOURNALISTS, AND DIGNITARIES IN LECTURES, PANEL DISCUSSIONS, AND SIGNATURE EVENTS. THROUGH THESE ACTIVITIES, THE LIBRARY AND INSTITUTE STRIVE TO INCREASE ATTENDANCE NUMBERS, VISIBILITY, AND ITS NETWORK OF FRIENDS, WHILE ALSO INSPIRING AUDIENCES TO PLAY A ROLE IN SHAPING OUR NATION'S FUTURE. THESE STIMULATING, THOUGHT-PROVOKING PROGRAMS ARE ATTENDED BY OVER 10,000 INDIVIDUALS EACH YEAR AND ENJOYED BY THOUSANDS MORE THROUGH CABLE TELEVISION, RADIO BROADCAST, AND INTERNET STREAMING.

Name of the organization	THE HARRY S. TRUMAN LIBRARY INSTITUTE NATIONAL AND INTERNATIONAL AFFAIRS	Employer identification number 43-6042632
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IN RECENT YEARS, PRESENTERS HAVE INCLUDED FORMER PRESIDENTS,
SECRETARIES OF STATE AND DEFENSE, UNITED NATIONS SECRETARY-GENERALS,
SENATORS, CONGRESSMEN, AND GENERALS.

AS PART OF THE "STAY TRU" CAPITAL CAMPAIGN, THE LIBRARY AND INSTITUTE
HAVE CREATED THE TRUMAN LEGACY SERIES. THIS SERIES BRINGS HIGH-LEVEL,
PRESTIGIOUS SPEAKERS AND PRESENTATIONS TO KANSAS CITY FOR UNIQUE
OPPORTUNITIES, INCLUDING THEATRICAL AND MUSICAL PERFORMANCES, WHICH
WILL INVITE PARTICIPANTS TO VIEW, ANALYZE, AND LEARN ABOUT TRUMAN AND
HIS CONTINUED RELEVANCY IN NEW AND EXCITING WAYS.

CAMPAIGN AND ENDOWED SUPPORT FOR ONGOING PUBLIC PROGRAMS WILL ALLOW THE
LIBRARY AND INSTITUTE TO COMMEMORATE THE 75TH ANNIVERSARIES OF TRUMAN'S
PRESIDENTIAL DECISIONS BEGINNING IN APRIL 2020 AND CONTINUE TO
INTRODUCE NEW AND DIVERSE AUDIENCES TO TRUMAN, HIS LEGACY, AND HIS
PRESIDENTIAL LIBRARY.

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

EXHIBITIONS:

FOR THE LAST TWO DECADES, THE LIBRARY'S PERMANENT MUSEUM EXHIBITS,
HARRY S. TRUMAN: THE PRESIDENTIAL YEARS AND HARRY S. TRUMAN: HIS LIFE
AND TIMES, HAVE INCREASED VISITOR UNDERSTANDING OF THE OFFICE OF THE
PRESIDENT AND TRUMAN'S LIFE AND LEGACY. HOWEVER, PERMANENT EXHIBITS ARE
ONLY INTENDED TO LAST TEN YEARS DUE TO EXTENSIVE WEAR AND TEAR,
IMPROVEMENTS IN TECHNOLOGY, AND THE INCREASING POTENTIAL FOR OUTDATED
CONTENT. ADDITIONALLY, SINCE THEIR INSTALLATION, RESEARCH HAS GREATLY

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INCREASED UNDERSTANDING OF HOW VISITORS LEARN FROM AND INTERACT WITH
MUSEUM EXHIBITIONS.

TO BRING THE MUSEUM INTO THE 21ST CENTURY, THE NEW STATE-OF-THE-ART
MUSEUM PLAN SIGNIFICANTLY IMPROVES AND ENHANCES THE VISITOR EXPERIENCE.
AN EXPANSION TO THE LIBRARY'S EAST SIDE REORIENTS THE MUSEUM ENTRANCE,
PLACING A DRAMATIC EMPHASIS ON THE COURTYARD AND THE TRUMANS'
GRAVESITES. NOW CONCENTRATED ENTIRELY ON ONE FLOOR, THE NEW
12,400-SQUARE-FOOT PERMANENT EXHIBITION WILL FOCUS ON TRUMAN'S LIFE
BEFORE, DURING, AND AFTER HIS PRESIDENCY WITH TECHNOLOGICAL UPGRADES,
HANDS-ON INTERACTIVE ELEMENTS, NEVER-BEFORE-SEEN ARTIFACTS, UPDATED
SCHOLARSHIP, AND A COMPREHENSIVE EDUCATIONAL STRATEGY. THIS
REDISTRIBUTION WILL ALSO DOUBLE THE SQUARE FOOTAGE OF THE LIBRARY'S
LOWER-LEVEL GALLERIES, CREATING AN ADAPTABLE SPACE FOR HIGHER-PROFILE
TEMPORARY EXHIBITS, WHICH WILL INCREASE VISITATION ON AN ONGOING BASIS.

THE RENOVATION PROMISES A LEAP FORWARD IN THE VISITOR EXPERIENCE, ALONG
WITH A FASCINATING LOOK BACK AT TRUMAN'S TIME IN OFFICE. FROM ONE
GALLERY TO THE NEXT, THE EXHIBITION HAS SOMETHING FOR EVERY TYPE OF
MUSEUM VISITOR, FROM BROWSERS WHO ENJOY SKIMMING THE SURFACE TO HISTORY
BUFFS WHO PREFER HIGHLY FOCUSED EXHIBITS THAT TAKE THEM DEEPER INTO THE
HISTORY OF TRUMAN'S LIFE AND LEGACY.

RENOVATION PLANS CALL FOR USING THE LATEST TECHNOLOGY TO ILLUMINATE THE
PAST WHILE ENLIGHTENING VISITORS FROM EVERY GENERATION. THIS TECHNOLOGY
WILL MAKE IT POSSIBLE FOR VISITORS TO SEE AND HEAR FROM THE PRESIDENT
IN NEWLY DIGITIZED AUDIO AND VIDEO THROUGHOUT THE GALLERIES UNLIKE
ANYTHING WE WERE ABLE TO CREATE BEFORE NOW, SIMPLY BECAUSE WE DID NOT

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HAVE THE TECHNOLOGY TO MAKE THEM ACCESSIBLE TO THE PUBLIC.

PRESIDENT TRUMAN OCCUPIED THE OVAL OFFICE IN A TIME THAT CALLED FOR DIFFICULT DECISIONS WITH ENORMOUS GLOBAL CONSEQUENCES. THE NEW PERMANENT TRUMAN EXHIBITION IS MEANT TO SHOW THE SIGNIFICANCE OF HIS CONTRIBUTIONS AND THE CHARACTER OF A MAN WHOSE QUIET LEADERSHIP SHAPED THE POSTWAR LIBERAL DEMOCRATIC ORDER THAT DEFINES TODAY'S WORLD. A MASSIVE FRACTURED GLOBE WILL TELL THE STORY OF THAT CHAOTIC, POST-WWII WORLD. INSIDE THE GLOBE, EDUCATIONAL STATIONS WILL GIVE VISITORS A CLOSER LOOK AT THE INDIVIDUAL IMPACTS OF WAR.

MODERNIZED AS THE EXPERIENCE WILL BE, THE LIBRARY WILL REMAIN AN INVITING ATMOSPHERE FOR LEARNING. TRUMAN HIMSELF ORIGINALLY ENVISIONED HIS PRESIDENTIAL LIBRARY AS "A CLASSROOM FOR DEMOCRACY - A PLACE TO HELP YOUNG PEOPLE, IN PARTICULAR, UNDERSTAND THE SIGNIFICANCE OF THEIR GOVERNMENT."

WHILE THE TRUMAN LIBRARY REMAINS CLOSED, THE TRUMAN LIBRARY INSTITUTE OFFERS TWO TRAVELING EXHIBITIONS AVAILABLE FOR SHOWING:

- HARRY S. TRUMAN AND THE BIRTH OF ISRAEL - ONE OF THE MOST DEFINING MOMENTS OF PRESIDENT TRUMAN'S TENURE WAS HIS EXECUTIVE ACTION TO EXTEND DE FACTO DIPLOMATIC RECOGNITION TO THE STATE OF ISRAEL ON MAY 14, 1948, JUST 11 MINUTES AFTER THAT NATION DECLARED INDEPENDENCE. THIS EXHIBIT EXPLORES THE HISTORICAL, CULTURAL, AND PERSONAL FACTORS THAT WENT INTO THE DECISION, WHICH WAS AN EXTREMELY CONTENTIOUS ISSUE AMONG TRUMAN'S CABINET AND ADVISORS.

- HARRY S. TRUMAN: KANSAS CITY'S COMMANDER IN CHIEF - THIS EXHIBIT

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EXPLORES THE CHALLENGES PRESIDENT TRUMAN FACED, THE DECISIONS HE MADE THAT SHAPED OUR DEMOCRACY, AND THE MILESTONES THAT SEALED HIS PLACE IN HISTORY AS ONE OF OUR NATION'S GREATEST PRESIDENTS. THIS EXHIBITION DEBUTED IN THE BOX GALLERY IN DOWNTOWN KANSAS CITY FROM SEPTEMBER 6 OCTOBER 25, 2019. INAUGURAL ATTENDANCE ESTIMATED AT 1,200.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PUBLIC RELATIONS AND ADVERTISING, DOCUMENTARY ACCESS, VOLUNTEER AND INTERN PROGRAM, MUSEUM ARTIFACT/DOCUMENT ACQUISITION, DIGITIZATION AND PRESERVATION, PREVENTATIVE MAINTENANCE.

EXPENSES \$ 461,574. INCLUDING GRANTS OF \$ 0. REVENUE \$ 12,016.

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

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TRANSACTION. AN APPROPRIATE REPORT SHALL BE SUBMITTED TO THE BOARD'S EXECUTIVE COMMITTEE CONCERNING ANY CONFLICT OF INTEREST DISCLOSED FOR MONITORING.

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

THE TRUMAN LIBRARY INSTITUTE UTILIZES THE FOLLOWING:

1. COLLECTION AND USE OF COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS OR INSTITUTIONS WHICH CAN INCLUDE LOCAL AND REGIONAL NONPROFITS AND MUSEUMS, AS WELL AS REGIONAL AND NATIONAL PRESIDENTIAL LIBRARY FOUNDATIONS. BASE SALARIES WILL BE POSITIONED TO QUALIFICATIONS, EXPERIENCE, PERFORMANCE AND TENURE.

2. THE BOARD CHAIR WILL APPOINT A COMPENSATION SUBCOMMITTEE OF THE BUDGET, FINANCE AND INVESTMENT COMMITTEE. THE SUBCOMMITTEE, WHICH INCLUDES THE BOARD CHAIR, WILL DETERMINE THE TOTAL COMPENSATION PACKAGE FOR THE EXECUTIVE DIRECTOR. THE EXECUTIVE DIRECTOR SHALL MAKE RECOMMENDATIONS FOR THE SALARIES AND INCENTIVE 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

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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:

EXHIBITS:

PROGRAM SERVICE EXPENSES	26,346.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	26,346.

WHITE HOUSE DECISION CENTER:

PROGRAM SERVICE EXPENSES	26,019.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	26,019.

ANNUAL MEMBERSHIP PROGRAMS:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	10,836.
TOTAL EXPENSES	10,836.

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EDUCATION:

PROGRAM SERVICE EXPENSES	7,503.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	7,503.

CONTINGENCY/OTHER:

PROGRAM SERVICE EXPENSES	3,973.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,973.

VOLUNTEER/INTERN SERVICES:

PROGRAM SERVICE EXPENSES	173.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	173.

TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL A 74,850.

FORM 990, PART IV, LINE 12 & PART XII, LINE 2B & 2C

THE FINANCIAL STATEMENTS WERE AUDITED, HOWEVER, THE FINANCIAL STATEMENTS WERE PREPARED ON THE MODIFIED CASH BASIS OF ACCOUNTING, WHICH IS A COMPREHENSIVE BASIS OF ACCOUNTING OTHER THAN ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA. THE ORGANIZATION DOES HAVE A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT.

