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Form 990-PF

EXTENDED TO NOVEMBER 15, 2016
Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.

► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

| For | calendar year 2015 or tax year beginning | | , and ending | | |
|---|---|----------------------------------|---------------------|--|---|
| Nar | me of foundation | | | A Employer identification | number |
| K | ENNETH G. AND DIANA MOON | ADAMS | | | |
| F | OUNDATION | | | 20-2068766 | |
| Nun | mber and street (or P O box number if mail is not delivered to stree | t address) | Room/suite | B Telephone number | |
| | O.O. DRAWER A | | | 918-335-10 | 10 |
| - | y or town, state or province, country, and ZIP or foreign | | | C If exemption application is po | ending, check here |
| | BARTLESVILLE, OK 74005-50 | | | | . 🗀 |
| G (| Check all that apply: Initial return | $\overline{}$ | rmer public charity | D 1. Foreign organizations | , check here |
| | Final return | Amended return | | Foreign organizations me check here and attach co | eting the 85% test, |
| | Address change | Name change | | check here and attach co | mputation |
| n (| Check type of organization: X Section 501(c)(3) e | Other taxable private foundation | tion | E If private foundation state | |
| l Fa | | ting method: X Cash | Accrual | under section 507(b)(1) | • • |
| | 1 | Other (specify) | Accidai | F If the foundation is in a (under section 507(b)(1) | |
| • | \$ 1,163,453. (Part I, cold | umn (d) must be on cash b | pasis.) | under soulidit cor (b)(1) | (b); chock here |
| | art Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books | income | income | for charitable purposes (cash basis only) |
| | 1 Contributions, gifts, grants, etc., received | 72,192. | | N/A | |
| | 2 Check If the foundation is not required to attach Sch. B | | | - | |
| | 3 Interest on savings and temporary cash investments | | | | |
| | 4 Dividends and interest from securities | 24,355. | 24,355. | | STATEMENT 1 |
| | 5a Gross rents | 48. | 48. | <u> </u> | STATEMENT 2 |
| | b Net rental income or (loss) 48. | | | | |
| ē | 62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | | | E | of the latest section |
| Revenue | b assets on line 6a | | | M.E.C | EIVED |
| Æ | 7 Capital gain net income (from Part IV, line 2) | | 0. | io Nov | 1001 |
| | 8 Net short-term capital gain 9 Income modifications | | | S NOV | 2 3 2016 G |
| | Gross sales less returns | | | 100 | O |
| | 10a and allowances b Less Cost of goods sold | | | OGD | |
| | c Gross profit or (loss) | | | | 117, 0! |
| (J) | 11 Other income | -4,595. | -4,595. | | STATEMENT 3 |
| | 12 Total. Add lines 1 through 11 | 92,000. | 19,808. | | |
| CHANEDS | 13 Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| 4 | 14 Other employee salaries and wages | | | | |
| Os | 15 Pension plans, employee benefits | | | | |
| -se | 16a Legal fees | | 2 500 | | |
| AOM Expense | b Accounting fees STMT 4 | 3,700. | 3,700. | | 0. |
| 10 20 30 30 | c Other professional fees | | | | |
| ati 🥯 | 17 Interest 18 Taxes STMT 5 | 540. | 540. | | 0. |
| Stra Istra | 19 Depreciation and depletion | 740. | 340. | | |
| | 20 Occupancy | | | | |
| Adr | 21 Travel, conferences, and meetings | | | * | |
| $9107 \odot \%$ Operating and Administrative | 22 Printing and publications | | | 1 | |
| ig a | 23 Other expenses STMT 6 | 208. | 196, | | 0. |
| atir | 24 Total operating and administrative | | | | |
| per | expenses. Add lines 13 through 23 | 4,448. | 4,436. | | 0. |
| 0 | 25 Contributions, girls, grants paid | 66,750. | | <u> </u> | 66,750. |
| | 26 Total expenses and disbursements. | | | | |
| | Add lines 24 and 25 | 71,198. | 4,436 | | 66,750. |
| | 27 Subtract line 26 from line 12: | 00.000 | | | |
| | 2 Excess of revenue over expenses and disbursements | 20,802. | 15 270 | | |
| | b Net investment income (if negative, enter -0-) | | 15,372 | N/A | |
| | C Adjusted net income (if negative, enter -0-) | | 1 | N/A | · |

Form **990-PF** (2015)

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Form 990-PF (2015)

523511 11-24-15

Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year End of year Part II (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 2 Savings and temporary cash investments 128,689 142,004. 142,004. 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons Other notes and loans receivable Less: allowance for doubtful accounts Inventories for sale or use Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 1,017,625. 1,026,887. b Investments - corporate stock STMT 7 947,376. c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 8 17,418. 4,065. 13 Investments - other 74,073. 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 1,163,732. 1,172,956. instructions. Also, see page 1, item I) 1,163,453. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe Total liabilities (add lines 17 through 22) 0. Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted **▶** 🗓 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 5 27 Capital stock, trust principal, or current funds 0 **Vet Assets** 0. 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 1,163,732. 29 Retained earnings, accumulated income, endowment, or other funds 1,172,956. 30 Total net assets or fund balances 1,163,732. 1,172,956. 1,172,956 1,163,732. 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1,163,732. 2 Enter amount from Part I, line 27a 20,802. 3 Other increases not included in line 2 (itemize) 3 Add lines 1, 2, and 3 1,184,534. Decreases not included in line 2 (itemize) ► UNREALIZED_LOSSES 11,578. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 172,956.

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| Ľ | (a) List and describe th | e kind(s) of property sold (e.g. se; or common stock, 200 shs | ., real estate, | income | (b) | low ac - Purcl - Dona | iase '/ |) Date a | cquired iy, yr) | (d) Date sold (mo., day, yr.) |
|------------|---|--|--|--------------------------------------|--------------|-----------------------------|------------------|----------------------|------------------------------|------------------------------------|
| 1a | | | | | | | | | | |
| _ <u>b</u> | NONE | | | | | | | _ | | |
| <u>C</u> | · | | | | | | | | | |
| _d | | | | | ļ | | | | | |
| <u>e</u> | | | 1 | | <u></u> | | | | | |
| _ | (e) Gross sales price | (f) Depreciation allowed (or allowable) | 1 175 | t or other basis xpense of sale | | | | | in or (loss (f) minus (| |
| _ <u>a</u> | | | | | - $+$ | | | | | |
| _ <u>b</u> | | | | | | | | | | |
| | | | <u> </u> | | | | · | | | |
| <u>d</u> | | · · · · · · · · · · · · · · · · · · · | ļ | | | | | | | |
| _e | Complete only for assets showing gair | up column (h) and owned by | the foundation | 02.10/21/60 | | | | (0. | -1 (1-) | |
| _ | Complete only for assets showing gain | | T | | | | (I) G col. (k | ains (Co A. but n | ol. (h) gain ot less thai | minus n -0-) ar |
| | (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | cess of col. (i) col. (j), if any | | | | | from col. (| |
| _a | | <u>.</u> | <u> </u> | | | | | | · | |
| _ <u>b</u> | | | | | | | | | | |
| | | | - | | | | | | | |
| | | | | | | - | | | | |
| _ <u>e</u> | | | 1 | | | | | | | |
| 2 | Capital gain net income or (net capital le | oss) { If gain, also enter oss), enter -0 | r in Part I, line : - in Part I, line | 7 7 | } | 2 | | | | |
| 3 | Net short-term capital gain or (loss) as | defined in sections 1222(5) ar | nd (6): | | | | | | | |
| | If gain, also enter in Part I, line 8, colum | | , | | } | | | | | |
| _ | If (loss), enter -0- in Part I, line 8 Part V Qualification Unde | r Section 4940(e) for | | | لل | 3 | L <u>.</u> | | | |
| | as the foundation liable for the section 4: Yes," the foundation does not qualify un Enter the appropriate amount in each o | der section 4940(e). Do not co | omplete this pa | rt. | | | | | | Yes X No |
| ÷ | (a) Base period years | (b) | | g, | (c) | | | | | (d) bution ratio |
| | Base periód years Calendar year (or tax year beginning in) | Adjusted qualifying dis | tributions | Net value of ne | | | use assets | ۱ . | Distrit (col. (b) div | bution ratio vided by col. (c)) |
| _ | 2014 | 5 | 4,300. | | 1 | .71 | 5,767. | - | (3010 (37 | .031648 |
| _ | 2013 | | 1,875. | | | | 6,361. | | | .059800 |
| | 2012 | | 2,267. | | <u></u> | | 2,959. | | | .107765 |
| _ | 2011 | | 3,818. | | 1 | | 1,949. | | | .127624 |
| | 2010 | | 5,611. | - | 1 | | 8,886. | | | .061383 |
| | | | | | | | | | | |
| 2 | Total of line 1, column (d) | | | | | | | 2 | | .388220 |
| | Average distribution ratio for the 5-year | base period - divide the total | on line 2 by 5, | or by the numbe | r of ye | ears | | | | · |
| | the foundation has been in existence if | | | | | | | 3 | | .077644 |
| 4 | Enter the net value of noncharitable-use | assets for 2015 from Part X | line 5 | | | - | | 4 | | 1,362,022. |
| 7 | Cittor tilly hot value of hotiofiantable-usi | 2 223010 101 20 10 HOIRT QILA, | | | | | | | | |
| 5 | Multiply line 4 by line 3 | | | | | | | 5 | | 105,753. |
| 6 | Enter 1% of net investment income (19 | 6 of Part I, line 27b) | | | | | | 6 | | 154. |
| 7 | Add lines 5 and 6 | | | | | | | 7 | | 105,907. |
| 8 | Enter qualifying distributions from Part | XII, line 4 | | | | | | 8 | | 66,750. |
| | If line 8 is equal to or greater than line See the Part VI instructions. | 7, check the box in Part VI, line | e 1b, and comp | olete that part usi | ng a 1 | % tax | rate. | | | |

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|----|--|----------------|----------------|------------|-----------------|
| Pa | art W Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or | <u> 1948 -</u> | - see inst | uctio | ons) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | | | |
| ` | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1% | 1 | | : | <u>307.</u> |
| | of Part I, line 27b | | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | | 0. |
| 3 | Add lines 1 and 2 | 3 | | | 307. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | | 307. |
| 6 | Credits/Payments: | | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 2,127 | , | | | |
| | Exempt foreign organizations - tax withheld at source 6b |] | | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6c | 7 | | | |
| | Backup withholding erroneously withheld 6d 6d | 7 | | | |
| | Total credits and payments. Add lines 6a through 6d | 7 7 | | 2. | 127. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | 1. | 820. |
| | Enter the amount of line 10 to be: Credited to 2016 estimated tax | 11 | | | 0. |
| | ert VII-A Statements Regarding Activities | | <u>,ı</u> | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven | e ın | | Yes | s No |
| | any political campaign? | | 1a | | Х |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition | n)? | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish | | | \top | |
| | distributed by the foundation in connection with the activities. | | | | ļ |
| c | Did the foundation file Form 1120-POL for this year? | | 10 | | х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | 10 | + | |
| | (1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ | _ | 1 | | |
| ۵ | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | <u>-</u> | 1 | | |
| ٠ | managers. > \$ 0. | | | | |
| 9 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | x |
| - | If "Yes," attach a detailed description of the activities. | | | + | ^ |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, | or | 1 | | |
| ٠ | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | OI . | 3 | ŀ | x |
| 42 | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | | _ |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | | 46 | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | | x |
| J | If "Yes," attach the statement required by General Instruction T. | | -3 | + | +^ |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | |
| , | By language in the governing instrument, or | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state. | to law | | | |
| | | ic iaw | | v | |
| 7 | remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If #Yee # complete Part II, and (c), and Part Y | 17 | 7 | | |
| ′ | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X | V | -/ | → ^ | |
| ۵۰ | Enter the states to which the foundation reports or with which it is requested (see instructions). | | | | |
| oa | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | |
| L | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | |
| Ü | of each state as required by General Instruction G? If "No," attach explanation | | | , x | 1 |
| ۵ | | londor | 86 | +^ | |
| ð | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call year 2015 or the tayable year beginning in 2015 (see instructions for Part VIV) (3 or 1942(j)(3) or 4942(j)(5) for call year 2015 or the tayable year beginning in 2015 (see instructions for Part VIV) (3 or 1942(j)(3) or 4942(j)(5) for call year 2015 or the tayable year beginning in 2015 (see instructions for Part VIV) (3 or 1942(j)(3) or 4942(j)(4) or 4942(j)(5) for call year 2015 or the tayable year beginning in 2015 (see instructions for Part VIV) (3 or 1942(j)(3) or 4942(j)(4) or 4942(j)(5) for call year 2015 or the tayable year beginning in 2015 (see instructions for Part VIV) (4) (as instructions for Part VIV) | ienuar | _ | | . |
| 10 | year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV | | 9 | | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | <u> 10</u> | | E (2015) |

| • | | |
|--------------------------|-----|-----|
| Fo <u>rm 9</u> 90-PF (20 | 15) |) |
| Part VII-A | S | ita |

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| Pa | irt VII-A Statements Regarding Activities (continued) | | | |
|-----|---|----------------|---------------------------------------|-------------------|
| | | | Yes | No |
| 11' | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| | section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | <u>X</u> |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| | If "Yes," attach statement (see instructions) | 12 | | <u>X</u> |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address N/A The backs are a reserved. N. TEANINE CURNINGHAM Talesbase as N. | C 1 | 010 | |
| 14 | The books are in care of ► <u>JEANINE CUNNINGHAM</u> Located at ► 4100 ADAMS RD, SUITE E 103, BARTLESVILLE, OK ZIP+4 ► 74 | | 010 | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | 000 | | $\overline{\Box}$ |
| 13 | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | ··· | | |
| | foreign country | | | |
| Pa | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | T | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | - | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | . | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period after | | | |
| _ | termination of government service, if terminating within 90 days.) | | | |
| t | olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | l | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | <u>1b</u> | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| C | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | 77 |
| | before the first day of the tax year beginning in 2015? Taxon on follows to distribute income (continue 4043) (does not confu for years the foundation was a private operating foundation. | 10 | | _ X_ |
| Z | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | | |
| • | before 2015? Yes X No | | | |
| | If "Yes," list the years \ | | | |
| ı | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | 1 | |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | - | |
| | statement - see instructions.) N/A | 2b | | |
| (| If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| | > | | | |
| 38 | L Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? | | | |
| t | of "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after | | | |
| | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose | 1 | | |
| | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, | | | |
| | Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A | _3b | <u> </u> | <u> </u> |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | <u> </u> | X |
| t | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | | |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | 0.00 | X (2245) |
| | Fr | rm 99 0 | レーピト | (2015) |

KENNETH G. AND DIANA MOON ADAMS Form 990-PF (2015) FOUNDATION 20-2068766 Page 6 Rart VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/AIf "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? X 6b b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances KENNETH G. ADAMS TRUSTEE P.O. DRAWER A 0. 0.50 0 0. BARTLESVILLE, OK TRUSTEE DIANA MOON ADAMS P.O. DRAWER A 0. BARTLESVILLE, OK 74005 0.50 0 0. CHRISTINA L. ADAMS TRUSTEE P.O. DRAWER A 0.50 0. 0 0. BARTLESVILLE, OK 74005 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation NONE

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Total number of other employees paid over \$50,000

| FOUNDATION FOUNDATION | | 2068766 Page 7 |
|---|-----------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued) | ion Managers, Highly | |
| 3 Five highest-paid independent contractors for professional services. If none, enter ' | 'NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | 1 | |
| | | |
| | 4 | |
| | | |
| | 1 | |
| | | |
| | 1 | |
| | | |
| | 1 | |
| Total number of others receiving over \$50,000 for professional services | | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic | cal information such as the | |
| number of organizations and other beneficiaries served, conferences convened, research papers produ | ced, etc. | Expenses |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year on li | nes 1 and 2. | Amount |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | | . ! |
| 3 | | |
| | | |
| | | |
| Total, Add lines 1 through 3 | <u> </u> | 0. |

Page 8

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations | , see instructions.) |
|----|---|-------------|----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 1,252,566. |
| b | Average of monthly cash balances | 1b | 130,197. |
| C | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 1,382,763. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 • | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 1,382,763. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 20,741. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 1,362,022. |
| 6_ | Minimum investment return. Enter 5% of line 5 | 6 | 68,101. |
| Р | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.) | d certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 68,101. |
| 2a | Tax on investment income for 2015 from Part VI, line 5 | | |
| b | Income tax for 2015. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 307. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 67,794. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 67,794. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 67,794. |
| P | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 66,750. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 66,750. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 66,750. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | qualifies f | or the section |
| | 4940(e) reduction of tax in those years. | | |

Form **990-PF** (2015)

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Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2014 2014 2015 Distributable amount for 2015 from Part XI, line 7 67,794. 2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only 0 **b** Total for prior years: 0 3 Excess distributions carryover, if any, to 2015: a From 2010 104,389. **b** From 2011 88,495. c From 2012 15,450. d From 2013 e From 2014 f Total of lines 3a through e 208,334. 4 Qualifying distributions for 2015 from 66,750. Part XII, line 4: ► \$_ 0 a Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) 0 c Treated as distributions out of corpus (Election required - see instructions) 0. d Applied to 2015 distributable amount 66,750. e Remaining amount distributed out of corpus 0. 1,044. 1,044. Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) Enter the net total of each column as indicated below: 207,290. & Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b 0. c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0. assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2014. Subtract line 4a from line 2a. Taxable amount - see instr. 0 f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016 0. 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 0. 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 0. 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a 207,290. 10 Analysis of line 9: 103,345. a Excess from 2011 88,495. b Excess from 2012 15,450. c Excess from 2013 d Excess from 2014 e Excess from 2015

| orm 990-PF (2015) FOUNDATI | | | | | <u>068766 Pag</u> |
|---|-------------------------|------------------------------|---------------------------|--|----------------------|
| Part XIV Private Operating For | | _ | II-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling or d | etermination letter tha | it it is a private operating | | | |
| foundation, and the ruling is effective for 2 | 015, enter the date of | the ruling | ▶ | | - |
| b Check box to indicate whether the foundati | on is a private operat | ing foundation described | | 4942(j)(3) or | 4942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | 1 | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | - | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | | | | | |
| Complete 3a, b, or c for the | | | | | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on | | | | | |
| securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from | · | | | | |
| ''' | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income Part XV Supplementary Inform | nation (Comple | oto this part only | if the foundation | n had \$5 000 or r | nore in assets |
| at any time during the | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | nore in assets |
| Information Regarding Foundation | • | | | | |
| a List any managers of the foundation who h year (but only if they have contributed more | | | itributions received by t | he foundation before the o | lose of any tax |
| EE STATEMENT 9 | | | | | |
| b List any managers of the foundation who of other entity) of which the foundation has a | | | ı (or an equally large po | rtion of the ownership of a | partnership or |
| ONE | <u></u> | | | | |
| Information Regarding Contribution Check here X if the foundation only | | | | s not accept unsolicited re | quests for funds. If |
| the foundation makes gifts, grants, etc. (se | e instructions) to ind | ividuals or organizations | under other conditions. | complete items 2a, b, c, a | and d. |
| a The name, address, and telephone number | r or e-mail address of | the person to whom ap | olications should be add | ressed: | |
| b The form in which applications should be | submitted and inform | ation and materials they | should include. | | |
| | | | | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on awards, s | such as by geography | nal areas, charitable field | s kinds of institutions | or other factors | |
| J | , googiapin | ,, 1010 | -, or moditudorio, i | | |

Form 990-PF (2015) FOUNDATION

Part XV Supplementary Information (continued)

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| 3 Grants and Contributions Paid During the Ye | | Payment | | |
|---|--|--------------------------------------|--|--------|
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| BARTLESVILLE SYMPHONY ORCHESTRA | NONE | PUBLIC CHARITY | SUPPORT | |
| FOUNDATION | | | | |
| P.O. BOX 263 | | | | |
| BARTLESVILLE, OK 74005 | · · · · · - · · · · · · · · · · · | | | 1,000 |
| | | | | |
| BLUESTEM MEDICAL | NONE | PUBLIC CHARITY | SUPPORT | |
| 3500 E. FRANK PHILLIPS BLVD | | | | |
| BARTLESVILLE, OK 74006 | | | | 1,000 |
| | | | | , |
| CHEROKEE AREA COUNCIL BOY SCOUTS 469 | NONE | PUBLIC CHARITY | CURRORE | |
| 520 S. QUAPAW | NONE | PUBLIC CHARITY | SUPPORT | |
| BARTLESVILLE, OK 74003 | | | | 2,000 |
| | | | | • |
| FRIENDS OF BARTLESVILLE AREA HISTORY | NONE | PUBLIC CHARITY | SUPPORT | |
| MUSEUM | | | : | |
| 401 s JOHNSTONE 5TH FLR | | | | |
| BARTLESVILLE, OK 74003 | | | | 500 |
| | | | | |
| FRIENDS OF FRANK PHILLIPS HOME | NONE | PUBLIC CHARITY | SUPPORT | |
| 1107 CHEROKEE AVE | | | | |
| BARTLESVILLE OK 74003 | | <u> </u> | | 2,500 |
| | NTINUATION SHE | ET(S) | ▶ 3a | 66,750 |
| b Approved for future payment | | | | |
| MONTE | | | | |
| NONE | | | | |
| | | | | |
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Part XVI-A **Analysis of Income-Producing Activities**

| Enter gross amounts unless otherwise indicated. | Unrelate | d business income | | by section 512, 513, or 514 | (e) |
|---|-------------------------|---|--|-----------------------------|--|
| 1 Program service revenue; | (a) Business code | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| a | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | <u> </u> | | |
| | l i | | | | |
| e | _ | | | | · |
| g Fees and contracts from government agencies | | | | | |
| Membership dues and assessments | | · - · · · · · · · · · · · · · · · · · · | | | |
| · | | | - | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| | | | 14 | 24,355. | |
| 4 Dividends and interest from securities | | | 14 | 24,333. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | <u> </u> | | | 4.0 | |
| b Not debt-financed property | | | 16 | 48. | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | 523000 | -6,354. | 14 | 1,759. | · |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | ļļ | | |
| 9 Net income or (loss) from special events | | | 1 | | |
| O Gross profit or (loss) from sales of inventory | | · | | | |
| 1 Other revenue: | | | | Ì | |
| a | [| | | | |
| b | | | | | |
| C | 1 1 | | | | |
| d | l l | | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | -6,354. | | 26,162. | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 19,808. |
| See worksheet in line 13 instructions to verify calculation | ns.) | | | | |
| Part XVI-B Relationship of Activitie | es to the Acco | omnlishment of F | vemnt l | Purnoses | |
| Talt XVI-B Helationship of Activiti | es to the Acct | omprishment of E | vembr i | - urposes | |
| Line No. Explain below how each activity for which | income is reported | n column (e) of Part XVI-A | A contribut | ed importantly to the accom | plishment of |
| the foundation's exempt purposes (other | than by providing fu | nds for such purposes). | | | |
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| Form 990-PF (20 | | ATION | DIMM | MOON ADA | птэ | | 20-2 | 068766 | Pa | ge 13 |
|-----------------|---|--------------------------|------------------|-------------------------|-------------|------------------------|---------------------------|---|-----------------------------|--------------|
| Part XVII | Information Re | | sfers To a | nd Transacti | ons an | d Relationsh | | | | <u>ye 13</u> |
| | Exempt Organ | | | | | | | | | |
| | panization directly or indi- other than section 501(c | rectly engage in any | | | | | on 501(c) of | | Yes | No |
| | from the reporting found | | | | | | | | | |
| (1) Cash | | | | | | | | 1a(1) | | <u>X</u> |
| (2) Other | assets | | | | | | | 1a(2) | | X |
| b Other trans | sactions: | | | | | | | | ļ | |
| • • | of assets to a noncharita | | | | | | | 1b(1) | | <u>X</u> |
| | ases of assets from a no | • | rganization | | | | | 1b(2) | | X |
| • • | of facilities, equipment, | | | | | | | 1b(3) | | <u>X</u> |
| • • | oursement arrangements | | | | | | | 1b(4) | | X |
| • • | or loan guarantees | mbarahia ar fundrai | nuna aaluustatsa | | | | | 1b(5) | | X |
| • • | mance of services or me facilities, equipment, ma | · · | - | | | | | 1b(6) | | X |
| | er to any of the above is | | | | nould alwa | we show the fair m | arket value of the or | | ete | |
| | given by the reporting f | | | | | | | | , o to, | |
| |) the value of the goods, | | | o roos man ian ina | mor raido | many authoronom | or onanny arrangen | | | |
| | (b) Amount involved | | | exempt organization | วก | (d) Description | of transfers, transaction | ns, and sharing ar | rangeme | nts |
| | | | N/A | | | | | | | |
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| ın section | idation directly or indirection 501(c) of the Code (other | er than section 501(c) | | | t organiza | ations described | | Yes | X |] No |
| b It "Yes," co | mplete the following sch (a) Name of org | | | (b) Type of organ | uzation T | | (c) Description of re | lationship | | |
| | N/A | yanızatıon | | (b) Type of organ | iization | | (c) Description of re | lationstrip | | |
| | 11/A | | | | | | | | | |
| | | | | | | | | | | |
| - | | ·-· | | | + | | | <u>*</u> | | |
| | | | | | | | · · · · · · | | | |
| Sign Here | penalties of perjury, I declare ilief, it is true, correct, and co | mplete Declaration of pr | | n taxpayer) is based or | all informa | tion of which preparer | | May the IRS return with the shown below | e prepa (se <u>e ins</u> | rer |
| Sign | ature of officer or trustee | | Drong-c-ls - | Date | r | Title | Chook [] .f | DTIM | | |
| | Print/Type preparer's n | ame | Preparer's s | ignature | | Date | Check if self- employed | PTIN | | |
| Paid | TON A OFF | 70 | TONT A | | 14 | 11/02/16 | sen- employed | D00421 | 405 | ! |
| Preparer | JON A. OTT Firm's name ► HOG | | JON A. | OTTO MA FIL | <i>[[]</i> | L1/03/16 | Firm's EIN ► 7 | P00431 | | - |
| Use Only | rinii s naine P nOG | SUNTRI TOR | TITE | | • | | FIIII SEIN - / | 7-T#T); | , , , | |
| | Firm's address ▶ 22 | 222 S. IITT | CA PT. | SIITTE | 200 | | | | | |
| | | JLSA, OK 7 | | | | | Phone no. (9 | 18) 745 | -23 | 33 |

| Part XV Supplementary Informat | | | | |
|---|--|----------------------|----------------------------------|---------|
| 3 Grants and Contributions Paid During to | | | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | 001111041011 | · |
| | | | | |
| MARY MARTHA OUTREACH | NONE | PUBLIC CHARITY | SUPPORT | |
| 1845 SW 4TH | | | | |
| BARTLESVILLE, OK 74003 | | | | 1,000. |
| | | | | |
| MUTUAL GIRLS CLUB | NONE | PUBLIC CHARITY | SUPPORT | |
| 321 SW PENN | | - | | |
| BARTLESVILLE, OK 74003 | | | | 1,000. |
| | | | | |
| NATIONAL MUSEUM OF EDUCATION | NONE | PUBLIC CHARITY | SUPPORT | |
| 1145 HIGHBROOK ST, STE 308 | | | | |
| AKRON, OH 44301 | | | | 500. |
| | | | | |
| OK MOZART | NONE | PUBLIC CHARITY | SUPPORT | |
| 500-A SE DEWEY | | | | |
| BARTLESVILLE, OK 74003 | | | | 1,000. |
| , | | | | |
| OKLAHOMA INDIAN SUMMER | NONE | PUBLIC CHARITY | SUPPORT | |
| 1412 SE HAMPDEN RD | | | | |
| BARTLESVILLE OK 74006 | | | | 1,000. |
| | | | | |
| SAMARITAN COUNSELING & GROWTH | NONE | PUBLIC CHARITY | SUPPORT | |
| 245 SE MADISON BLVD | | | | |
| BARTLESVILLE, OK 74006 | | | | 3,500, |
| | | | | |
| THE SALVATION ARMY | NONE | PUBLIC CHARITY | SUPPORT | |
| 101 NORTH BUCY | | | | |
| BARTLESVILLE, OK 74003 | | | | 2,000. |
| | | | | |
| WAKE FOREST UNIVERSITY | NONE | PUBLIC CHARITY | SUPPORT | |
| P.O. BOX 7227 REYNOLDA STATION | | | | |
| WINSTON-SALEM, NC 27109 | | | | 10,000, |
| | | į | | |
| WESTSIDE COMMUNITY CENTER | NONE | PUBLIC CHARITY | SUPPORT | |
| P.O. BOX 1082 BARTLESVILLE OK 74005 | | | | 1 000 |
| | | - | | 1,000. |
| | | | | |
| WILLIAMS EDUCATIONAL FUND | NONE | PUBLIC CHARITY | SUPPORT | |
| 1651 NIASMITH DRIVE LAWRENCE, KS 66045 | | | | 100. |
| Total from continuation sheets | | | <u></u> | 59,750. |

FOUNDATION

Part XV Supplementary Information Grahts and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient BARTLESVILLE KLIFE NONE PUBLIC CHARITY SUPPORT P.O. BOX 3994 500. BARTLESVILLE, OK 74005 CENTRAL MIDDLE SCHOOL NONE PUBLIC CHARITY SUPPORT 408 E 9TH 250. BARTLESVILLE OK 74003 NONE PUBLIC CHARITY SUPPORT FREE ENTERPRISE INSTITUTE 300 SOUTH 5TH STREET 100. WACO TX 76701 SUN FOUNDATION NONE PUBLIC CHARITY SUPPORT 325 INVERNESS DRIVE SOUTH 1,500. ENGLEWOOD CO 80112 PUBLIC CHARITY SUPPORT PRESIDENT & FELLOWS HARVARD NONE UNIVERSITY MASSACHUSETTS HALL CAMBRIDGE, MA 02138 10,000, DISTINGUISHED YOUNG WOMEN OF OKLAHOMA NONE PUBLIC CHARITY SUPPORT P.O. BOX 1106 BARTLESVILLE, OK 74005 300. VALUES THROUGH HISTORY NONE PUBLIC CHARITY SUPPORT 1419 SUGAR CREEK BLVD 250. SUGARLAND, TX 77478 PUBLIC CHARITY SUPPORT DEWEY WESTERN HERITAGE NONE 201 SW KEELER AVE. 500. BARTLESVILLE, OK 74003 UNITED WAY NONE PUBLIC CHARITY SUPPORT 415 E SILAS STREET 10,000. BARTLESVILLE OK 74003 PUBLIC CHARITY SUPPORT CHILDREN'S MUSICAL THEATER NONE 600 S.E. DELAWARE AVE. 1,500. BARTLESVILLE, OK 74003 Total from continuation sheets

| Part XV Supplementary Information | | | | |
|--|--|----------------------|----------------------------------|--------|
| 3 Grants and Contributions Paid During the | | | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| | | | | |
| BOYS & GIRLS CLUB | NONE | PUBLIC CHARITY | SUPPORT | |
| 401 S SEMINOLE AVE. | | | | 1,000. |
| BARTLESVILLE, OK 74003 | | | | 1,000. |
| NATIONAL CAPITAL AREA COUNCIL, BSA | NONE | PUBLIC CHARITY | SUPPORT | |
| 9190 ROCKVILLE PIKE | | | | |
| BETHESDA, MD 20814 | | <u> </u> | | 250. |
| | | | | |
| BARTLESVILLE SYMPHONY ORCHESTRA | NONE | PUBLIC CHARITY | SUPPORT | |
| P.O. BOX 263 BARTLESVILLE OK 74005 | | | | 1,000. |
| | | | | |
| CENTER FOR EXCELLENCE IN EDUCATION | NONE | PUBLIC CHARITY | SUPPORT | |
| 8201 GREENSBORO DRIVE, SUITE 215 | | | | |
| MCLEAN, VA 22102 | | | | 500. |
| | | | | |
| FIRST PRESBYTERIAN CHURCH, TULSA | NONE | PUBLIC CHARITY | SUPPORT | 1 |
| 709 S. BOSTON TULSA OK 74119 | | | | 5,000. |
| | | | | |
| HARVARD BUSINESS SCHOOL | NONE | PUBLIC CHARITY | SUPPORT | |
| SOLDIERS FIELD | | | | |
| BOSTON, MA 02163 | | | | 1,000. |
| FIRST PRESBYTERIAN CHURCH, | NONE | PUBLIC CHARITY | SUPPORT | |
| BARTLESVILLE | | | | |
| 505 SOUTH DEWEY BARTLESVILLE OK 74003 | | | | 5,000 |
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| Total from continuation sheets | | | | 1 |

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

Employer identification number

2015

KENNETH G. AND DIANA MOON ADAMS FOUNDATION 20-2068766 Organization type (check one): Filers of: Section: ___ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 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, chantable, 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 Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

KENNETH G. AND DIANA MOON ADAMS

Employer identification number

FOUNDATION

20-2068766

| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | nal space is needed. | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | ADAMS INVESTMENT CO-KENNETH G. ADAMS P.O. DRAWER A BARTLESVILLE, OK 74005 | \$ 50,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | CHRISTINA L. ADAMS P.O. DRAWER A BARTLESVILLE, OK 74005 | \$\$\$ | Person Payroll Noncash X (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - - - - | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | - \$ | Person Payroll Noncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization

KENNETH G. AND DIANA MOON ADAMS

FOUNDATION

Employer identification number

20-2068766

| Part II | Noncash Property (see instructions). Use duplicate copies of Part I | I if additional space is needed. | additional space is needed. | | | |
|------------------------------|---|--|-----------------------------|--|--|--|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | | | |
| | 400 SHS MICROSOFT STOCK | _ | | | | |
| 2 | | \$\$ | 12/31/15 | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | | | |
| | | | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | | | |
| | | _ | | | | |
| | | \$ | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | | | |
| | | | , | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | | | |
| | | | | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received | | | |
| | | | | | | |
| | <u> </u> | | | | | |

Name of organization

| mplove | ider | ıtific | ation | nun | nber |
|--------|------|--------|-------|-----|------|

| | H G. AND DIANA MOON AI | DAMS | | 20 2060766 | |
|----------------------------|---|---------------------------------------|--|-------------------------------|--|
| <u>'OUNDA'</u> Part III | Exclusively religious, charitable, etc., con the year from any one contributor. Complete completing Part III, enter the total of exclusively religion | columns (a) through (e) and the follo | wing line entry, For organization | ons | |
| | Use duplicate copies of Part III if addition | nal space is needed | Todd for the your tentor that the on | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held | |
| | | | | | |
| - | | (e) Transfer of gif | t | | |
| - | Transferee's name, address, a | and ZIP + 4 | Relationship of tr | ansferor to transferee | |
| (a) No. | | | | | |
| Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held | |
| - | | (e) Transfer of gif | | | |
| | Transferee's name, address, a | and ZIP + 4 | Relationship of transferor to transferee | | |
| (a) No. | | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | scription of how gift is held | |
| - | | (e) Transfer of gif | Tt . | | |
| | Transferee's name, address, a | | | ansferor to transferee | |
| - | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | · (d) Des | scription of how gift is held | |
| | | | | | |
| | | (e) Transfer of gi | <u> </u> | | |
| | Transferee's name, address, a | Relationship of tr | ansferor to transferee | | |
| - | | | | | |

| FORM 990-PF | DIVIDENDS | AND IN | TEREST | FROM SEC | UR | ITIES | ST | ATEMENT | 1 |
|---|-------------------------|----------------------|--------|----------------------------|---------------|---------------------------------|--------------|------------------------------|------------|
| SOURCE | GROSS AMOUNT | CAPI GAI DIVID | | (A) REVENUE PER BOOK | C | (B) NET INVEST MENT INCOM | | | |
| ARVEST ASSET MANAGEMENT CHENIERE ENERGY | 23,685. | | 0. | 23,68 | 35. | 23,685 | 5. | | |
| PARTNERS, LP FIDELITY | 5. | | 0. | | 5. | 5 | 5. | | |
| INVESTMENTS MARTIN MIDSTREAM | 647. | | 0. | 64 | 17. | 647 | 7. | | |
| PARTNERS, LP | 18. | | 0. | 1 | .8 | 18 | 3. | | |
| TO PART I, LINE 4 | 24,355. | | 0. | 24,35 | 55. | 24,355 | 5 · — | | |
| FORM 990-PF | | RENTAL | INCOM | E | _ | | SI | 'ATEMENT | |
| KIND AND LOCATION OF MARTIN MIDSTREAM PARTN DCP MIDSTREAM PARTN TOTAL TO FORM 990-P | ARTNERS, LP IERS, LP | LINE 5A | | | | ACTIVITY NUMBER 1 2 | | 1 | 29. 19. |
| FORM 990-PF | | OTHE | R INCO | ME | | | SI | CATEMENT | 3 |
| DESCRIPTION | | - | | (A) VENUE BOOKS | | (B) ET INVEST- ENT INCOME | | (C) ADJUSTEI NET INCOM | |
| ROYALTY INCOME SECTION 1231 LOSS F INCOME FROM PUBLICE | | SHIPS | | 544. -45. | | 544. -45. | | | |
| PARTNERSHIPS INCOME FROM SILVERO SETTLEMENT | | | | -6,354 1,260 | | -6,354 1,260 | | | |
| TOTAL TO FORM 990-F | PF, PART I, | LINE 11 | | -4,595 | · = = | -4,595 | • = = | | |
| | | | | | | | | | |

| FORM 990-PF | ACCOUNTI | NG FEES | | STATEMENT 4 | | |
|---|------------------------------|-----------------------------------|---|--|--|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOM | | | |
| ACCOUNTING FEES | 3,700. | 3,700. | • | 0. | | |
| TO FORM 990-PF, PG 1, LN 16B | 3,700. | 3,700 | | 0. | | |
| FORM 990-PF | TAX | ES | | STATEMENT 5 | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOM | | | |
| FOREIGN TAXES | 540. | 540 | • | 0. | | |
| TO FORM 990-PF, PG 1, LN 18 | 540. | 540 | • | 0. | | |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT 6 | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOM | | | |
| INVESTMENT FEES NONDEDUCTIBLE | 107. | 107 | • | 0. | | |
| EXPENSES-PARTNERSHIPS INVESTMENT INTEREST EXPENSE | 12. 89. | 0 89 | | 0. | | |
| TO FORM 990-PF, PG 1, LN 23 | 208. | 196 | | 0. | | |
| FORM 990-PF | CORPORAT | E STOCK | | STATEMENT 7 | | |
| DESCRIPTION | | | OOK VALUE | FAIR MARKET VALUE | | |
| 17,707 SH. HELIX ENERGY 790 SH. SPDR GOLD TRUST 1,500 SH. GOLD FIELDS LTD 800 SH. MARKET VECTORS AGRIBU 252.132 SH. PETROCHINA CO LTI | | | 99,003. 41,006. 30,945. 40,214. 12,619. | 93,139. 80,153. 4,155. 37,192. 16,537. | | |

| KENNETH G. AND DIANA MOON ADAMS FOUNDATI | | | 20-20687 | 766 |
|---|------------------------------|--|---|--|
| 2,200 SH. PETROLEO BRASILEIRO 150 SH. SEIMENS 261,500 SH. FAR EAST ENERGY CORP 3,000 SH. WOODSIDE PETROLEUM 1,200 SH. ISHARES SILVER TRUST 1,400 SH. MICROSOFT CORP 1,700 SH. SILVERCORP METALS 1,200 SH. COMPANIA DE MINAS BUENA-VEN 200 SH. JOY GLOBAL, INC 300 SH. STARBUCKS CORP 550 SH. ANADARKO PETROLEUM 500 SH. BP PLC SPONS ADR 6,600 SH. CENTRAL FUND CDA LTD 550 SH. MARKET VECTORS JR GOLD MINERS 500 SH. MARKET VECTORS GOLD MINERS 1,880 SH. CENTRAL GOLD TRUST 1,300 SH. CUSHING MLP TOTAL RETN 1,850 SH. KAYNE ANDERSON MLP 1,275 SH. PHILLIPS 66 800 SH. RIO TINTO PLC 4,000 SH. CONTROLOLADORA COMERCIAL ME 400 SH. CONOCO PHILLIPS 9,080 SH. SPROTT PHYSICAL GOLD ETF 375 SH. SIBAYNE GOLD LTD | TURA | 25,440. 17,060. 74,541. 51,333. 20,726. 38,459. 21,564. 16,648. 4,799. 2,914. 19,229. 19,798. 74,795. 20,499. 28,223. 65,763. 46,668. 52,903. 58,152. 24,409. 22,846. 89,542. | 9,46 14,42 62,77 15,82 77,67 5,13 20,71 15,63 65,93 26,71 15,63 61,93 13,83 31,98 104,29 10,95 10,95 18,66 | 0.6262. 7282. 7282. 7282. 73962. |
| 1305.69 SH. STATOLLHYDRO ASA | | 0. 77. | 2,284. 18,227. | |
| TOTAL TO FORM 990-PF, PART II, LINE 1 | 0B | 1,026,887. | 947,3 | 76. |
| FORM 990-PF OTHER | INVESTMENTS | | STATEMENT | 8 |
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKES | r |
| 800 SH. MESABI TRUST 294 SH. MARTIN MIDSTREAM PARTNERS 1,275 SH. CHENIERE ENERGY PARTNERS 600 SH. DCP MIDSTREAM PARTNERS | COST COST COST COST | 5,219. -4,549. -2,669. 6,064. | 3,6; 6,38 33,2; 30,8 | 30. 39. |
| TOTAL TO FORM 990-PF, PART II, LINE 1 | .3 | 4,065. | 74,0 | 73. |

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

9 -

NAME OF MANAGER

KENNETH G. ADAMS DIANA MOON ADAMS CHRISTINA L. ADAMS