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SCANNED JUN 0 1 2016

Form 990-PF Department of the Treasury

For calendar year 2015 or tax year beginning

Return of Private Foundation

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

▶ 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.lirs.gov/form990pf.

, and ending

OMB No 1545-0052

Nar	ne o	foundation				A Employer identificatio	n number
7	T 3	TO EVOLUTION DANK HOUNDA	MTON.			22 720021	1
		IR-EXCHANGE BANK FOUNDA			Room/suite	23-7389214	<u> </u>
		BOX 189	audi ess)		noonvalle	B Telephone number 913-367-60	000
_		own, state or province, country, and ZIP or foreign p	nostal code			C If exemption application is	
		HISON, KS 66002	ostar code			a exemption application is	pending, check hare
		all that apply: Initial return	Initial return of a fo	rmer public c	harity	D 1. Foreign organization	s, check here
		Final return	Amended return	•	•		
		Address change	Name change			Foreign organizations m check here and attach c	eeting the 85% test, omputation
H C	heck	type of organization. X Section 501(c)(3) ex	cempt private foundation			E If private foundation st	atus was terminated
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition		under section 507(b)(1	
I Fa	ır ma	arket value of all assets at end of year J Accounti	ng method: X Cash	Accr	ual	F If the foundation is in a	60-month termination
			ther (specify)			under section 507(b)(1)(B), check here $ ightharpoonup$
		866,024. (Part I, colu	mn (d) must be on cash t	oasis)			T (4)
Pa	rt I	 (The total of amounts in columns (b), (c), and (d) may not 	(a) Revenue and expenses per books	(b) Net in	vestment	(c) Adjusted net income	(0) Disbursements for charitable purposes
_	•	necessarily equal the amounts in column (a)) Contributions, gifts, grants, etc., received	105,000.			N/A	(cash basis only)
	1 2	Check If the foundation is not required to attach Sch. B	¥ X X X			N/A	
	3	Interest on savings and temporary cash investments		, 200		· · · · · · · · · · · · · · · · · · ·	
	4	Dividends and interest from securities	12,564.	1	2,564.		STATEMENT 1
	5a	Gross rents					
	b	Net rental income or (loss)	~ -				
m	6a	Net gain or (loss) from sale of assets not on line 10	397,848.	. *			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ň	b	Gross sales price for all assets on line 6a 442, 436.		5			
Revenue	7	Capital gain net income (from Part IV, line 2)	40 - 5 38 65 -	39	7,848.		ir 💖 🤼 🔉
Œ	8	Net short-term capital gain		_ (\$ \ \ \			\$ <u>`</u> \$
	9	Income modifications Gross sales less returns	Cost Addition S	1. T. T			
	10a	and allowances	(A)			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	**;;;)
		Less Cost of goods sold	\$ 13/5/2000 TISSE		87 //		
	11	Gross profit or (loss) Other income		* * * * * * * * * * * * * * * * * * *	,		
	12	Total. Add lines 1 through 11	515,412.	41	0,412.		,
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages		·			
	15	Pension plans, employee benefits					
ses	16a	Legal fees					
Expenses	b	Accounting fees STMT 2	3,792.		948.		0.
Š	c	Other professional fees STMT 3	3,743.		3,743.		0.
ive	17	Interest (A)					
Operating and Administrativ	18	Taxes S MAY 13 EMET P	223.		0.		0.
inis	19	Depreciation and depletion					- * · · · · · · · · · · · · · · · · · ·
μþ	20	Occupancy Travel, conferences, and meetings					
ΑÞ	21	Printing and publications		 .			
gar	22	Other expenses STMT 5	40.		0.		0.
i i	24	Total operating and administrative	40.		· ·		0.
era		expenses. Add lines 13 through 23	7,798.		4,691.		0.
ŏ	25	Contributions, gifts, grants paid	113,700.				113,700.
		Total expenses and disbursements.					·
		Add lines 24 and 25	121,498.		4,691.		113,700.
	27	Subtract line 26 from line 12;	one and the control of the control o				
	a	Excess of revenue over expenses and disbursements	393,914.				
		Net investment income (if negative, enter -0-)		40	5,721.	27.7	
5235		Adjusted net income (if negative, enter -0-)	<u> </u>			N/A	5 000 55 :::
52350 11-24	- 15	LHA For Paperwork Reduction Act Notice, see	instructions				Form 990-PF (2015)

Form **990-PF** (2015)

Fo	m 99	00-PF (2015) ADAIR-EXCHANGE BANK FOU		23-	-7389214 Page 2
	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year
<u> </u>	ait	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	4	Cash - non-interest-bearing		1	. 1.
	1	Savings and temporary cash investments			
	3	Accounts receivable >		> \	
	١.	Less; allowance for doubtful accounts	×		
	4	Pledges receivable			
	_	Less: allowance for doubtful accounts Grants receivable		 	
		Receivables due from officers, directors, trustees, and other			
	"	disqualified persons			
	7	Other notes and loans receivable	£,	, .	+ · · · · · · · · · · · · · · · · · · ·
	'	Less; allowance for doubtful accounts	- 16 16 16 16 16 16 16 16 16 16 16 16 16	·	المحقد ، الماليد
v	8	Inventories for sale or use			+
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations STMT 7	443,534.	214,575	. 213,470.
	ł	Investments - corporate stock STMT 8	29,595.	488,302	
	0	Investments - corporate bonds STMT 9	0.	163,750	
	11	Investments land, buildings, and equipment basis			图集委 美 接 美 用
	l	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis	A CANADA MARKATAN AND A CANADA MARKATAN A	s was a manage programmer on a non-	أ عبيدندندند
		Less accumulated depreciation			
	ı	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	472 120	066 630	066 024
_	17	instructions. Also, see page 1, item I)	473,129.	866,628	866,024.
	17	Accounts payable and accrued expenses Grants payable			-
/ 0	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ā</u>	21	Mortgages and other notes payable			
ڐ	I	Other liabilities (describe)			
					
	23	Total liabilities (add lines 17 through 22)	0.	0.	· Marina
		Foundations that follow SFAS 117, check here			
"		and complete lines 24 through 26 and lines 30 and 31.			
nces		Unrestricted			
		Temporarily restricted			
or Fund Bala	26	Permanently restricted			
Ë		Foundations that do not follow SFAS 117, check here			
ě		and complete lines 27 through 31.	0.	0.	
ets	27	Capital stock, trust principal, or current funds	0.	0	- *****
Ass	28	Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds	473,129.	866,628	· 1
Net Assets	30	Total net assets or fund balances	473,129.	866,628	<u>'</u>
Z	"	Total lict assets of fully suranees	1.0,123	000,020	4
	31	Total liabilities and net assets/fund balances	473,129.	866,628	.
	art		·	•	
_		<u> </u>			
1		I net assets or fund balances at beginning of year - Part II, column (a), line	2 30		473 100
	•	st agree with end-of-year figure reported on prior year's return)		1	
		r amount from Part I, line 27a r increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3			
		eases not included in line 2 (itemize)	SEE ST	ATEMENT 6 5	+
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o		6	

Page 3

ADAIR-EXCHANGE BANK FOUNDATION

		property sold (e.g non stock, 200 sh			(b) H P - D -	ow acqui Purchase Donation	red (c) Date a (mo., da		(d) Date sold (mo., day, yr.)
<u>1a</u>										
b SEE ATTACHED	STATEME	INT			<u> </u>					
d c					-					
e										
(e) Gross sales price		ition allowed owable)		st or other basis expense of sale			<u> </u>		nn or (loss) (f) minus (
a b					-					
С										
e 442,436.				44,58	18.					397,848
Complete only for assets showin	g gain in column	(h) and owned by	the foundation				(1)	Gains (Co	ol. (h) gain	
(i) F.M.V. as of 12/31/69		ted basis 2/31/69		cess of col. (I) col. (J), if any			col. (k), but n	ot less than (from col. (f	-0-) or
a										
b										
c d			<u> </u>		_					
e										397,848
		C If care also anton	I	7	\neg		,	-		337,040
2 Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0	- in Part I, line	7	}	2				397,848
3 Net short-term capital gain or (los	,	ections 1222(5) an	nd (6):							
If gain, also enter in Part I, line 8,	column (c).) l				N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Sectio	n 4940/e) for	Reduced	Tax on Net	Inve	3 estmer	nt Inco	me	14 / K	
(For optional use by domestic private										
, , ,		1001 10 110 30011011	15 10(0) 102 011	THE HIT COUNTY H	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,				
If section 4940(d)(2) applies, leave th	iis part blank.									
Was the foundation liable for the sect	ion 4942 tax on t	he distributable am	nount of any ye	ear in the base per	riod?					Yes X No
If "Yes," the foundation does not qual										
1 Enter the appropriate amount in e	ach column for e	ach year; see the ir	nstructions be	fore making any e	ntries.			,		, ,,
(a) Base period years Calendar year (or tax year beginnir	ng in) Adju	(b) isted qualifying dis	tributions	Net value of no	(c) enchard	table-use	assets	(Dıstrıbı col. (b) dıvı	(d) ution ratio ded by col. (c))
2014			2,825.				377.			.083479
2013			1,914.				317.			.212945
2012			4,500.				188.			.101889
2011		7	4,500.				060.			.114253
2010		/	9,000.			591,	723.	<u> </u>		.133508
2 Total of line 1, column (d)								2		.646074
3 Average distribution ratio for the 5	-year base perior	d - divide the total o	on line 2 by 5,	or by the number	of year	rs				
the foundation has been in exister	ice if less than 5 y	years						3	_	.129215
4 Enter the net value of noncharitab	le-use assets for	2015 from Part X,	line 5					4		896,642.
5 Multiply line 4 by line 3								5		115,860.
6 Enter 1% of net investment incom	e (1% of Part I, I	ne 27b)						6		4,057.
7 Add lines 5 and 6								7		119,917.
8 Enter qualifying distributions from	Part XII, line 4							8		113,700.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the	box in Part VI, line	1b, and comp	lete that part usin	ıg a 1%	tax rate.				

Form 990-PF (2015) ADALK - EXCHANGE BANK FOUNDATIO			7389		Page 4
Part.VI Excise Tax Based on Investment Income (Section 494		1940	- see II	ISTRUCTIO	ons)
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and d] 3.		*	,
Date of ruling or determination letter: (attach copy of letter if ne					i-aa
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1	L	8,	114.
of Part I, line 27b					,
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49		<u>_</u>		_ <u>&``</u> _ & .	~ .
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -0-)	2			0.
3 Add lines 1 and 2		3		8,_	114.
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		8,1	114.
6 Credits/Payments:	1 1	٧,٠			1
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a	<i>\$</i> .	Ž 1-7		1
b Exempt foreign organizations - tax withheld at source	6b	ļ .	1 ()	61 🕷	*
c Tax paid with application for extension of time to file (Form 8868)	6c	<u>ار :</u> ا			
d Backup withholding erroneously withheld	_ 6d	<u> </u>	361		'ـــــــــــــــــــــــــــــــــــــ
7 Total credits and payments. Add lines 6a through 6d		7			<u> 0.</u>
8 Enter any penalty for underpayment of estimated tax. Check here 🗓 if Form 2220 is att	ached	8			5.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9		8,1	119.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	.	10			
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax	Refunded►	11			
Part; VII; A: Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legi-	slation or did it participate or intervent	ın		Yes	No
any political campaign?				1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo				1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	nd copies of any materials publish	ed or			· 🕸 : :
distributed by the foundation in connection with the activities				iai (i) .	
c Did the foundation file Form 1120-POL for this year?			1	1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th	•				
(1) On the foundation. > \$ (2) On foundation manager		_			
e Enter the reimbursement (if any) paid by the foundation during the year for political expend	diture tax imposed on foundation				1
managers. ► \$0 .					
2 Has the foundation engaged in any activities that have not previously been reported to the	IRS?		j.	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			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang				3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?			4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N	/A [4b	<u> </u>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	?			5	X
If "Yes," attach the statement required by General Instruction T				.: 6 /à	1300
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	either:				.
By language in the governing instrument, or			į		1 7
 By state legislation that effectively amends the governing instrument so that no mandato 	ry directions that conflict with the state	e law	· ·	Commence Comments of	أسسا
remain in the governing instrument?			ļ	6 X	↓
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co.	mplete Part II, col (c), and Part X\	/	L	7 X	
			ļ	. 🖠	
8a Enter the states to which the foundation reports or with which it is registered (see instruction	ons) ►				:
KS					1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or designate)		_ [
of each state as required by General Instruction G? If "No," attach explanation				8b X	
9 Is the foundation claiming status as a private operating foundation within the meaning of si	ection 4942(j)(3) or 4942(j)(5) for cale	endar	Ī		
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 sched	dule listing their names and addresses			10	X
				n 990-PF	

Pa	art.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	1		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1		
	If "Yes," attach statement (see instructions)	12	77	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	<u> </u>
	Website address ► N/A The books are in care of ► EXCHANGE NATIONAL BANK Telephone no. ► 913-3	7 6	000	
14	The books are in care of ► EXCHANGE NATIONAL BANK Located at ► 600 COMMERCIAL, ATCHISON, KS Telephone no. ► 913-30			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	002		\Box
15	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,	- 11	Yes	No
10	securities, or other financial account in a foreign country?	16	1.63	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1	L	_
	foreign country	à ~ .		- 3
Pa	art.VII-B. Statements Regarding Activities for Which Form 4720 May Be Required	<u>, I </u>	*****	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	· A	Yes	No
1a	a During the year did the foundation (either directly or indirectly):	. 9	248	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	3.	, ,	
	(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	.,,	ν" Σχι	
	for the benefit or use of a disqualified person)?		27. 27. 27.	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	**	% ·	2
	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.) Yes X No	, 37 m		100
			2	45, 7
0	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	45		x
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	1.29ac	<u>∧</u>
	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	3"		
٠	before the first day of the tax year beginning in 2015?	1c		$\bar{\mathbf{x}}$
2	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)):			,
а	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	, (*	į į
	If "Yes," list the years		,	
b	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	*	(* x	*
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	- <i>F</i>	N.	<u>%.</u>
	statement - see instructions.) N/A	2b		
C	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			***
	<u> </u>			* ; {
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			i * ;
	during the year? Yes X No			
0	b If "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 of boldings acquired by get or happened or (3) the lapse of the 10-, 15-, or 20-year first phase helding period? (Los School de Commissioner under section 4943(c)(7)) to dispose			
	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	- -	
An	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		x
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			<u> </u>
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		$\bar{\mathbf{x}}^{-}$
-		rm 000	<u> </u>	

·				
Form 990-PF (2015) ADAIR-EXCHANGE BANK FOUN			23-73892	14 Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4/20 May Be F	sequirea (contin	ued)	
5a During the year did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(0)\2		es X No	5
(2) Influence the outcome of any specific public election (see section 4955); o			3 (11)	
any voter registration drive?	i to carry on, an cody or mane		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	>		es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)	7 000011500 111 00011011		es 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			
'the prevention of cruelty to children or animals?	o. caacanona. p.a. p.acco, c		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the exceptions described i		_	"
section 53.4945 or in a current notice regarding disaster assistance (see instru	· ·	3	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	·		▶□ □	7 7 6 6
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned	\$c	
expenditure responsibility for the grant?	N	/A 🔲 Ye	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		[:	· a
a personal benefit contract?		Ye	es 🗶 No 🖟	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870			Ž.	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 🎇	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			,	7b
Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	y	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	account, other
RICHARD R DICKASON	VP/DIR	,	oomponeed.	
1501 RIVERVIEW DRIVE				
ATCHISON, KS 66002	1.00	0.	0.	0.
SHARON BALDRIDGE	SECR/DIR			
16329 262ND ROAD				
ATCHISON, KS 66002	1.00	0.	0.	0.
PAUL H ADAIR	PRES/DIR			
819 N 4TH STREET				
ATCHISON, KS 66002	1.00	0.	0.	0.
MARSHA A ADAIR	TREAS/DIR			
819 N 4TH STREET				
ATCHISON, KS 66002	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Form **990-PF** (2015)

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

0.

 \overline{lack}

All other program-related investments. See instructions.

Total. Add lines 1 through 3

ADAIR-EXCHANGE BANK FOUNDATION 23-7389214 Page 8 Form 990-PF (2015) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 910,291. a Average monthly fair market value of securities b Average of monthly cash balances 1b c Fair market value of all other assets 1c 910,296. 1đ d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1e 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 910,296. Subtract line 2 from line 1d 3 13,654. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 5 896,642. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 44,832. Minimum investment return. Enter 5% of line 5 6 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 44,832. Minimum investment return from Part X, line 6 8,114 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.) 2b 2c c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 36,718. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 113,700. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the:

- a Suitability test (prior IRS approval required)
- **b** Cash distribution test (attach the required schedule)
- Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4
- Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b
- Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form **990-PF** (2015)

113,700.

113,700.

3a

3b

4

6

Part XIII Undistributed Income (see instructions)

`	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI, line 7	3+ ×	·		36,718.
2 Undistributed income, if any, as of the end of 2015	S	. 1. 1	· • •	
a Enter amount for 2014 only			0.	***
b Total for prior years:	C. Sign	· · · · · · · · · · · · · · · · · · ·	. 4	. 4
,		0.	,	,
3 Excess distributions carryover, if any, to 2015:	× 47.	t ÷	rajo (ara ja)	* * *
aFrom 2010 49,550.		· .	, ,	,
bFrom 2011 42,045.		医皮肤性线 剂	*	*
cFrom 2012 38,134.			- A	* 1
dFrom 2013 131,720.	7, 50		*** · · · · · · · · · · · · · · · · · ·	, i
eFrom 2014 29,429.			· · · · · · · · · · · · · · · · · · ·	
f Total of lines 3a through e	290,878.			
4 Qualifying distributions for 2015 from	,	ta & 22 8 1		1 () · () · () · () · ()
Part XII, line 4: ►\$ 113,700.	in the state		, ,	* *
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	~	/
c Treated as distributions out of corpus		y., ,		
(Election required - see instructions)	0.	***		×A }
d Applied to 2015 distributable amount	* 'ya ;	4 0/3 3 W	y	36,718.
e Remaining amount distributed out of corpus	76,982.	* * * * * *	4	1
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.		· * · · · · · · · · · · · · · · · · · ·	0.
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				!
	367,860.	^; "y '	. % 3× % rd	2 3
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	•		in a	36. 36
line 4b from line 2b	*	0.		
c Enter the amount of prior years'		0.	2.2 %	San Miller 1 at San 10 at 1
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously	* ************************************	0.	* * *	
assessed		0.	* ***	· · · · · · · · · · · · · · · · · · ·
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions	\$ 48 42 G	⟨. *	****	
e Undistributed income for 2014. Subtract line		,	0.	,
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2015. Subtract	<u>, 4: A</u>		0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2016	, ** · · · · · · · · · · · · · · · · · ·	,	*** *	0.
7 Amounts treated as distributions out of		YA	* &	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election		ś	*	
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	49,550.			
9 Excess distributions carryover to 2016.	15,550.			
Subtract lines 7 and 8 from line 6a	318,310.			
10 Analysis of line 9:	515/510.			
a Excess from 2011 42,045.				
b Excess from 2012 38,134.				
c Excess from 2013 131,720.				
dExcess from 2014 29, 429.				
e Excess from 2015 76,982.				
523581 11-24-15			· <u> </u>	Enrm 990-PF (2015)

Form 990-PF (2015) ADAIR – E	XCHANGE BAN	K FOUNDATIO	N	23-73	39214 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VI	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	it it is a private operating			
foundation, and the ruling is effective fo			>		
b Check box to indicate whether the found	<u>fation is a private operati</u>	ng foundation described i	n section	4942(j)(3) or 494	12(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				<u></u>	
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					·
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities		ļ		-	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	ļ				
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets		 	 	 	
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter				1 	
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	<u> </u>	<u> </u>		<u> </u>	
Part XV. Supplementary Info	rmation (Comple	ete this part only	if the foundatior	n had \$5,000 or mo	re in assets
at any time during t		ructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation wh year (but only if they have contributed n			ributions received by the	toundation before the close	e of any tax
NONE	10/0 αιαπ φο,000). (000 ο	30011011 007 (4)(2).)			
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corneration i	or an equally large ports	on of the ownership of a na-	tnerchin or
other entity) of which the foundation has			or an equally large porti	on of the ownership of a par	thership of
NONE					
2 Information Regarding Contribute	ion, Grant, Gift, Loan	. Scholarship, etc., Pr	ograms:		
Check here ► X if the foundation of the foundation makes gifts, grants, etc.	nly makes contributions	to preselected charitable	organizations and does i		
a The name, address, and telephone num	<u>`</u>	<u>-</u>			
= 1.10 manner addition, and telephone fluiti	0. 0a usurusu 01	poroun to whom appli	sale should be usual.	u.	
			· · ·		
b The form in which applications should b	e submitted and informa	ition and materials they st	nould include;		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	
523601 11-24-15					Form OOO DE 100451
J2J00 i 11-24-13					Form 990-PF (2015)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid dunng the year				
ALL FAITH COUNSELING CENTER 1225 N 2ND	NONE	EXEMPT	CHARITABLE	
ATCHISON, KS 66002				3,000.
ANGEL FLIGHT CENTRAL	NONE	EXEMPT	CHARITABLE	
10 RICHARD ROAD				
KANSAS CITY, MO 64116				2,000.
ATCHISON ART ASSOCIATION 704 N 4TH ST	NONE	EXEMPT	CHARITABLE	
ATCHISON, KS 66002		ļ		4,000.
ATCHISON COMMUNITY FOUNDATION 626 COMMERCIAL	NONE	ЕХЕМРТ	CHARITABLE	
ATCHISON, KS 66002				1,000.
ATCHISON COUNTY HEALTH CLINIC 1412 N 2ND ST ATCHISON, KS 66002	NONE	EXEMPT	CHARITABLE	500.
b Approved for future payment	TINUATION SHEE	Tr(S)	▶ 3a	113,700.
NONE				
Total			▶ 3b	0.

Part XVI-A	Analysis of Income-Producing Activities
------------	---

Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income		y section 512 513 or 514	(e)	
• •	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt	
1 Program service revenue:	code	Aillouill	code	Amount	function income	
a		·		·		
	-		+			
d	-		++			
е						
f		-				
g Fees and contracts from government agencies	-	·			<u></u>	
2 Membership dues and assessments					- -	
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	12,564.		
5 Net rental income or (loss) from real estate:	,	· · · · · · · · · · · · · · · · · · ·		-		
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income			01		-	
8 Gain or (loss) from sales of assets other than inventory			18	397,848.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a						
b	_					
<u> </u>	_					
0						
12 Subtotal. Add columns (b), (d), and (e)			. 	410,412.	0.	
13 Total. Add line 12, columns (b), (d), and (e)	<i>z</i>			13	410,412.	
(See worksheet in line 13 instructions to verify calculations.)	1				120,110	
		nliahmant of	Evamet D			
Part XVI-B. Relationship of Activities	to the Accor	ipiisnment of	Exempt Pi	urposes		
Line No. Explain below how each activity for which in	come is reported in c	olumn (e) of Part XV	I-A contributed	importantly to the accomp	lishment of	

▼	the foundation's exempt purposes (other than by providing funds for such purposes).
	· · · · · · · · · · · · · · · · · · ·
-+	
1 11-24-1	Form 990-Pi

Form 990-PF (2015) ADAIF	R-EXCHANGE	E BANK	FOUNDATION		23-7	389214	Pa	ige 13
Part XVII				and Transactions a	and Relation	ships With None	charitable	-	3
	Exempt Organ	nizations							
				ig with any other organization		ction 501(c) of		Yes	No
the Code	(other than section 501(c	c)(3) organizations) o	or in section 52	27, relating to political organ	nizations?		, \$		ř.,
a Transfers	from the reporting found	lation to a noncharita	able exempt or	ganization of:					%.
(1) Cash	ì						1a(1)		Х
(2) Othe	r assets						1a(2)		Х
b Other tran	nsactions:						1		
(1) Sales	s of assets to a noncharita	able exempt organiza	ation				1b(1)		X
(2) Purc	hases of assets from a no	oncharitable exempt	organization				1b(2)		Х
(3) Rent	al of facilities, equipment,	or other assets					1b(3)		X
(4) Reim	nbursement arrangements	3					1b(4)		Х
(5) Loan	is or loan guarantees						1b(5)		X
(6) Perfo	ormance of services or me	embership or fundra	ısıng solıcıtatıo	ns			1b(6)		X
c Sharing o	of facilities, equipment, ma	ailing lists, other asse	ets, or paid em	ployees			1c		X
d If the ans	wer to any of the above is	"Yes," complete the	following sche	edule. Column (b) should al	ways show the fair	market value of the goo	ds, other ass	ets,	
				ed less than fair market valu	ie in any transactio	on or sharing arrangeme	ent, show in		
	d) the value of the goods,								
(a)Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	on of transfers, transactions,	and sharing ar	rangeme	nts
			N/A						
		<u> </u>							
	.	ļ .							
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		<u> </u>							
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		· · · · · · · · · · · · · · · · · · ·	_						
		 							
	······································	 							-
		 							
		+							
		 							
2a Is the fou	indation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organi	zations described				
	501(c) of the Code (othe						Yes	X	No
	omplete the following sch								
	(a) Name of or	ganization		(b) Type of organization		(c) Description of relat	ionship	•	
	N/A								
					_				
				<u>.</u>					
				<u> </u>	<u> </u>				
والأمم				ng accompanying schedules and n taxpayer) is based on all inform			May the IRS or	discuss 1	his er
Sign Here	10.1.12	Lucias		N 5/10/16	Nin a 3	Deardon	shown below	(see ins	ር)ን የ
	hature of officer or trustee				Tutto	TEGIOCAL	X Yes	L	J No
	Print/Type preparer's n		Preparer's s	Date	Title Date	T Check if IP	TIN		
	Trinio Type preparer S II	umc	I Toparer 3 S	, , , , , , , , , , , , , , , , , , ,	1	self- employed			
Paid	THOMAS E.	BARZEE	1 The	en_6 hut	5/9/16	1 ' ' 1	P00749	691	
Preparer	Firm's name ► CBI		C V 3	1100	1 1 1 1 1 1 1 1 1 1	Firm's EIN ► 34			
Use Only							,		

Form **990-PF** (2015)

Phone no. 816-945-5500

Firm's address ► 700 WEST 47TH STREET, SUITE 1100 KANSAS CITY, MO 64112

ADAIR-EXCHANGE B.	ANK FOUNDATION	23-738	39214	PAGE 1 OF 1
Part IV Capital Gains and Lo	sses for Tax on Investment Income			
(a) List and	describe the kind(s) of property solo	L e g., real estate.	(b) How acquire P - Purchase	ed (c) Date acquired (d) Date sold
	ick warehouse, or common stock, 20		D - Purchase	(mo., day, yr.) (mo., day, yr.)
1a HIBBETT SPORTS	TNC		P	09/09/1510/01/15
b EXACT SCIENCES		09/09/15/10/09/15		
	CORP		P	
c NETWORKS INC			P	09/09/15/11/11/15
d FRONTIER COMMU	NICATIONS		P	07/08/1009/09/15
e WALMART STORES			P	09/05/8609/09/15
f VERIZON COMMUN	ICATIONS		P	09/08/8609/09/15
g PFIZER INC			P	04/29/7709/09/15
h MONSANTO CO			P	04/29/7709/09/15
· 3M CO			P	04/29/7709/09/15
IBM			P	12/31/77/09/09/15
<u> </u>			P	12/31/1/09/09/15
k				
1				
m				
n				
0				1
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (loss)
(e) Gross sales price	(or allowable)	plus expense of sale) plus (f) minus (g)
2 700	(5. 4.10.14.0)	· · · · · · · · · · · · · · · · · · ·		
a 3,796.		4,362.		<566.
b 1,451.		3,695.		<2,244.
c 6,103.		6,936.		<833.
d 398.		402.		<4.
e 211,361.		9,241.		202,120.
f 14,024.		6,113.		7,911.
11 702		838.		10,865.
		54.		
h 8,325.				8,271.
114,659.		5,001.		109,658.
70,616.		7,946.		62,670.
k				
1				
m				
n				
Complete only for assets showin	g gain in column (h) and owned by t	he foundation on 12/31/60		(fram cal (b))
Complete only for assets showin	· · · · · · · · · · · · · · · · · · ·			osses (from col. (h)) s of col. (h) gain over col. (k),
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)		t not less than "-0-")
(1)1.11.11.11.11.11.11.11.11.11.11.11.11.	as of 12/31/69	over col. (j), if any		,
a				<566.
b				<2,244.
c				<833.
<u>d</u>				<4.:
				202,120.
e				7,911.
<u></u>				
g				10,865.
h				8,271.
1				109,658.
<u> </u>				62,670.
k		· ·		· · · · · · · · · · · · · · · · · · ·
1	,	-		
· · · · · · · · · · · · · · · · · · ·				
m				
n				
0				
	المراجع والمراجع والم	us Port I, line 7		
2 Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter "-0	m raiti, ime / -" in Part I. line 7	2	397,848.
- , ,		, I		
	ss) as defined in sections 1222(5) and	a (b)	1	
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8		ľΙ		N/A
in (1055), citter -0- III Part I, line (, 		3	N/A

Part₃XV₈ Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient ATCHISON COUNTY HISTORICAL SOCIETY NONE EXEMPT CHARITABLE 200 S 10TH ST ATCHISON KS 66002 1,000. ATCHISON FAMILY YMCA NONE EXEMPT CHARITABLE 321 COMMERCIAL ATCHISON, KS 66002 2,000. BENEDICTINE COLLEGE NONE EXEMPT CHARITABLE 1020 N 2ND ST ATCHISON, KS 66002 10,000. BENEDICTINE SISTERS NONE EXEMPT CHARITABLE 801 S 8TH ST ATCHISON, KS 66002 10,000. BOYS & GIRLS CLUB OF ATCHISON NONE EXEMPT CHARITABLE 103 S 7TH ST ATCHISON, KS 66002 1,000. CARROLL MANSION NONE EXEMPT CHARITABLE 1128 FIFTH AVE LEAVENWORTH, KS 66048 2,000. CASA NONE EXEMPT CHARITABLE 100 S 5TH ST LEAVENWORTH, KS 66048 500. CATHOLIC CHARITIES OF NE KANSAS NONE EXEMPT CHARITABLE 9720 W 87TH ST OVERLAND PARK, KS 66212 1,500. CITIZENS FOR COMMUNITY VALUES NONE EXEMPT CHARITABLE P O BOX 511 ATCHISON, KS 66002 200. COMMAND & GENERAL STAFF FOUNDATION NONE EXEMPT CHARITABLE 100 STIMSON AVE SUITE 1149 FT LEAVENWORTH, KS 66027 2,000. 103,200. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient DOVES NONE EXEMPT CHARITABLE PO BOX 262 ATCHISON, KS 66002 3,000. GUIDANCE CENTER NONE EXEMPT CHARITABLE 500 LIMIT ST LEAVENWORTH, KS 66048 1,000. HAPPY HEARTS NONE EXEMPT CHARITABLE 701 S 8TH ATCHISON, KS 66002 2,000. HUMANE SOCIETY NONE EXEMPT CHARITABLE 125 N 21ST ST ATCHISON, KS 66002 5,000. KC CREATES INC NONE EXEMPT CHARITABLE PO BOX 415001 KANSAS CITY, MO 64141-5001 1,000. LANSING EDUCATIONAL FOUNDATION NONE EXEMPT CHARITABLE PO BOX 186 2,000. LEAVENWORTH, KS 66048 LEAVENWORTH CATHOLIC SCHOOLS NONE EXEMPT CHARITABLE 320 N BROADWAY LEAVENWORTH, KS 66048 5,000. LEAVENWORTH PUBLIC SCHOOLS EDUCATION NONE EXEMPT CHARITABLE FOUNDATION PO BOX 186 LEAVENWORTH, KS 66048 5,000. MAUR HILL/MOUNT ACADEMY NONE EXEMPT CHARITABLE 1000 GREEN STREET 10,000. ATCHISON, KS 66002 MOUNT VERNON CEMETERY NONE CHARITABLE EXEMPT PO BOX 33 ATCHISON, KS 66002 2,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor RICHARD ALLEN CULTURAL CENTER NONE EXEMPT CHARITABLE 412 KIOWA ST LEAVENWORTH, KS 66048 2,000. SALVATION ARMY NONE EXEMPT CHARITABLE 926 COMMERCIAL STREET ATCHISON, KS 66002 1,000. ST ANDREWS SEWANEE SCHOOL NONE EXEMPT CHARITABLE 290 QUINTARD RD SEWANEE, TN 37375 500. ST BENEDICTS ABBEY NONE EXEMPT CHARITABLE 1020 N 2ND ST ATCHISON, KS 66002 5,000. ST BENEDICTS CATHOLIC SCHOOL NONE EXEMPT CHARITABLE 201 DIVISION STREET ATCHISON, KS 66002-1925 5,000. ST LUKES CUSHING HOSPITAL FOUNDATION NONE EXEMPT CHARITABLE 711 MARSHALL LEAVENWORTH, KS 66048 5,000. ST LUKES HOSPITAL FOUNDATION NONE EXEMPT CHARITABLE 800 W 47TH ST SUITE 204 KANSAS CITY, MO 64112 1,000. ST VINCENT CLINIC NONE EXEMPT CHARITABLE 422 WALNUT LEAVENWORTH, KS 66048 1,000. NONE EXEMPT CHARITABLE THEATRE ATCHISON 401 SANTA FE ATCHISON, KS 66002 2,000. TRINITY EPISCOPAL CHURCH MCCONAUGHY NONE EXEMPT CHARITABLE FUND 300 S 5TH ATCHISON, KS 66002 6,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor TRINITY LUTHERAN SCHOOL NONE EXEMPT CHARITABLE 603 N 8TH ST ATCHISON, KS 66002 4,000. UNIVERSITY OF SAINT MARY NONE ЕХЕМРТ CHARITABLE 4100 S 4TH LEAVENWORTH, KS 66048 2,500. UNIVERSITY OF THE SOUTH EXEMPT NONE CHARITABLE 735 UNIVERSITY AVE SEWANEE, TN 37383 1,000. WOMEN'S COMMUNITY Y NONE EXEMPT CHARITABLE 520 S BROADWAY ST LEAVENWORTH, KS 66048 1,000. Total from continuation sheets

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

OMB No 1545-0047

Name of the organization

Employer identification number

AI	DAIR-EXCHANGE BANK FOUNDATION	23-7389214					
Organization type (check of	one)						
Filers of:	Section:						
Form 990 or 990-EZ 501(c)() (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 charatable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
•	is covered by the General Rule or a Special Rule.)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions					
General Rule							
_	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.	•					
Special Rules							
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1 Complete Parts I and II.	or 16b, and that received from					
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.							
year, contributions is checked, enter purpose Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, chantable, etc., purposes, but no such contributions totaled makere the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because rele, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc ,					
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule In Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fit the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						

Employer identification number

<u>ADAIR</u>	-EXCHANGE BANK FOUNDATION	2	3-7389214
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EXCHANGE NATIONAL BANK 600 COMMERCIAL STREET ATCHISON, KS 66002	\$105,000.	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	EXCHANGE BANKSHARES CORP 600 COMMERCIAL STREET ATCHISON, KS 66002	\$	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
		\$	Person Payroll Occash (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
523452 10-2	6.15	\$Schedule B (For	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

ADATR-FYCHANGE BANK FOUNDATION

23-7389214

	ash Property (see instructions) Use duplicate copies of P	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
		\$	
(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)		(2)	
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		1000 11011 404101101	
			

Name of organization Employer identification number 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Vame(s)	-			Identifying N	umber
ADAIR-EXCH	ANGE BANK FOU	UNDATION		23-73	89214
(A)	(B)	(C)	(D)	(E)	(F)
*Date	Amount	Adjusted Balance Due	Number Days Balance Due	Daily Penalty Rate	Penalty
		-0-			
05/15/15	56.	56.	31	.000082192	
06/15/15	56.	112.	92	.000082192	1
09/15/15	55.	167.	91	.000082192	1
12/15/15	56.	223.	16	.000082192	
12/31/15	0.	223.	91	.000081967	2
03/31/16	0.	223.	45	.000109290	1

enalty Due (Sum of Coli	umn F)				

^{*} Date of estimated tax payment, withholding credit date or installment due date.

512511 04-01-15

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
EXCHANGE NATIONAL BANK & TRUST	12,564	•	0. 12,564.	12,564.	
TO PART I, LINE 4	12,564	•	0. 12,564.	12,564.	
FORM 990-PF		ACCOUNTI	NG FEES	Si	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	_	3,792.	948.		0.
TO FORM 990-PF, PG	L, LN 16B =	3,792.	948.		0.
FORM 990-PF	0	THER PROFES	SIONAL FEES	ST	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TRUSTEE FEES ASSET MANAGER FEE		2,353. 1,390.	2,353. 1,390.		0.
TO FORM 990-PF, PG 3	L, LN 16C	3,743.	3,743.		0.
FORM 990-PF		TAX	ES	នា	PATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX	_	223.	0.		0.
TO FORM 990-PF, PG	l, LN 18	223.	0.		0.
	=				

FORM 990-PF	OTHER EXPENSES			STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC			
MISCELLANEOUS - STATE OF KANSAS PRIVILEGE FEE	40		0.		0.
TO FORM 990-PF, PG 1, LN 23	40	•	0.		0.
FORM 990-PF OTHER DECREAS	ES IN NET A	SSETS OR F	UND BALANCES	STATEMENT	6
DESCRIPTION				AMOUNT	
ACCRUED INTEREST PURCHASED 2	015 AVAILAB	LE 2016		41	L5.
TOTAL TO FORM 990-PF, PART I	II, LINE 5			41	5.
		GOVERNMENT	OBLIGATIONS	STATEMENT	
		S. OTHER	OBLIGATIONS BOOK VALUE		7
FORM 990-PF U.S. AND STATE OF THE PROPERTY OF	STATE/CITY OF CONTROL	S. OTHER 'T GOV'T		STATEMENT FAIR MARKET	7
FORM 990-PF U.S. AND STATE OF THE PROPERTY OF	STATE/CITY OF CONTROL	S. OTHER 'T GOV'T	BOOK VALUE	STATEMENT FAIR MARKET VALUE	7
FORM 990-PF U.S. AND DESCRIPTION US GOVERNMENT OBLIGATIONS - 1 FUNDS US GOVERNMENT AGENCY OBLIGAT	STATE/CITY (GOV MUTUAL X IONS - X	S. OTHER 'T GOV'T	BOOK VALUE 74,311.	STATEMENT FAIR MARKET VALUE 74,31	7
FORM 990-PF U.S. AND DESCRIPTION US GOVERNMENT OBLIGATIONS - 1 FUNDS US GOVERNMENT AGENCY OBLIGATIONS SEE LIST	STATE/CITY OF GOV MUTUAL X IONS - X	S. OTHER 'T GOV'T	BOOK VALUE 74,311. 140,264.	FAIR MARKET VALUE 74,31 139,15	7

FORM 990-PF CORPORATE STOC	rk	STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
FRONTIER COMMUNICATIONS CORP	0.	0 .
IBM	0.	0.
MONSANTO CO	0.	0.
PFIZER INC	0.	0.
3M CO VERIZON COMMUNICATIONS	0.	0.
WAL-MART STORES INC	0.	0.
COMMON STOCKS - SEE LIST	488,302.	489,911
TOTAL TO FORM 990-PF, PART II, LINE 10B	488,302.	489,911
FORM 990-PF CORPORATE BOND	os	STATEMENT S
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS - SEE LIST	163,750.	162,642.
TOTAL TO FORM 990-PF, PART II, LINE 10C	163,750.	162,642.

Statement of Assets

Account:

ADAIR/EXCHANGE BK FNDTN

As of 12/31/2015



23-7389214

Symbol	Asset Description	Maturity Units/Shares Date or Face Value	Total Cost	Market -Price	Market Value
010 Common	Stock	-			
009128307	AIR METHODS CORP	351 0000	\$13,120 38	\$41 93	\$14,717 43
02079K107	ALPHABET INC CL C	35.0000	\$22,075.32	\$758 88	\$26,560.80
063904106	BANK OF THE OZARKS INC	294.0000	\$13,526.46	\$49 46	\$14,541.24
09062X103	BIOGEN IDEC INC	51 0000	\$15,710.65	\$306.35	\$15,623.85
136375102	CANADIAN NATL	179.0000	\$10,100 19	\$55 88	\$10,002 52
146229109	CARTERS INC	82.0000	\$8,004.05	\$89 03	\$7,300.46
151020104	CELGENE CORP	148 0000	\$18,303 36	\$119 76	\$17,724 48
156782104	CERNER CORP	340 0000	\$21,524 64	\$60 17	\$20,457 80
192446102	COGNIZANT TECH	343 0000	\$21,732.15	\$60 02	\$20,586 86
256746108	DOLLAR TREE INC	204 0000	\$14,139 70	\$77 22	\$15,752 88
268948106	EAGLE BANCORP INC	304 0000	\$14,187 15	\$50 47	\$15,342.88
30219G108	EXPRESS SCRIPTS INC	268.0000	\$22,711.02	\$87.41	\$23,425.88
31428X106	FEDEX CORP	83 0000	\$12,604.37	\$148.99	\$12,366.17
366651107	GARTNER INC	147 0000	\$12,871 40	\$90 70	\$13,332 90
375558103	GILEAD SCIENCES INC	218 0000	\$22,883.17	\$101 19	\$22,059 42
438516106	HONEYWELL INT'L INC	211.0000	\$21,233 18	\$103.57	\$21,853.27
497266106	KIRBY CORP	115 0000	\$8,069.21	\$52 62	\$6,051.30
577933104	MAXIMUS INC	80.0000	\$5,273 26	\$56 25	\$4,500 00
58155Q103	MCKESSON CORP	94.0000	\$18,428.65	\$197.23	\$18,539 62
592688105	METTLER TOLEDO INTL	36.0000	\$10,909 12	\$339 13	\$12,208 68
670100205	NOVO-NORDISK	299 0000	\$16,792 77	\$58 08	\$17,365 92
671044105	OSI SYS INC	230.0000	\$18,038.09	\$88.66	\$20,391.80
741503403	THE PRICELINE GROUP INC	15 0000	\$19,587.71	\$1,274.95	\$19,124.25
778296103	ROSS STORES INC	216 0000	\$10,785 05	\$53.81	\$11,622 96
82669G104	SIGNATURE BK	121 0000	\$16,407.77	\$153.37	\$18,557 77
83088M102	SKYWORKS SOLUTIONS INC	288 0000	\$23,796 48	\$76 83	\$22,127 04
87157D109	SYNAPTICS INC	172 0000	\$12,271 89	\$80 34	\$13,818 48
892356106	TRACTOR SUPPLY CO	206 0000	\$17,879 05	\$85 50	\$17,613 00

Statement of Assets

Account:

ADAIR/EXCHANGE BK FNDTN

As of 12/31/2015



23-7289214

Control of the State of the Sta			This experience of		Parkasan k	E-96 GAR COLLEGE TO 12 JAN
Symbol	Asset Description	Maturity Date	Units/Shares for Face Value	Total : Cost	Market Price	Market Value
		一种自然是数45%。沿着	PATER SECTION			经现在是否是
92827P102	VIRTUSA CORP		535 0000	\$26,853.22	\$41 34	\$22,116.90
929740108	WABTEC CORP		200.0000	\$18,482.92	\$71.12	\$14,224 00
155 Mutual Fu	ands		Total:	\$488,302.38	_	\$489,910.56
000000051	FEDERATED GOVERNMENT OBLIGATIONS (INCOME)		36,404 7700	\$36,404.77	\$1 00	\$36,404.77
00000005P	FEDERATED GOVERNMENT OBLIGATIONS (PRINCIPAL)		37,906 5600	\$37,906.56	\$1 00	\$37,906 56
200 Corporate	Ronde		Total.	\$74,311.33	•	\$74,311.33
200 Corporate	Bolius					
00206RCC4	AT&T INC 2.3% DUE 3/11/19	3/11/2019	10,000 0000	\$10,042.90	\$99 95	\$9,995.16
053332AL6	AUTOZONE INC 4% DUE 11/15/20	11/15/2020	10,000 0000	\$10,585 18	\$105.00	\$10,500 30
126650CE8	CVS CAREMARK CORP 2.25% DUE 8/12/19	8/12/2019	10,000 0000	\$10,075 20	\$99 87	\$9,986.84
14912L3U3	CATERPILLAR FIN MTN 5.45% DUE 4/15/18	4/15/2018	10,000.0000	\$10,977.50	\$108.16	\$10,816 39
166764AE0	CHEVRON CORP 1 718% DUE 6/24/18	6/24/2018	10,000.0000	\$10,043.10	\$99.49	\$9,948 92
235851AL6	DANAHER CORP 2.3% DUE 6/23/16	6/23/2016	10,000 0000	\$10,123.50	\$100 56	\$10,056 22
25468PDA1	WALT DISNEY CO 1.85% DUE 5/30/19	5/30/2019	10,000 0000	\$10,065.50	\$100.16	\$10,015 50
278865AQ3	ECOLAB INC 1.55% DUE 1/12/18	1/12/2018	10,000 0000	\$9,931.70	\$99.29	\$9,929 30
354613AH4	FRANKLIN RESOURCES 1.375 DUE 9/15/17	9/15/2017	10,000 0000	\$10,012.10	\$99 82	\$9,981 82
369550AV0	GENERAL DYNAMICS 1% DUE 11/15/17	11/15/2017	10,000.0000	\$9,927.10	\$99.70	\$9,969 57
36962GY40	GEN ELEC CAP CRP MTN 5.375% DUE 10/20/16	10/20/2016	10,000 0000	\$10,479.40	\$103.38	\$10,337.65
38141GEE0	GOLDMAN SACHS GROUP 5 35% DUE 1/15/16	1/15/2016	10,000 0000	\$10,135 00	\$100 10	\$10,010.46
437076BB7	HOME DEPOT INC 2.25% DUE 9/10/18	9/10/2018	10,000 0000	\$10,230 00	\$102 52	\$10,252 00
58155QAC7	MCKESSON CORP 3 25% DUE 3/1/16	3/1/2016	10,000.0000	\$10,095 50	\$100 36	\$10,035.89
844741BA5	SOUTHWEST AIRLINES 2 75% DUE 11/6/19	11/6/2019	10,000 0000	\$10,148 80	\$100 78	\$10,077 52
949746NX5	WELLS FARGO CO 5 625% DUE 12/11/17	12/11/2017	10,000 0000	\$10,877 30	\$107.28	\$10,728 40
440 U.S. Gove	enment Agency Obligations		Total	\$163,749.78	_	\$162,641.94
3133XD2Y6	FHLB 4 625% DUE 9/8/17	9/8/2017	15,000 0000	\$16,039.50	\$106.02	\$15,903.54
3136G0E31	FNMA 1.25% DUE 9/27/18	9/27/2018	15,000 0000	\$15,126.95	\$99 50	\$14,924.84
912828KD1	US TNOTE 2 75% DUE 2/15/19	2/15/2019	25,000 0000	\$26,314.45	\$104 20	\$26,049 80
			,		Ţ 	4 20,040 00

Statement of Assets

Account:

ADAIR/EXCHANGE BK FNDTN

As of 12/31/2015



23-7389214

Symbol	Asset Description	Maturity (Units/Shares or Face/Value	Total Cost	Market Price	Market Value
912828MS6	US TNOTE 3% DUE 2/28/17	2/28/2017	25,000.0000	\$25,882.81	\$0 00	\$25,882.81
912828PK0	US TNOTE 2 25% DUE 11/30/17	11/30/2017	25,000.0000	\$25,765 62	\$102 21	\$25,552.73
912828QQ6	US TNOTE 2.375% DUE 5/31/18	5/31/2018	30,000 0000	\$31,134 18	\$102.82	\$30,844.92
			Total:	\$140,263 51	_	\$139,158.64
702 Miscellane	eous					
X0206RCC4	ACC INT AT&T INC 2.3% DUE 3/11/16	3/11/2016	8 3000	\$8.30	\$1.00	\$8.30
X12828KD1	ACC INT TNOTE 2 75% DUE 8/15/16	8/15/2016	56 0500	\$56.05	\$1 00	\$56.05
X12828MS6	ACC INT TNOTE 3% DUE 8/28/16	8/28/2016	30.9100	\$30.91	\$1.00	\$30.91
X133XD2Y6	ACC INT FHLB 4 625% DUE 3/8/16	3/8/2016	104 0600	\$104 06	\$1 00	\$104.06
X136G0E31	ACC INT FNMA 1.25% DUE 3/27/16	3/27/2016	5 2100	\$5 21	\$1 00	\$5.21
X26650CE8	ACC INT CVS CAREMARK 2 25% DUE 2/12/16	2/12/2016	28.7500	\$28 75	\$1.00	\$28 75
X37076BB7	ACC INT HOME DEPOT 2 25% DUE 3/10/16	3/10/2016	8.7500	\$8 75	\$1 00	\$8 75
X54613AH4	ACC INT FRANKLIN RES 1 375% DUE 3/15/16	3/15/2016	0 3800	\$0.38	\$1.00	\$0.38
X78865AQ3	ACC INT ECOLAB INC 1 55% DUE 1/12/16	1/12/2016	33.5800	\$33.58	\$1.00	\$33.58
X8141GEE0	ACC INT GOLDMAN SACHS 5 35% DUE 1/15/16	1/15/2016	111.4600	\$111 46	\$1.00	\$111.46
X8155QAC7	ACC INT MCKESSON CORP 3.25% DUE 3/1/16	3/1/2016	27.9900	\$27 99	\$1.00	\$27.99
			Total [.]	\$415 44		\$415.44
Grand Total:				\$867,042 44		\$866,437 91

Market Value by Asset Type

