STATE OF KANSAS DIVISION OF BANKING

Drimon, I						
Filliary	Primary Internet Web Address of the Trust Company (Home Page) if any (i.e. www.example company.com)					
Trust Co	Trust Company Name Address					
			T ===			
City		State	ZIP	County		
ALL DOLLAR AMOUNTS ON ALL REPORTS AND SCHEDULES ARE TO BE REPORTED IN THOUSANDS OF DOLLARS ("000" OMITTED). WHEN INSERTING NEGATIVE NUMBERS, USE THE HYPHEN (-). UNLESS OTHERWISE INDICATED, REPORT THE AMOUNT OUTSTANDING AS OF THE LAST BUSINESS DAY OF THE YEAR.						
REPO	RT OF CONDITION FOR YEAR I	ENDING	, 20)		
						Book Value
ASSET						
1.	Cash and balances due from de					
2.	(
	a. Account/fee receivables from trust accounts					
	b. Account receivables – Other					
	c. Due from affiliates or subsidiaries					
3.	Securities (From Schedule B, Column A, Line 7)					
4.	Premises and fixed assets (Net of depreciation)					
5.	Total loans and leases					
6.	Investments in unconsolidated s	subsidiaries and	associated	companies		
7.	Prepaid expenses					
8.	Intangible assets					
9.	Other assets (From Schedule C, Line	e 3)				
10.	TOTAL ASSETS (Sum of Items 1-9	9)				
LIABIL	LITIES					
11.	Accounts payable					
12.	Notes and debentures payable					
13.	Obligations under capitalized leases					
14.	Other borrowed money					
15.	Due to affiliates or subsidiaries					
16.	Other liabilities (From Schedule D, Line 5)					

17.	TOTAL LIABILITIES (Sum of Items 11-16)	
18.	MINORITY INTEREST IN CONSOLIDATED SUBSIDIARIES	
EQUIT	Y CAPITAL	
19.	Preferred stock	
20.	Common stock	
21.	Surplus	
22.	a. Retained earnings	
	b. Accumulated other comprehensive income	
23.	Other equity capital components	
24.	TOTAL EQUITY CAPITAL (Sum of Items 19-23)	
25.	TOTAL LIABILITIES AND EQUITY CAPITAL (Sum of Items 17, 18 & 24)	

Trust Company Name_____

Trust Company Name

SCHE	DULE A - ACCOUNTS/FEE RECEIVABLES FROM TRUST ACCOUNTS	S AND OTHER	
1.	Current receivables (0-29 days)		
2.	Past due 30-89 days and still accruing		
3.	Past due 90 or more days and still accruing		
4.	Non-accrual		
5.	TOTAL FEE RECEIVABLES (Must equal the total of Report of Condition Item 2)		
		Column A	Column B
00115	OULE D. OFOURITIES	Book Value	Market Value
1.	U.S. Treasury securities		
2.	U.S. Government agencies and corporation obligations		
3.	Securities issued by states and political subdivisions in the U.S.		
4.	Other debt securities		
5.	Equity securities		
	• •		
6.	Investment in mutual funds		
7.	TOTAL (Sum of Items 1-6, must equal Report of Condition Item 3)		
SCHE	DULE C - OTHER ASSETS		
1.	Net deferred tax assets (If debit balance)		
2.	Other (Itemize amounts greater than \$25,000 that exceed 25 percent of Item 3 of this schedule)		
	Schodule)		
3.	TOTAL (Sum of Items 1 & 2 must equal Report of Condition Item 9)		
SCHEI	DULE D - OTHER LIABILITIES Expenses accrued and unpaid (Includes accrued interest payable and income		
	taxes)		
2.	Net deferred tax liabilities (If credit balance)		
3.	Dividends declared but not paid		
4.	Other (Itemize amounts greater than \$25,000 that exceed 25 percent of Item 5 of this schedule)		
5.	TOTAL (Sum of Items 1-4 must equal Report of Condition Item 16)		

Trust Company Name_____

REPO	RT OF IN	ICOME FOR THE PERIOD, 20 THROUGH	, 20
INCON			
1.	Trust a	dministration fee income (Sum of Items 1a-1d)	
	a.	Personal trusts	
	b.	Employee benefit accounts	
	C.	Corporate accounts	
	d.	Other:	
2.	Interest	and dividend income earned on the trust company's portfolio	
3.	Other in	ncome	
4.	TOTAL	INCOME (Sum of Items 1-3)	
EXPE 5.		s and employee benefits	Τ
_			
6.	•	es of premises and fixed assets	
7.	Contrac	cted outside servicing expenses (Provide details) (Sum of Items 7a-7c)	
	a.		
	b.	· ·	
	C.		
8.		xpenses	
9.	Provision	ons for uncollected fees	
10.	Fiducia	ry settlements, surcharges, and other losses	
11.	TOTAL	EXPENSES (Sum of Items 5-10)	
12.		COME (LOSS) before taxes, extraordinary items, and	
13.		djustments (Item 4 less item 11) or losses) from securities sold	
14.	•	ble income taxes	
15.		djustments (Provide details) (Sum of Items 15a-15c)	
		(100)	
	a.		
	b.		
	C.		

16.	NET INCOME (LOSS)			
17.	LESS: Other charges (credits) to retained earnings			
	a.	Cash dividends declared		
	b.	Other (describe)		

18. **INCREASE (DECREASE)** in retained earnings (Item 16 less Item 17)

Trust Company Name_____

Trust Company Name	
--------------------	--

REPORT OF FIDUCIARY ASSETS AS OF	, 20
----------------------------------	------

Fiduciary and Related Assets

- 1. Personal trust and agency accounts
- 2. Employee benefit and retirement-related accounts
 - a. Employee benefit-defined contribution
 - b. Employee benefit-defined benefit
 - c. Other employee benefit and retirement related
- 3. Corporate trust and agency accounts
- 4. Investment management and investment advisory accounts
- 5. Foundation and endowment trust accounts
- 6. Other fiduciary accounts
- 7. **TOTAL** (Sum of Items 1-6)
- 8. Custody and safekeeping accounts
- Fiduciary accounts administered in out-ofstate trust offices (Included in Item 7 and 8)

Column A Managed Assets	Column B Non-Managed Assets	Column C # of Managed Assets	Column D # of Non- Managed Assets
_			

SCHEDULE A - MANAGED ASSETS

- 1. Managed assets held in fiduciary accounts
 - a. Noninterest-bearing deposits
 - b. Interest-bearing deposits
 - c. U.S. Treasury and U.S. Government agency obligations
 - d. State, county, and municipal obligations
 - e. Money market mutual funds
 - f. Equity mutual funds
 - g. Other mutual funds
 - h. Collective investment funds
 - i. Other short-term obligations

Column A Personal Trust and Agency and Investment Management Agency Accounts	Column B Employee Benefit and Retirement- Related Trust and Agency Accounts	Column C All Other Accounts

		Trust Company Name
j.	Other notes and bonds	
k. I.	Investments in unregistered funds and private equity investments Other common and preferred stocks	
m.	Real estate mortgages	
n.	Real estate	
Ο.	Miscellaneous assets	
p.	TOTAL managed assets held in fiduciary accounts (Sum of items 1a-1o)	

q. Investments of managed fiduciary accounts in advised or sponsored mutual funds

Column A	Column B
Managed	# of Managed
Assets	Accounts

SCHEDULE B - CORPORATE TRUST AND AGENCY ACCOUNTS

- 2. Corporate trust and agency accounts
 - a. Corporate and municipal trusteeships
 - (1) Issues reported in Item 2.a that are in default
 - b. Transfer, agent, registrar, paying agent, and other corporate agency

Column A Number of Issues	Column B Principal Amount Outstanding

SCHEDULE C - COLLECTIVE INVESTMENT FUNDS

- 3. Collective investment funds:
 - a. Domestic equity
 - b. International/global equity
 - c. Stock/bond blend
 - d. Taxable bond
 - e. Municipal bond
 - f. Short-term investment/money market
 - g. Specialty/other
 - h. TOTAL collective investment funds (Sum of Items 3a-3g)

Column A Number of Funds	Column B Market Value of Fund Assets

Trust Company	/ Name			

SCHEDULE D - FIDUCIARY SETTLEMENTS, SURCHARGES, AND OTHER LOSSES

- 4. Fiduciary settlements, surcharges, and other losses:
 - a. Personal trust and agency accounts
 - b. Employee benefit and retirement-related trust and agency accounts
 - c. Investment management and investment advisory agency accounts
 - d. Other fiduciary accounts and related services
 - e. **TOTAL** fiduciary settlements, surcharges, and other losses (Sum of items 4a-4d)

Column A Gross Losses Managed Accounts	
<u> </u>	

Trust Comp	any Name		

NOTE: This filing must be signed by either the president, vice president, or secretary and attested to by not less than three (3) directors.

I, the undersigned officer, do hereby declare that this Consolida Report of Fiduciary Assets (including the supporting schedules instructions issued by the Kansas Office of the State Bank Com and belief.	s) have been prepared in conformance with the
Name and Title of Person to Whom Inquiries May be Directed	Area Code/Telephone Number
Email Address	
Name and Title of Officer Authorized to Sign the Report	Area Code/Telephone Number
Signature of Officer Authorized to Sign the Report	Date Signed - Month/Day/Year
We, the undersigned directors, attest to the correctness of th Income, and Report of Fiduciary Assets (including the support examined by us and, to the best of our knowledge and belief instructions and are true and correct.	orting schedules) and declare they have been
Signature of Director	
Signature of Director	
Signature of Director	