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Form **990-PF**

EXTENDED TO NOVEMBER 16, 2015 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.irs.gov/form990pf.

OMB No 1545-0052

De	partm	ກຍ່າໂ of the Treasury Revenue Service				social security no m 990-PF and its				ide public. s.gov/form990pf,	Open to Public Inspection
		lendar year 2014			on about 1 on	iii 660-71 dild its	зорагато	, and e		u.gov//o/mooop/,	Open to Public Inspection
		of foundation			· · · · · · · · · · · · · · · · · · ·			,	<u> </u>	A Employer identification	n number
	BE:	RRY FOU	NDATIO	ON INC							
_	C/	O JUDY V	WORREI	L		~~~~~				20-394210	7
		er and street (or P O				•			Room/suite	B Telephone number	
_		23 N. H								(316)832-	0171
		or town, state or p		untry, and ZII 7201–0		ostal code				C If exemption application is	pending, check here
G	Che	eck all that apply		Initial return	1	Initial re	turn of a fo	rmer public o	charity	D 1. Foreign organization	ns, check here
				Final return		Amende	ed return			2 Foreign organizations r	seeting the 85% test
_				Address ch		Name c				2 Foreign organizations r check here and attach	computation
н _	_	eck type of organ Section 4947(a)(empt private four		ition		E If private foundation st under section 507(b)(1
1	Fair	market value of a	ıll assets at e	end of year	J Accounti	ng method 🛚 🖸	C ash	Accı	rual	F If the foundation is in a	60-month termination
		m Part II, col (c				her (specify)				under section 507(b)(1)(B), check here
	▶\$				(Part I, colu	mn (d) must be	on cash t	basis.)			(4) -
<u>[]</u>	Part	Analysis of (The total of ar necessarily eq	nounts in colu ual the amoun	imns (b), (c), and its in column (a	d (d) may not))	(a) Revenue expenses pe	r books		ivestment ome	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	-	1 Contributions	g, gifts, grant	ts, etc , recei	ved	590	,000.			N/A	
		2 Check ▶	-		attach Sch B	<u> </u>					
		3 cash investmen	ıts	•		1	576		1,576.		STATEMENT 1
		4 Dividends and	d interest fro	om securities		1	,576.		1,5/0.		STATEMENT 1
	'	5a Gross rents D Net rental incom	(1)								
		6a Net gain or (loss	· · · · -	assets not on I	ine 10						
	E E	b Gross sales price assets on line 6	ce for all	433013 1101 011 1							
	Revenue	7 Capital gain net		Part IV, line 2)					0.		
	"	8 Net short-teri	m capital gai	ın							
2015	!	9 Income modi		1							
	1	0a and allowances				1					
e		b Less Cost of g									
<u>~</u>		c Gross profit of 1	' '			1	649.	-	649.		STATEMENT 2
NOV		12 Total Add lir		nh 11		592	,225.		2,225.		
	\neg	3 Compensation			, etc		0.		0.		0.
	1	4 Other employ	ree salaries a	and wages							
<u>Z</u>	<u>, 1</u> 1	5 Pension plan	s, employee	benefits							
SCANN	Expenses	6a Legal fees	RE	CEIV	ΞD						
S	ē.	b Accounting for	~~~~~~~~	. O La I V I	S S						
1	e L	c Other profess	siohal fees B NOV	V 1 9 2	015						
:	<u>.</u> [≩	17 Interest 13		4 I D E						-	
	1 3	9 Depreciation	and depletio	eranasaran DD = 6 - 6 i	سسسيان: العام						
•	[2	Occupancy	UG	ولا الساليا	UÍ						
	<u>ک</u> 2	21 Travel, confe	rences, and	meetings							
	E 2	22 Printing and	publications		_						
	<u>ව</u> 2	23 Other expens			MT 3		113.	_	0.	_	0.
,	Operating and Administrative	24 Total operati	_				113.		0.		0.
1	؞ؗٳۉ	expenses. A		-		307	,848.		<u> </u>		307,848.
	- 1	25 Contributions 26 Total expens				- 307	, 0 4 0 .				30.7013.
	-	Add lines 24		, e, a c i i c i i c i .		307	,961.		0.		307,848.
_	2	27 Subtract line		e 12							
		3 Excess of rever			rsements	284	,264.				
		b Net investme	ent income ((if negative, ent	er -0-)				2,225.		
-	3501	c Adjusted net	income (if n	egative, enter-	0-)					N/A	Form 000 PE (2014)

		0-PF (2014) C / O BOD1 WORKEDD	Beginning of year	End of ye	ar rayez
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value		(c) Fair Market Value
	. 1	Cash - non-interest-bearing			
	` `	Savings and temporary cash investments	376,023.	626,358.	626,358.
		Accounts receivable ►	, , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , ,
	J	Less allowance for doubtful accounts		Ì	
			· · · · · · · · · · · · · · · · · · ·		
	4	Pledges receivable -	1		
		Less allowance for doubtful accounts			
	_	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts ▶			
ß	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
AS	10a	Investments - U S and state government obligations			
	l	Investments - corporate stock			
		Investments - corporate bonds	-		
		· •		· · · · · · · · · · · · · · · · · · ·	
	11	Investments - land buildings, and equipment basis	Ì		
		Less accumulated depreciation			
		Investments - mortgage loans			
	13	Investments - other			, , , , , , , , , , , , , , , , , ,
	14	Land, buildings, and equipment basis			
	1	Less accumulated depreciation			
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the			606 250
		instructions Also, see page 1, item I)	376,023.	626,358.	626,358.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ξ.	1	Other liabilities (describe	-		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.	1		
ės	24	Unrestricted			
E C	25	Temporarily restricted			
3ali	1	Permanently restricted			
ğ	20	Foundations that do not follow SFAS 117, check here			
Ē		,			
5		and complete lines 27 through 31.	0.	0.	
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	0.	0.	
SS	28	Paid-in or capital surplus, or land, bldg, and equipment fund	376,023.	626,358.	
Ä	29	Retained earnings, accumulated income, endowment, or other funds	376,023.	626,358.	
ž	30	Total net assets or fund balances	3/0,023.	020,330.	
	24	Total liabilities and not assets found belonger	376,023.	626,358.	
	31	Total liabilities and net assets/fund balances		02070000	
P	art	Analysis of Changes in Net Assets or Fund B	alarices 		
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		276 222
	(mu	st agree with end-of-year figure reported on prior year's return)		1	376,023.
2		r amount from Part I, line 27a		2	284,264.
3		er increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	660,287.
5		reases not included in line 2 (itemize) N/D EXPENSE		5	33,929.
6		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	626,358.
_					Form 990-PF (2014)

Part IV Capital Gains a	and Lo	sses for Tax on In	vestment	Income						
		nd(s) of property sold (e g or common stock, 200 shs			l P	How ac - Purc - Dona	nase `) Date aco (mo , day	quired , yr)	(d) Date sold (mo , day, yr)
1a										
b NOI	NE				ļ			 -		
<u>c</u>					ļ					
e e										
(e) Gross sales price	(f) D	Depreciation allowed (or allowable)		st or other basis expense of sale		-		(h) Gain (e) plus (f	or (loss)) minus (
a	-									
b										
C			·. 							
<u>d</u>										
Complete only for assets showin	o oain in o	column (h) and owned by t	the foundation	on 12/31/69			(I) G	iains (Col	(h) gain	minus
	-	i) Adjusted basis		cess of col (I)			col (I	c), buṫ not	less than	-0-) or
(i) F M V as of 12/31/69		as of 12/31/69		col (j), if any				Losses (fr	om col (l	1))
a										
b										
С										
d										
е									-	
2 Capital gain net income or (net ca	pıtal loss)	If gain, also enter If (loss), enter -0-			}	2				
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,			d (6)		J					
If (loss), enter -0- in Part I, line 8	•	ection 4940(e) for				3				
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect If "Yes," the foundation does not qual 1 Enter the appropriate amount in e	ion 4942 ify under s	tax on the distributable am section 4940(e) Do not co	mplete this pa	irt						Yes X No
(a)	acii colui		istructions be	Tote making any e	(c)					(d)
Base period years Calendar year (or tax year beginnir	ng in)	Adjusted qualifying dist		Net value of no		rıtable-			Distrib ol (b) div	ution ratio ided by col. (c)) •522477
2013			6,388. 3,002.				5,018. 8,098.			.600601
2012 2011			4,398.				0,851.			.406219
2010			1,295.			29	$\frac{3,330}{2,330}$.312301
2009			3,950.				2,404.			.353439
2 Total of line 1, column (d)								2		2.195037
3 Average distribution ratio for the 5 the foundation has been in exister			on line 2 by 5,	or by the number	of ye	ars		3		.439007
4 Enter the net value of noncharitab	le-use ass	sets for 2014 from Part X,	line 5					4		556,570
5 Multiply line 4 by line 3								5		244,338.
6 Enter 1% of net investment incom	ne (1% of	Part I, line 27b)						6		22.
7 Add lines 5 and 6								7		244,360
8 Enter qualifying distributions from	n Part XII,	line 4						8		307,848
If line 8 is equal to or greater than See the Part VI instructions			1b, and comp	olete that part usin	ıg a 1	% tax	rate	-		
									F	orm 990-PF (2014

10

of each state as required by General Instruction G? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

X

Х

3b

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2014)

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)	o i lage o
5a During the year did the foundation pay or incur any amount to		<u> </u>		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), o	, ,,	ectly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	1	
section 53 4945 or in a current notice regarding disaster assistance (see instru		-	N/A !	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it maintai	ined		
expenditure responsibility for the grant?	N	i/A 🔲 ye	s No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y£	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		(a) Componentian	(d) Contributions to	(-) Evpapes
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
·	PRESIDENT/DIR	ECTOR		
3223 N. HYDRAULIC	1 00		_	0
WICHITA, KS 67219	1.00	0.	0.	0.
	SECRETARY/TRE	ASOKEK/DI	RECT	
3223 N. HYDRAULIC	1 00	_	0.	0
WICHITA, KS 67219	1.00	0.	0.	0.
	DIRECTOR			
3223 N. HYDRAULIC	1 00	_	۸ ا	0
WICHITA, KS 67219	1.00	0.	0.	0.
	DIRECTOR			
3223 N. HYDRAULIC	1 00	0.	0.	0.
WICHITA, KS 67219 2 Compensation of five highest-paid employees (other than those inc	1.00		<u> </u>	<u> </u>
2 Compensation of live highest-paid employees tother than those inc	(b) Title, and average	I I I I I I I I I I I I I I I I I I I	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	account, other allowances
NONE	devoted to position	-	compensation	allowatices
NONE				
	1			
				
,	1			
1000	1			
Total number of other employees paid over \$50,000	<u> </u>	1	•	0
TOTAL HARMON OF OTHER SIMPLOYCES PAID OVER \$00,000			F	990-PF (2014)

\sim /	<u>'</u> ^	JUDY	WORRELL
\smile /	U	JUDI	MOKKETT

Part VIII Information About Officers, Directors, Trustees, Foundation N Paid Employees, and Contractors (continued)	lanagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE	E."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
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 statistical infornumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1. N/A	rmation such as the c	Expenses
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 lines 1 a 1 N/A	nd 2	Amount
2		
All other program-related investments. See instructions. 3		. Hada
Total. Add lines 1 through 3	>	0 . Form 990-PF (2014)

For	n 990-PF (2014) C/O JUDY WORRELL	20-3942107	Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	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	0. 5,046.
b	Average of monthly cash balances	1b 565	,046.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d 565	,046.
е	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	3 565	,046.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 8	3,476. 5,570.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 556	5,570.
6	Minimum investment return Enter 5% of line 5	6 27	7,829.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1 27	7,829.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	20	22. 7,807.
3	Distributable amount before adjustments Subtract line 2c from line 1	3 27	7 , 807.
4	Recoveries of amounts treated as qualifying distributions	4	0. 7,807.
5	Add lines 3 and 4	5 27	7 , 807.
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 27	7,807.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	205	7 0 1 0
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		7,848. 0.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
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		
a	Suitability test (prior IRS approval required)	3a	
þ	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	4 307	7,848.
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	22. 7,826.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		/ , 826.
	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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI, line 7	, , , , , , , , , , , , , , , , , , , ,	7		27,807.
2 Undistributed income, if any, as of the end of 2014		-		2170016
a Enter amount for 2013 only		İ	0.	
b Total for prior years				
L votal to processor		0.		
3 Excess distributions carryover, if any, to 2014	-1			
a From 2009 98,000.				
b From 2010 76,756.				
c From 2011 117,902.				
d From 2012 131, 139.				
e From 2013 186,649.				
f Total of lines 3a through e	610,446.			
4 Qualifying distributions for 2014 from				
Part XII, line 4 ► \$ 307,848.				
a Applied to 2013, 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				,
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				27,807.
e Remaining amount distributed out of corpus	280,041.			· · · · · · · · · · · · · · · · · · ·
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	890,487.			
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 assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2013 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				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 2009				
not applied on line 5 or line 7	98,000.			
9 Excess distributions carryover to 2015.	500 405			
Subtract lines 7 and 8 from line 6a	792,487.			
10 Analysis of line 9				
a Excess from 2010 76,756. b Excess from 2011 117,902.				
b Excess from 2011 117, 902.				
c Excess from 2012 131,139.				
d Excess from 2013 186,649.				
e Excess from 2014 280,041.	<u> </u>			Form 990-PF (2014)
11-24-14		9		rviiii 330-F F (2014)

BERRY FOUNDATION INC C/O JUDY WORRELL Form 990-PF (2014)

Part XIV Private Operating F	oundations (see ins	tructions and Part VII	·A, question 9)	N/A	42107 Tage 10
1 a If the foundation has received a ruling o			1		
foundation, and the ruling is effective fo					
b Check box to indicate whether the found		-	n section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	g roundation doodness t	Prior 3 years	7 10 12())(07 01	
Income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
Investment return from Part X for	(-,	(-,	(=, ==	1	
each year listed					
b 85% of line 2a				-	
© 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					
Qualifying distributions made directly	·-·-	 			
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the	VII.R1-2				
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 Info	rmation (Complet	te this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during t	he vear-see instr	uctions.)	ii tiio iodiidatioi		0.0 11, 000010
1 Information Regarding Foundation					
a List any managers of the foundation wh	•	han 2% of the total cont	ributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed in			······································		,,
NONE					
b List any managers of the foundation wh	o own 10% or more of the	stock of a corporation (or an equally large porti	on of the ownership of a p	artnership or
other entity) of which the foundation has			,		, F
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here ▶ ☐ If the foundation o			_	not accept unsolicited requ	iests for funds If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	ber or e-mail address of th	e person to whom appli	cations should be addre	ssed	
SEE SCHEDULE 1		•			
b The form in which applications should b	e submitted and informati	on and materials they sh	rould include		
SEE SCHEDULE 1		·			
c Any submission deadlines					
SEE SCHEDULE 1					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields,	kinds of institutions, or	other factors	
SEE SCHEDULE 1		·	•		
					AAA DE

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
SEE SCHEDULE OF 2014 GIFTS	N/A	EXEMPT	CHARITABLE	
THE SCREEDILE OF 2014 GIFTS	N/A	EXEMPI	CHARTIABLE	307,848.
Total			▶ 3a	307,848.
		1		307,040.
b Approved for future payment				
NONE				
Total			> 3b	0.

C/O JUDY WORRELL

Part XVI-A	Analysis of Income-Producing Activities		

er gross amounts unless otherwise indicated	1	d business income	Exclude	ed by section 512, 513, or 514	(e)
Program convento ravonuo	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
rogram service revenue	code		Code		
			+ +		
					
			+ +		
	····				
Fees and contracts from government agencies	***				
embership dues and assessments					
terest on savings and temporary cash					•
vestments					
ividends and interest from securities			14	1,576.	
et rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
et rental income or (loss) from personal					
operty					· · · · · · · · · · · · · · · · · · ·
ther investment income			01	649.	
ain or (loss) from sales of assets other					
an inventory					
et income or (loss) from special events					
ross profit or (loss) from sales of inventory	-				
ther revenue					
	1 1		}		
				2,225,	
ubtotal Add columns (b), (d), and (e)		C).	2,225.	2,22
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e)		C).	2,225.	2,22
ubtotal Add columns (b), (d), and (e) stal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	us)			13	2,22
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	us)			13	2,22
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ubtotal Add columns (b), (d), and (e) stal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activition	es to the Acco	omplishment of	Exempt	Purposes	2,22
ubtotal Add columns (b), (d), and (e) ntal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ibtotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation T XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ibtotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation T XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ibtotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation T XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ibtotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation T XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ibtotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation T XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ibtotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation T XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ibtotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation T XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ibtotal Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation T XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ubtotal Add columns (b), (d), and (e) ntal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ubtotal Add columns (b), (d), and (e) ntal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
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ubtotal Add columns (b), (d), and (e) ntal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ubtotal Add columns (b), (d), and (e) ntal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	2,22
ubtotal Add columns (b), (d), and (e) ntal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activitie No. Explain below how each activity for which	es to the Acco	omplishment of	Exempt	Purposes	_2,22

Form **990-PF** (2014)

Form 990-PF (2	014) C/O J	UDY WORRELL			20-3942	2107 F	Page 13
Part XVII	Information Re Exempt Organ	egarding Transfers To a izations	and Transactions a	and Relations	hips With Noncha	ritable	
1 Did the or	ganization directly or indi	rectly engage in any of the followir	ng with any other organization	on described in secti	on 501(c) of	Yes	s No
the Code ((other than section 501(c))(3) organizations) or in section 53	27, relating to political organ	izations?			
a Transfers	from the reporting founda	ation to a noncharitable exempt or	ganization of				
(1) Cash						1a(1)	X
(2) Other	assets					1a(2)	X
b Other tran	sactions						
(1) Sales	of assets to a noncharital	ble exempt organization				16(1)	X
(2) Purch	nases of assets from a no	ncharitable exempt organization				1b(2)	X
(3) Renta	I of facilities, equipment,	or other assets				1b(3)	Х
(4) Reimi	bursement arrangements					1b(4)	Х
(5) Loans	s or loan guarantees					1b(5)	X
	•	mbership or fundraising solicitation	ons			1b(6)	X
		iling lists, other assets, or paid em				10	X
-		"Yes," complete the following sche		ways show the fair n	narket value of the goods, o	other assets,	
		oundation. If the foundation receiv	• • •	•			
		other assets, or services received		•			
	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and	sharing arranger	nents
		N/A	· · · · · · · · · · · · · · · · · · ·		W		
					· · · · · · · · · · · · · · · · · · ·		
		- "-	· · · ·				
		· **-	· -				
	.*						
			 -				
				_	··· · · · · · · · · · · · · · · · · ·		
							
		<u> </u>	<u> </u>				
	•	tly affiliated with, or related to, one	· · · · ·	zations described	_	¬., г	ਓ
	, ,	r than section 501(c)(3)) or in sec	tion 527?		L	Yes L	X No
<u>b</u> If "Yes," co	omplete the following sch			Γ-	(-) D		
	(a) Name of org	janization	(b) Type of organization		(c) Description of relations	пр	
	N/A						
							
			<u> </u>	L			
Under	penalties of penury, I declare	that whave examined this return, including the Declaration of preparer of the that	ng accompanying schedules and an taxpayed is based on all inform	statements, and to the	best of my knowledge has any knowledge	y the IRS discus	s this
Sign		71 171	tarpayer, is based on all live			im with the prep	nstr)?
Here	10.2	1/ shield	11112115	URER	L	X Yes	No
Sigr	natul e of fofficer or trustee		Date	Title			
	Print/Type preparer's na	ame Preparer's s	*	Date	Check if PTIN		
				NOV 1 0 2015	self- employed		
Paid	aid DENISE E. HINSON DENISE E. HINSON					028730	4
Preparer					Firm's EIN ► 48-10	32601	
Use Only							
	Firm's address ► 30	1 N. MAIN, SUIT	E 1700	- 			
		CHITA, KS 67202			Phone no 316-2	67 – 723	1
					Fo	orm 990-P	F (2014)

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

2014

Name of the organization

BERRY FOUNDATION INC

C/O JUDY WORRELL

Employer identification number

20-3942107

Organization type (check 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 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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. 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) (2014)

Name of organization
BERRY FOUNDATION INC
C/O JUDY WORRELL

Employer identification number

20-3942107

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BERRY COMPANIES PO BOX 829 WICHITA, KS 67201	\$\$	Person X Payroll
(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.)
(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 BERRY FOUNDATION INC C/O JUDY WORRELL

Employer identification number

20-3942107

Part II	Noncash Property	(see instructions).	Use duplicate copies	of Part II if additional space is needed.
---------	------------------	---------------------	----------------------	---

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -		<u> </u>	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -		s	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

Part I

(e) Transfer of gift