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Form **990-PF**
Department of the Treasury
Internal Revenue Service

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 instructions is at *www.irs.gov/form990pf*.**

OMB No 1545-0052

2016

Open to Public Inspection

For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016

Name of foundation
Berry Foundation Inc

A Employer identification number
20-3942107

Number and street (or P O box number if mail is not delivered to street address)
3223 N Hydraulic Box 829

Room/suite

B Telephone number (see instructions)
(316) 832-0171

City or town, state or province, country, and ZIP or foreign postal code
Wichita, KS 672010829

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶$ 529,901

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received (attach schedule)	390,000			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments	4,224	4,224		
	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10				
	b	Gross sales price for all assets on line 6a _____				
	7	Capital gain net income (from Part IV, line 2)		0		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	42	0		
	12	**Total.** Add lines 1 through 11	394,266	4,224		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)	1,850	1,850		0
	c	Other professional fees (attach schedule)				
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	61	40		0
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	23	23		0
	24	**Total operating and administrative expenses.** Add lines 13 through 23	1,934	1,913		0
	25	Contributions, gifts, grants paid	710,900			710,900
	26	**Total expenses and disbursements.** Add lines 24 and 25	712,834	1,913		710,900
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	-318,568			
	b	**Net investment income** (if negative, enter -0-)		2,311		
	c	**Adjusted net income**(if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year (a) Book Value	End of year (b) Book Value	End of year (c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	882,398	529,901	529,901
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	15 Other assets (describe ▶ _____)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	882,398	529,901	529,901
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 **Total liabilities**(add lines 17 through 22)	0	0	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0	0	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29 Retained earnings, accumulated income, endowment, or other funds	882,398	529,901	
	30 **Total net assets or fund balances** (see instructions)	882,398	529,901	
	31 **Total liabilities and net assets/fund balances** (see instructions)	882,398	529,901	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	882,398
2	Enter amount from Part I, line 27a	2	-318,568
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	563,830
5	Decreases not included in line 2 (itemize) ▶ _____	5	33,929
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	529,901

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a				
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (from col (h))
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a				
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	541,383	890,118	0 608215
2014	307,826	556,570	0 553077
2013	206,388	395,018	0 522477
2012	143,002	238,098	0 600601
2011	134,398	330,851	0 406219

2	**Total** of line 1, column (d)	2	2 690589
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 538118
4	Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	695,557
5	Multiply line 4 by line 3	5	374,292
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	23
7	Add lines 5 and 6	7	374,315
8	Enter qualifying distributions from Part XII, line 4	8	710,900

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 1% of Part I, line 27b	1	23
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0
3	Add lines 1 and 2	3	23
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	23
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016 — 6a		
b	Exempt foreign organizations—tax withheld at source — 6b		
c	Tax paid with application for extension of time to file (Form 8868) — 6c		
d	Backup withholding erroneously withheld — 6d		
7	Total credits and payments Add lines 6a through 6d	7	0
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	23
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 2017 estimated tax** ▶ **Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ 0 **(2)** On foundation managers ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		No
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 changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ KS			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation*	8b		No
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ JUDY WORRELL Telephone no ▶ (316) 832-0171

Located at ▶ 3223 N HYDRAULIC BOX 829 WICHITA KS ZIP+4 ▶ 672010829

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No

See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☑ No			
b	If any answer is "Yes" to 1a(1)–(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1c		No
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))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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 valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2016 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 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 2016).*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes	☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes	☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes	☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes	☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes	☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?			5b	
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes	☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			6b	No
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes	☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
FRED F BERRY JR 3223 N HYDRAULIC WICHITA, KS 67219	PRESIDENT/DIRECTOR 1 00	0	0	0
JUDY WORRELL 3223 N HYDRAULIC WICHITA, KS 67219	SECRETARY/TREASURER/DIRECTOR 1 00	0	0	0
WALTER T BERRY 3223 N HYDRAULIC WICHITA, KS 67219	DIRECTOR 1 00	0	0	0
DANIEL J SCHEER 3223 N HYDRAULIC WICHITA, KS 67219	DIRECTOR 1 00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(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 information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations,see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	706,149
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	706,149
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) — 1e: 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	706,149
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,592
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	695,557
6	**Minimum investment return.** Enter 5% of line 5	6	34,778

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)

1	Minimum investment return from Part X, line 6			1	34,778
2a	Tax on investment income for 2016 from Part VI, line 5	2a	23		
b	Income tax for 2016 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	23
3	Distributable amount before adjustments Subtract line 2c from line 1			3	34,755
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	34,755
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	34,755

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	710,900
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	710,900
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 (see instructions)	5	23
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	710,877

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 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				34,755
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.				
e From 2015.				
f **Total** of lines 3a through e.	0			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ $ 710,900				
a Applied to 2015, 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 2016 distributable amount.				34,755
e Remaining amount distributed out of corpus	676,145			
5 Excess distributions carryover applied to 2016	0			0
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	676,145			
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 2015 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				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 2011 not applied on line 5 or line 7 (see instructions) . . .	0			
9 **Excess distributions carryover to 2017.** Subtract lines 7 and 8 from line 6a	676,145			
10 Analysis of line 9				
a Excess from 2012. . . .				
b Excess from 2013. . . .				
c Excess from 2014. . . .				
d Excess from 2015. . . .				
e Excess from 2016. . . . 676,145				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

OFFICERS OF THE FOUNDATION
3223 N HYDRAULIC BOX 829
WICHITA, KS 672010829
(316) 832-0171

b The form in which applications should be submitted and information and materials they should include

THE BERRY FOUNDATION WAS ESTABLISHED TO EXPEND FUNDS TO RECOGNIZED CHARITABLE ORGANIZATIONS THE CHARITABLE CONTRIBUTIONS ARE MADE AT THE DISCRETION OF THE OFFICERS OF THE FOUNDATION NO GRANTS, SCHOLARSHIPS, FELLOWSHIPS, OR OTHER SIMILAR BENEFITS ARE AWARDED AND NO APPLICATION FORMS HAVE BEEN DESIGNED FOR SUCH PURPOSES

c Any submission deadlines

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

ALL FUNDS OF THE FOUNDATION ARE INVESTED IN INTEREST-BEARING INSTRUMENTS AND ALL INCOME EARNED IS EXPENDED TO CHARITIES

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				710,900
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments			14	4,224	
4 Dividends and interest from securities. . . .					
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.					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a MISCELLANEOUS INCOME					42
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .		0		4,224	42
13 **Total.** Add line 12, columns (b), (d), and (e).				**13**	4,266

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
11A	MISCELLANEOUS INCOME RELATED PURPOSE

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received

(a) Line No	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

Sign Here

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

******	2017-10-24	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ **Yes** ☐ **No**

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
Corlene R Lange		2017-10-24		P00007927
Firm's name ▶ KCoe Isom LLP				Firm's EIN ▶48-0567703
Firm's address ▶ 3030 Cortland PO Box 1100 Salina, KS 674021100				Phone no (785) 825-1561

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
JR ACHIEVEMENT 435 S BROADWAY WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	2,500
WICHITA EDUCATION FOUNDATION 350 W DOUGLAS WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	1,000
WICHITA AERO CLUB 12828 E 13TH ST N SUITE 1 WICHITA, KS 67230	NONE	EXEMPT	CHARITABLE	2,000
CATHOLIC CHARITIES 532 N BROADWAY WICHITA, KS 67214	NONE	EXEMPT	CHARITABLE	27,535
VICTORY IN THE VALLEY 3755 E DOUGLAS WICHITA, KS 67218	NONE	EXEMPT	CHARITABLE	300
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
VIA CHRISTI PHILANTHROPY 8200 E THORN DR WICHITA, KS 67226	NONE	EXEMPT	CHARITABLE	5,000
EASTMINSTER CHURCH 1958 N WEBB RD WICHITA, KS 67206	NONE	EXEMPT	CHARITABLE	85,000
WICHITA-SEDGWICK COUNTY HIST MUSEUM 204 S MAIN WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	5,250
DEBOER FOUNDATION 8621 E 21ST ST STE 250 WICHITA, KS 67206	NONE	EXEMPT	CHARITABLE	2,000
ST JOHN UCC 405 S 5TH ST ST CHARLES, MO 63301	NONE	EXEMPT	CHARITABLE	3,500
Total 3a . . . . . ▶				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CHRISTIAN YOUTH THEATRE 5256 N WOODLAWN BEL AIRE, KS 67220	NONE	EXEMPT	CHARITABLE	2,500
KANSAS COSMOSPHERE 1100 N PLUM HUTCHINSON, KS 67501	NONE	EXEMPT	CHARITABLE	52,000
COMMEMORATIVE AIR FORCE 2560 S KESSLER WICHITA, KS 67217	NONE	EXEMPT	CHARITABLE	500
AMERICAN CANCER SOCIETY 330 S MAIN ST WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	100
NORTHSIDE CHURCH OF CHRIST 4545 N MERIDIAN WICHITA, KS 67204	NONE	EXEMPT	CHARITABLE	100
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
TRINITY ACADEMY 12345 E 21ST WICHITA, KS 67206	NONE	EXEMPT	CHARITABLE	2,000
WICHITA CHILDRENS HOMES 7271 E 37TH ST N WICHITA, KS 67226	NONE	eXEMPT	CHARITABLE	12,500
FUNDAMENTAL LEARNING CENTER 917 S GLENDALE WICHITA, KS 67218	NONE	eXEMPT	CHARITABLE	2,700
PATHWAY CHURCH 2001 N MAIZE ROAD WICHITA, KS 67212	NONE	eXEMPT	CHARITABLE	5,000
WICHITA SYMPHONY 225 W DOUGLAS WICHITA, KS 67202	NONE	eXEMPT	CHARITABLE	1,800
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
WICHITA ART MUSEUM 619 STACKMAN WICHITA, KS 67203	NONE	EXEMPT	CHARITABLE	3,000
HARVARD BUSINESS SCHOOL HARVARD BUSINESS SCHOOL SOLDIERS FIELD BOSTON BOSTON, MA 02163	NONE	EXEMPT	CHARITABLE	1,000
INTER-FAITH MINISTRIES 1020 N MAIN SUITE B WICHITA, KS 67203	NONE	EXEMPT	CHARITABLE	2,500
THE PANDO INITIATIVE 412 SOUTH MAIN SUITE 212 WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	1,300
URBAN LEAGUE OF KS 1802 E 13TH WICHITA, KS 67214	NONE	EXEMPT	CHARITABLE	700
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UNION RESCUE MISSION 2800 N HILLSIDE ST WICHITA, KS 67219	NONE	EXEMPT	CHARITABLE	4,000
BRIDGETS CRADLES PO BOX 130 ANDOVER, KS 67002	NONE	EXEMPT	CHARITABLE	1,000
AED FOUNDATION 615 W 22ND OAKBROOK, IL 60523	NONE	EXEMPT	CHARITABLE	8,000
AMERICAN ENTERPRISE INSTITUTE 1789 MASSACHUSETTS AVE NW WASHINGTON, DC 20036	NONE	EXEMPT	CHARITABLE	2,500
ACADEMY ON CAPITALISM 12345 E 21ST WICHITA, KS 67206	NONE	EXEMPT	CHARITABLE	1,500
Total 3a . . . . . ▶				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
AMERICAN HEART ASSOCIATION 8630 E 32ND CT N WASHINGTON, KS 67226	NONE	EXEMPT	CHARITABLE	300
AMIGOS DE SER 1020 N MAIN SUITE B WITCHITA, KS 67203	NONE	EXEMPT	CHARITABLE	100
AOPA 421 AVIATION WAY FREDERICK, MD 21701	NONE	EXEMPT	CHARITABLE	1,000
ARC OF SEDGWICK COUNTY 2919 W 2ND WICHITA, KS 67203	NONE	EXEMPT	CHARITABLE	1,000
BIG BROTHERS BIG SISTERS 310 E 2ND ST WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	1,000
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BOTANICA 701 N AMIDON WICHITA, KS 67203	NONE	EXEMPT	CHARITABLE	500
BREAKTHROUGH CLUB PO BOX 47563 WICHITA, KS 67201	NONE	EXEMPT	CHARITABLE	500
CENTRAL KANSAS PRISON MINISTRY PO BOX 1279 EL DORADO, KS 67042	NONE	EXEMPT	CHARITABLE	1,500
CHRISTIAN FELLOWSHIP SCHOOL 4600 CHRISTIAN FELLOWSHIP RD COLUMBIA, MO 65203	NONE	EXEMPT	CHARITABLE	1,000
CPRF OF KS 5111 E 21ST ST N WICHITA, KS 67208	NONE	EXEMPT	CHARITABLE	500
Total 3a . . . . . ▶				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CRESTED BUTTE CENTER FOR THE ARTS 606 6TH ST CRESTED BUTTE, CO 81224	NONE	EXEMPT	CHARITABLE	3,000
EAA CHAPTER 88 3612 N WEBB RD WICHITA, KS 67226	NONE	EXEMPT	CHARITABLE	200
EPISCOPAL SOCIAL SERVICES 233 S ST FRANCIS WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	250
ERIN IS HOPE 4921 E 21ST N WICHITA, KS 67208	NONE	EXEMPT	CHARITABLE	500
EVANGELICAL PRESBYTERIAN CHURCH 5850 TG LEE BLVD SUITE 510 ORLANDO, FL 32822	NONE	EXEMPT	CHARITABLE	1,000
Total . . . . . ▶ **3a**				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
EXPLORATION PLACE 300 N MCLEAN WICHITA, KS 67203	NONE	EXEMPT	CHARITABLE	500
FINNEY COUNTY UNITED WAY PO BOX 1268 GARDEN CITY, KS 67846	NONE	EXEMPT	CHARITABLE	300
FLINT HILLS THERAPEUTIC RIDING PO BOX 782622 WICHITA, KS 67278	NONE	EXEMPT	CHARITABLE	500
FRIENDS UNIVERSITY 2100 W UNIVERSITY AVE WICHITA, KS 67213	NONE	EXEMPT	CHARITABLE	1,200
FRONTIERS PO BOX 60730 PHOENIX, AZ 85082	NONE	EXEMPT	CHARITABLE	1,000
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GIRL SCOUTS OF THE HEARTLAND 360 S LEXINGTON RD WICHITA, KS 67218	NONE	EXEMPT	CHARITABLE	500
GOODWILL INDUSTRIES 3636 N OLIVER WICHITA, KS 67208	NONE	EXEMPT	CHARITABLE	500
GRACE MED 1122 N TOPEKA ST WICHITA, KS 67214	NONE	EXEMPT	CHARITABLE	30,000
GREAT WICHITA YMCA 3330 N WOODLAWN WICHITA, KS 67220	NONE	EXEMPT	CHARITABLE	250
HARRY HYNES MEMORIAL HOSPICE 630 N ST FRANCIS WICHITA, KS 67214	NONE	EXEMPT	CHARITABLE	300
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HEART OF AMERICAN COUNCIL BSA 10210 HOLMES RD KANSAS CITY, MO 64131	NONE	EXEMPT	CHARITABLE	300
HEARTSPRING 8700 E 29TH ST N WICHITA, KS 67226	NONE	EXEMPT	CHARITABLE	1,250
HIS HELPING HANDS 1441 E 37TH ST N WICHITA, KS 67219	NONE	EXEMPT	CHARITABLE	2,000
HISTORIC WICHITA COWTOWN 1871 SLIM PARK DR WICHITA, KS 67203	NONE	EXEMPT	CHARITABLE	500
HOLY SAVIOR CATHOLIC ACADEMY 3350 GEORGE WASHINGTON BLVD WICHITA, KS 67210	NONE	EXEMPT	CHARITABLE	1,000
Total . . . . . ▶ **3a**				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HOPE NET 2501 E CENTRAL SUITE 2 WICHITA, KS 67214	NONE	EXEMPT	CHARITABLE	3,000
INSTITUTE FOR FAITH WORK & ECONOMICS 8400 WESTPARK DR 100 MCLEAN, VA 22102	NONE	EXEMPT	CHARITABLE	2,000
JAYHAWK AREA COUNCIL BSA 1020 SE MONROE TOPEKA, KS 66601	NONE	EXEMPT	CHARITABLE	300
KANSAS AVIATION MUSEUM 3350 GEORGE WASHINGTON BLVD WICHITA, KS 67210	NONE	EXEMPT	CHARITABLE	3,250
KANSAS COUNCIL ON ECONOMIC EDUCATION 1845 N FAIRMONT WICHITA, KS 67208	NONE	EXEMPT	CHARITABLE	500
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
KANSAS FOOD BANK 806 E BOSTON WICHITA, KS 67208	NONE	EXEMPT	CHARITABLE	500
KANSAS POLICY INST 250 N WATER SUITE 216 WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	1,000
KIDZCOPE 8100 E 22ND ST N SUITE 100 WICHITA, KS 67226	NONE	EXEMPT	CHARITABLE	2,000
KPTS PO BOX 288 WICHITA, KS 67201	NONE	EXEMPT	CHARITABLE	235
KANSAS CENTER FOR ENTREPRENEURSHIP PO BOX 877 ANDOVER, KS 67002	NONE	EXEMPT	CHARITABLE	25,000
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
KANSAS HONOR FLIGHT 814 N COLORADO WICHITA, KS 67212	NONE	EXEMPT	CHARITABLE	700
KANSAS INDEPENDENT COLLEGE FUND 700 S KANSAS AVE SUITE 511 TOPEKA, KS 66603	NONE	EXEMPT	CHARITABLE	1,000
WICHITA CRIME COMMISSION 125 N MARKET SUITE 1115 WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	600
WICHITA SERVANT FOUNDATION 706 N LINDENWOOD DR STE 100 OLATHE, KS 66062	NONE	EXEMPT	CHARITABLE	1,000
MAKE A WISH 1144 ST FRANCIS N WICHITA, KS 67214	NONE	EXEMPT	CHARITABLE	1,000
Total 3a . . . . . ▶				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MARK ARTS 9112 E CENTRAL AVE WICHITA, KS 67206	NONE	EXEMPT	CHARITABLE	50,105
MORNING STAR RANCH 1176 BANNER RD FLORENCE, KS 66851	NONE	EXEMPT	CHARITABLE	1,500
MUSIC THEATER OF WICHITA 225 W DOUGLAS WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	2,800
NEW COVENANT BIBLE CHURCH 6607 W 42ND ST TULSA, OK 74107	NONE	EXEMPT	CHARITABLE	500
NEWMAN UNIVERSITY 3100 MCCORMICK WICHITA, KS 67213	NONE	EXEMPT	CHARITABLE	100,000
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
OH BE JOYFUL CHURCH 625 MAROON AVE CRESTED BUTTE, CO 81224	NONE	EXEMPT	CHARITABLE	2,000
OPEN DOOR PO BOX 2756 WICHITA, KS 67201	NONE	EXEMPT	CHARITABLE	50,250
PRAIRIE VIEW PO BOX 467 NEWTON, KS 67114	NONE	EXEMPT	CHARITABLE	500
PRISON FELLOWSHIP 44180 RIVERSIDE PKWY LANSDOWNE, VA 20176	NONE	EXEMPT	CHARITABLE	1,000
QUIVIRA COUNCIL BSA 1555 E 2ND WICHITA, KS 67201	NONE	EXEMPT	CHARITABLE	300
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
RAINBOWS 340 S BROADWAY WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	51,000
REASONS TO BELIEVE 818 S OAK PARK RD COVINA, CA 91724	NONE	EXEMPT	CHARITABLE	2,000
ROTARY CLUB OF WICHITA 106 W DOUGLAS WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	500
SALVATION ARMY 310 N MARKET WICHITA, KS 67202	NONE	EXEMPT	CHARITABLE	500
SAMARITANS PURSE PO BOX 3000 BOONE, NC 28607	NONE	EXEMPT	CHARITABLE	2,000
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SEDGWICK COUNTY ZOO 5555 ZOO BLVD WICHITA, KS 67212	NONE	EXEMPT	CHARITABLE	6,775
SELF HELP NETWORK WSU BOX 34 WICHITA, KS 67260	NONE	EXEMPT	CHARITABLE	250
SENIOR SERVICES 200 S WALNUT WICHITA, KS 67213	NONE	EXEMPT	CHARITABLE	1,000
SERGE 101 WEST AVE SUITE 305 JENKINTOWN, PA 19046	NONE	EXEMPT	CHARITABLE	1,000
SHIELD 616 5550 TECH CENTER DR COLORADO SPRINGS, CO 80919	NONE	EXEMPT	CHARITABLE	5,000
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ST CATHERINE HOSPICE 602 N 6TH GARDEN CITY, KS 67846	NONE	EXEMPT	CHARITABLE	100
STARKEY 4500 W MAPLE ST WICHITA, KS 67209	NONE	EXEMPT	CHARITABLE	150
STEP STONE 1329 S BLUFFVIEW WICHITA, KS 67218	NONE	EXEMPT	CHARITABLE	500
STERLING COLLEGE 125 W COOPER AVE STERLING, KS 67579	NONE	EXEMPT	CHARITABLE	44,000
THE INTERNATIONAL FOUNDATION 55 LANE RD SUITE 300 FAIRFIELD, NJ 07004	NONE	EXEMPT	CHARITABLE	500
Total 3a . . . . . ▶				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
THE LORDS DINER 520 N BROADWAY WICHITA, KS 67214	NONE	EXEMPT	CHARITABLE	1,000
TULSA AREA UNITED WAY PO BOX 1859 TULSA, OK 74101	NONE	EXEMPT	CHARITABLE	1,650
UNITED WAY OF THE PLAINS 245 N WATER WITCHITA, KS 67202	NONE	EXEMPT	CHARITABLE	32,000
UNITED WAY OF GREATER KANSAS CITY 3100 BROADWAY SUITE 1020 KANSAS CITY, MO 64111	NONE	EXEMPT	CHARITABLE	500
UNITED WAY OF GREATER TOPEKA PO BOX 4188 TOPEKA, KS 66604	NONE	EXEMPT	CHARITABLE	700
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
WSU FOR NAC CONTRIBUTION 1845 N FAIRMONT WICHITA, KS 67208	NONE	EXEMPT	CHARITABLE	6,500
WSU FOUNDATION 1845 N FAIRMONT WICHITA, KS 67208	NONE	EXEMPT	CHARITABLE	5,000
YMCA OF GREATER KANSAS CITY 3100 BROADWAY SUITE 1020 KANSAS CITY, MO 64111	NONE	EXEMPT	CHARITABLE	250
YMCA OF TOPEKA 421 SW VAN BUREN TOPEKA, KS 66603	NONE	EXEMPT	CHARITABLE	250
YOUNG LIFE 6505 E CENTRAL WICHITA, KS 67206	NONE	EXEMPT	CHARITABLE	2,500
Total . . . . . ▶ 3a				710,900

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
YOUTH ENTREPENEURS 4111 E 37TH ST N SUITE D101 WICHITA, KS 67220	NONE	EXEMPT	CHARITABLE	1,000
YOUTH HORIZONS 1601 E DOUGLAS WICHITA, KS 67211	NONE	EXEMPT	CHARITABLE	2,000
Total . . . . . ▶ 3a				710,900

TY 2016 Accounting Fees Schedule

Name: Berry Foundation Inc

EIN: 20-3942107

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	1,850	1,850		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491307006257

TY 2016 Explanation of Non-Filing with Attorney General Statement

Name: Berry Foundation Inc

EIN: 20-3942107

Statement: Not required.

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491307006257

TY 2016 Other Decreases Schedule

Name: Berry Foundation Inc

EIN: 20-3942107

Description	Amount
N/D EXPENSE	33,929

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491307006257

TY 2016 Other Expenses Schedule

Name: Berry Foundation Inc

EIN: 20-3942107

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS EXPENSE	23	23		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491307006257

TY 2016 Other Income Schedule

Name: Berry Foundation Inc

EIN: 20-3942107

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS INCOME	42		42

TY 2016 Taxes Schedule

Name: Berry Foundation Inc

EIN: 20-3942107

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL REPORT	40	40		0
FEDERAL EXCISE TAX	21	0		0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491307006257

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 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

2016

Name of the organization
Berry Foundation Inc

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	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization	Employer identification number
Berry Foundation Inc	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, KS67201	$ 390,000	Person ☑ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization	Employer identification number
Berry Foundation Inc	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.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

Name of organization
Berry Foundation Inc

Employer identification number
20-3942107

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $ ____________

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

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

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

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

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

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

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

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