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Form **990-PF**

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

OMB No 1545-0052

Department of the Treasury
 Internal Revenue Service

Note: The organization may be able to use a copy of this return to satisfy state reporting requirements

2003

For calendar year 2003, or tax year beginning , 2003, and ending , 20

G Check all that apply Initial return Final return Amended return Address change Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of organization ISRAEL HENRY BEREN CHARITABLE TRUST		A Employer identification number 48-6337836
	Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number (see page 10 of the instructions) (316) 265-3311
	City or town, state, and ZIP code WICHITA KS 67208		C If exemption application is pending, check here <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			D 1 Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 46,764,887		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
			E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

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 page 10 of the 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). Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B.				
	2 Distributions from split-interest trusts				
	3 Interest on savings and temporary cash investments	128,084	128,084		
	4 Dividends and interest from securities	313,532	313,532		
	5a Gross rents				
	b (Net rental income or (loss))				
	6a Net gain or (loss) from sale of assets not on line 10	(3,501)			
	b Gross sales price for all assets on line 6a	300,346			
	7 Capital gain net income			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)	(138,939)	(138,939)			
12 Total. Add lines 1 through 11	299,176	302,677			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	725			725
	c Other professional fees (attach schedule)	35,212	35,212		
	17 Interest				
	18 Taxes (attach schedule) (see page 13 of the instructions)	7,475	375		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses (attach schedule)	61			61	
24 Total operating and administrative expenses. Add lines 13 through 23	43,473	35,587		786	
25 Contributions, gifts, grants paid	2,315,000			2,315,000	
26 Total expenses and disbursements. Add lines 24 and 25	2,358,473	35,587		2,315,786	
27 Subtract line 26 from line 12.					
a Excess of revenue over expenses and disbursements	(2,059,297)				
b Net investment income (if negative, enter -0-)		267,090			
c Adjusted net income (if negative, enter -0-)					

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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	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash — non-interest-bearing	4,118,792	4,098,055	4,098,055
	2 Savings and temporary cash investments			
	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 page 15 of the 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)	598,285	448,009	449,627
	b Investments — corporate stock (attach schedule)	5,531,627	6,025,418	10,163,936
	c Investments — corporate bonds (attach schedule)	50,000	25,000	25,000
	11 Investments — land, buildings, and equipment basis			
Less: accumulated depreciation (attach schedule)				
12 Investments — mortgage loans				
13 Investments—other (attach schedule)	35,004,414	32,647,339	32,028,269	
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 page 16 of the instructions Also, see page 1, item I)	45,303,118	43,243,821	46,764,887	
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)				
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Organizations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds	45,303,118	43,243,821		
30 Total net assets or fund balances (see page 17 of the instructions)	45,303,118	43,243,821		
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	45,303,118	43,243,821		

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	45,303,118
2 Enter amount from Part I, line 27a	2	(2,059,297)
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	43,243,821
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30	6	43,243,821

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 SEE SCHEDULE 3	P	VARIOUS	2003
b			
c			
d			
e			
(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 4,003,346		4,006,847	(3,501)
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) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			(3,501)
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 (3,501)
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 pages 13 and 17 of the 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 organization liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the organization does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see page 17 of the 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))
2002	2,015,197	51,824,429	0.0389
2001	2,803,726	55,655,701	0.0504
2000	2,991,478	58,021,646	0.0516
1999	2,829,304	54,914,344	0.0515
1998	2,506,567	48,992,644	0.0512
2 Total of line 1, column (d)			2 0.2436
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 .04872
4 Enter the net value of noncharitable-use assets for 2003 from Part X, line 5			4 47,134,228
5 Multiply line 4 by line 3			5 2,296,380
6 Enter 1% of net investment income (1% of Part I, line 27b).			6 2,671
7 Add lines 5 and 6			7 2,299,051
8 Enter qualifying distributions from Part XII, line 4			8 2,315,786

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 on page 17.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 — see page 17 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling letter: _____ (attach copy of ruling letter if necessary - see instructions)		
b	Domestic organizations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	2,671
c	All other domestic organizations 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	
3	Add lines 1 and 2	3	2,671
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	2,671
6	Credits/Payments		
a	2003 estimated tax payments and 2002 overpayment credited to 2003	6a	11,551
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	11,551
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	8,880
11	Enter the amount of line 10 to be Credited to 2004 estimated tax ▶ 3,000 Refunded ▶	11	5,880

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the organization attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 18 of the instructions for definition)? <i>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 organization in connection with the activities</i>		X
c Did the organization file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the organization ▶ \$ <u>N/A</u> (2) On organization managers ▶ \$ <u>N/A</u>		
e Enter the reimbursement (if any) paid by the organization during the year for political expenditure tax imposed on organization managers ▶ \$ <u>N/A</u>		
2 Has the organization engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>		X
3 Has the organization made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		X
4a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		X
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?	X	
7 Did the organization have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	X	
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶ <u>OHIO</u>		
b If the answer is "Yes" to line 7, has the organization furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	X	
9 Is the organization claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2003 or the taxable year beginning in 2003 (see instructions for Part XIV on page 25)? <i>If "Yes," complete Part XIV.</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>		X
11 Did the organization comply with the public inspection requirements for its annual returns and exemption application? Web site address ▶ <u>N/A</u>	X	
12 The books are in care of ▶ <u>ISRAEL HENRY BEREN CHARITABLE TRUST</u> Telephone no. ▶ <u>316-265-3311</u> Located at ▶ <u>WICHITA, KANSAS</u> ZIP+4 ▶ <u>67208</u>		
13 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 ▶ 13 <u>N/A</u>		

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.

	Yes	No
1a During the year did the organization (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the organization agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 page 19 of the instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	N/A
c Did the organization 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 2003? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the organization was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2003, did the organization have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2003? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20 _____, 20 _____, 20 _____, 19 _____		
b Are there any years listed in 2a for which the organization 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 page 19 of the instructions) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2b	N/A
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 _____, 19 _____		
3a Did the organization hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2003 as a result of (1) any purchase by the organization 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 organization had excess business holdings in 2003) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3b	N/A
4a Did the organization invest during the year any amount in a manner that would jeopardize its charitable purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4a	X
b Did the organization 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 2003? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	4b	X
5a During the year did the organization pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 53.4945-5 or in a current notice regarding disaster assistance (see page 20 of the instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	5b	N/A
c If the answer is "Yes" to question 5a(4), does the organization claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
6a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If you answered "Yes" to 6b, also file Form 8870.	6b	X

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 page 20 of the instructions):

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ROBERT M. BEREN 13840 LE MANS WAY PALM BEACH GARDENS, FL 33410	TRUSTEE 2	NONE	NONE	NONE
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----

2 Compensation of five highest-paid employees (other than those included on line 1 — see page 20 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----

Total number of other employees paid over \$50,000 **NONE**

3 Five highest-paid independent contractors for professional services — (see page 20 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----

Total number of others receiving over \$50,000 for professional services **NONE**

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 page 21 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>NONE</u>	
2	
3 All other program-related investments See page 21 of the instructions	
Total. Add lines 1 through 3	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 21 of the 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 9,468,627
b Average of monthly cash balances	1b 5,245,328
c Fair market value of all other assets (see page 22 of the instructions)	1c 33,138,053
d Total (add lines 1a, b, and c)	1d 47,852,008
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e
2 Acquisition indebtedness applicable to line 1 assets	2
3 Subtract line 2 from line 1d	3 47,852,008
4 Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see page 23 of the instructions)	4 717,780
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 47,134,228
6 Minimum investment return. Enter 5% of line 5	6 2,356,711

Part XI Distributable Amount (see page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here <input type="checkbox"/> and do not complete this part)	
1 Minimum investment return from Part X, line 6	1 2,356,711
2a Tax on investment income for 2003 from Part VI, line 5	2a 2,671
b Income tax for 2003 (This does not include the tax from Part VI)	2b
c Add lines 2a and 2b	2c 2,671
3 Distributable amount before adjustments Subtract line 2c from line 1	3 2,354,040
4a Recoveries of amounts treated as qualifying distributions	4a
b Income distributions from section 4947(a)(2) trusts	4b
c Add lines 4a and 4b	4c
5 Add lines 3 and 4c	5 2,354,040
6 Deduction from distributable amount (see page 23 of the instructions)	6
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 2,354,040

Part XII Qualifying Distributions (see page 23 of the 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 2,315,786
b Program-related investments — Total from Part IX-B	1b
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2
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 2,315,786
5 Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 24 of the instructions)	5 2,671
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6 2,313,115

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 page 24 of the instructions)

	(a) Corpus	(b) Years prior to 2002	(c) 2002	(d) 2003
1 Distributable amount for 2003 from Part XI, line 7				2,354,040
2 Undistributed income, if any, as of the end of 2002				
a Enter amount for 2002 only				
b Total for prior years 20____, 20____, 19____				
3 Excess distributions carryover, if any, to 2003				
a From 1998				
b From 1999				
c From 2000			158,333	
d From 2001			50,249	
e From 2002				
f Total of lines 3a through e	208,582			
4 Qualifying distributions for 2003 from Part XII, line 4 ▶ \$ 2,315,786				
a Applied to 2002, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see page 24 of the instructions)				
c Treated as distributions out of corpus (Election required — see page 24 of the instructions)				
d Applied to 2003 distributable amount				2,315,786
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2003 (If an amount appears in column (d), the same amount must be shown in column (a).)	38,254			38,254
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	170,328			
b Prior years' undistributed income Subtract line 4b from line 2b				
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				
d Subtract line 6c from line 6b. Taxable amount — see page 24 of the instructions				
e Undistributed income for 2002. Subtract line 4a from line 2a. Taxable amount — see page 24 of the instructions				
f Undistributed income for 2003 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2004				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(E) or 4942(g)(3) (see page 25 of the instructions)				
8 Excess distributions carryover from 1998 not applied on line 5 or line 7 (see page 25 of the instructions)				
9 Excess distributions carryover to 2004. Subtract lines 7 and 8 from line 6a	170,328			
10 Analysis of line 9:				
a Excess from 1999				
b Excess from 2000			120,079	
c Excess from 2001			50,249	
d Excess from 2002				
e Excess from 2003				

Part XIV Private Operating Foundations (see page 25 of the 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 2003, enter the date of the ruling **NOT APPLICABLE**

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) 2003	(b) 2002	(c) 2001	(d) 2000	
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 page 25 of the 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).)

NONE

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

NONE

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

Check here if the organization only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the organization makes gifts, grants, etc. (see page 25 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed.

N/A

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

N/A

c Any submission deadlines:

N/A

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

N/A

Part XV Supplementary Information (continued)

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

Recipient	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
Name and address (home or business)				
<p>a Paid during the year</p> <p>SEE SCHEDULE 4 ATTACHED</p>		PUBLIC	CAPITAL EXPENDITURES	2,315,000
Total				3a 2,315,000
b Approved for future payment				
Total				3b

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 page 26 of the 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	128,084	
4 Dividends and interest from securities			14	313,532	
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			18	(3,501)	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a SEE SCH 1 ATTACHED			18	(138,939)	
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)				299,176	
13 Total. Add line 12, columns (b), (d), and (e) 13					299,176

(See worksheet in line 13 instructions on page 26 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 organization's exempt purposes (other than by providing funds for such purposes). (See page 26 of the instructions)
	NOT APPLICABLE

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

- 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 organization to a noncharitable exempt organization of:
 - (1) Cash 1a(1) X
 - (2) Other assets 1a(2) X
 - b Other Transactions
 - (1) Sales of assets to a noncharitable exempt organization 1b(1) X
 - (2) Purchases of assets from a noncharitable exempt organization 1b(2) X
 - (3) Rental of facilities, equipment, or other assets 1b(3) X
 - (4) Reimbursement arrangements 1b(4) X
 - (5) Loans or loan guarantees 1b(5) X
 - (6) Performance of services or membership or fundraising solicitations 1b(6) X
 - c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c X
 - 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 organization. If the organization 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 organization 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

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 or fiduciary) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: Israel Henry Beren Date: 11/12/04 Title: TRUSTEE

Sign Here

Paid Preparer's Use Only	Preparer's signature: <u>[Signature]</u>	Date: <u>11/11/04</u>	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP code: <u>KPMG, LLP</u> <u>345 RIVERVIEW, SUITE 100, WICHITA, KS 67203</u>	EIN: <u>13-5565207</u>	Preparer's SSN or PTIN (See Signature on page 28 of the instructions): <u>512-78-0498</u>
		Phone no: <u>316-267-8341</u>	

ISRAEL HENRY BEREN CHARITABLE TRUST
Schedule 1

48-6337836
Form 990-PF, 2003

PART I, Line 1: Contributions, gifts, grants, etc., received:

Israel Henry Beren Estate 0

0

PART I, Line 11: Other Income:

Ascot Partner, L.P. - #13-3693341
Ordinary Loss (138,939)

(138,939)

PART I, Line 16b: Accounting Expense:

KPMG Peat Marwick 725

725

PART I, Line 16c: Other Professional Fees:

First Manhattan - Advisory Fees 35,212

35,212

PART I, Line 18: Taxes:

Ohio Franchise Tax 0
Federal Income Tax 7,100
Foreign Tax Paid 375

7,475

PART I, Line 23: Other Expenses:

Freight & Postage 61
Office Supplies 0

61

ISRAEL HENRY BEREN CHARITABLE TRUST

48-6337836

Schedule 2

Form 990-PF, 2003

BEGINNING OF YEAR	END OF YR BOOK VALUE	END OF YR MKT VALUE
----------------------	-------------------------	------------------------

PART II, Line 10a: Investments - U.S. & state government obligations:

U S Treasury Bill-Due 2/6/03	600,000	598,285	0	0
U.S. Treasury Bill-Due 2/5/04	450,000	0	448,009	449,627

598,285	448,009	449,627
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PART II, Line 10b: Investments - corporate stock:

Stocks:	# Shares			
Exxon/Mobil	60,000	911,796	911,796	2,460,000
Peoples Bancorp Inc.	24,136	203,322	203,322	712,254
Peoples Bancorp Inc.	incl above	20,446	20,446	incl above
Chevron/Texaco Inc.	30,285	1,197,102	1,197,102	2,616,321
A T & T Corp	2,000	26,505	0	0
Abbott Laboratories	4,500	136,756	175,746	209,700
Altria Group Inc. (Phillip Morris	4,000	140,342	180,620	217,680
Arbitron Inc	3,000	118,973	89,229	125,160
Baxter International Inc	4,500	137,799	0	0
Bell South Corporation	6,000	78,000	78,000	169,800
Berkshire Hathaway	5	340,548	340,548	421,250
Cardinal Health Inc.	2,000	0	126,663	122,320
Colgate Palmolive	3,500	0	182,626	175,175
Comcast Corp	3,235	44,364	0	0
Diebold Inc	5,000	195,972	195,972	269,350
Enpro Inds Inc Com	800	4,450	0	0
Equifax Inc	4,000	112,238	133,754	122,500
Fair Isaac & Co Inc	3,000	114,113	114,113	147,480
First Data Corp	5,000	0	200,003	205,450
Gannett Co Inc. Del	2,000	0	153,717	178,320
B F Goodrich Co	5,000	115,365	0	0
HCA Healthcare Co Com	5,500	0	164,318	236,280
Hartford Financial Services Gr	2,500	147,857	147,857	147,575
IMS Health Inc	8,500	166,108	0	0
IBM	1,200	103,233	103,233	111,216
Kerr McGee Corp	3,000	0	122,079	139,470
Kimberly Clark Corp	3,000	174,139	174,139	177,270
Marsh & McClennan Co Inc	3,000	148,449	148,449	143,670
McCormick & Co Inc. Non Voti	10,000	207,349	207,349	301,000
Nestle Sa-Sponsored	2,000	111,962	111,962	124,920
Oxford Health Plans Inc.	3,000	0	116,056	130,500
Pfizer Inc	5,000	192,890	192,890	176,650
SBC Communication Inc.	7,500	148,120	0	0
Verizon	5,000	119,625	119,625	175,400
Wells Fargo & Co New	2,500	113,804	113,804	147,225

5,531,627	6,025,418	10,163,936
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ISRAEL HENRY BEREN CHARITABLE TRUST
Schedule 2

48-6337836
Form 990-PF, 2003

PART II, Line 10c: Investments - corporate bonds:

State of Israel Bonds	50,000	25,000	25,000
	50,000	25,000	25,000

PART II, Line 13: Investments - other:

Ariel Fund Limited	2,000,000	2,000,000	3,240,673
Ascot Partners, L.P	8,351,789	9,104,932	9,104,932
Ascot Partners, L.P - Unrealized Gain	3,393	3,393	3,393
Caduceus Capital, Ltd	3,000,000	0	0
Centurion Overseas Fund Ltd.	4,500,000	4,500,000	6,994,219
Chilton International, Ltd	2,000,000	2,000,000	2,168,313
Chilton New Era International, Ltd.	2,000,000	2,000,000	2,333,596
CLSP Overseas, Ltd.	2,000,000	2,000,000	2,369,012
First Bio Med Ltd.	3,000,000	3,000,000	3,658,891
Gift Certificates.com	18,431	18,431	18,431
Gotham Partners International	180,801	168,553	26,620
Lancer Offshore Inc.	5,000,000	5,000,000	0
Moore Technology Venture	950,000	852,030	81,302
Andor (Pequot) Technology Offshore Fund, Inc	2,000,000	2,000,000	2,028,887
	35,004,414	32,647,339	32,028,269

ISRAEL HENRY BEREN CHARITABLE TRUST

48-6337836

Schedule 3

Form 990-PF, 2003

DESCRIPTION	NUMBER OF UNITS	DATE ACQUIRED	DATE SOLD	SALES PROCEEDS	COST & EXPENSES OF SALE	SHORT-TERM GAIN/(LOSS)	LONG-TERM GAIN/(LOSS)
PEOPLES BANCORP - CASH-IN-LIEU		VARIOUS	9/3/2003	9 82	-	9 82	
CADUCEUS CAPITAL LTD	458.42	11/1/2001	1/1/2003	2,162,168.25	3,000,000.00		(837,831.75)
STATE OF ISRAEL BONDS	25000	VARIOUS	7/3/2003	25,000.00	25,000.00		
GOTHAM PARTNERS INTERNATIONAL	13.388	12/31/1998	9/5/2003	12,078.08	12,247.77		(169.69)
MOORE TECHNOLOGY FUND	0	12/31/2000	9/2/2003	97,970.00	97,970.00		
FIRST MANHATTAN COMPANY -SEE ATTACHED SCHEDULE 3A	STCG	VARIOUS	2003	234,414.26	229,577.78	4,836.48	
FIRST MANHATTAN COMPANY -SEE ATTACHED SCHEDULE 3A	LTCG	VARIOUS	2003	712,314.39	642,051.16		70,263.23
ASCOT PARTNERS, L.P. STCG ID# 13-3693341	K-1		2003	759,391.00		759,391.00	
				4,003,345.80	4,006,846.71	764,227.48	(767,728.39)
							(3,500.91)

ISRAEL HENRY BEREN CHARITABLE TRUST
Schedule 3A

48-6337836
Form 990-PF, 2003

DESCRIPTION	NUMBER OF UNITS	DATE ACQUIRED	DATE SOLD	SALES PROCEEDS	COST & EXPENSES OF SALE	SHORT-TERM GAIN/(LOSS)	20% LONG-TERM GAIN/(LOSS)
BF GOODRICH	1,000	11/20/2002	8/7/2003	21,339 20	15,280 00	6,059 20	
BAXTER INTERNATIONAL INC	500	11/27/2002	11/20/2003	13,305 11	15,122 99	(1,817 88)	
US TREASURY BILLS	50,000	4/30/2003	7/21/2003	49,963 33	49,838 54	124 79	
US TREASURY BILLS	150,000	8/20/2003	12/15/2003	149,806 62	149,336 25	470 37	
				234,414 26	229,577 78	4,836 48	
ARBITRON INC	500	2/22/2002	12/18/2003	20,440 49	14,871 57		5,568 92
ARBITRON INC	500	2/22/2002	12/29/2003	20,726 42	14,871 57		5,854.85
AT&T CORP	3	7/1/1995	3/27/2003	49 31	94 19		(44 88)
AT&T CORP	1,997	7/1/1995	3/27/2003	32,826 24	26,410 96		6,415 28
BAXTER INTERNATIONAL INC	3,000	7/19/2002	11/10/2003	79,830 63	97,952 45		(18,121 82)
BAXTER INTERNATIONAL INC	1,000	11/1/2002	11/10/2003	26,610 21	24,723 80		1,886 41
B F GOODRICH CO	4,000	1/29/2002	8/7/2003	85,356 81	100,084 68		(14,727.87)
COGNIZANT TECHNOLOGY SOLUTIONS	C-I-L	VARIOUS	2/21/2003	42 74	0 00		42 74
COGNIZANT TECHNOLOGY SOLUTIONS	391	1/14/2002	2/25/2003	26,580 77	30,296 14		(3,715 37)
COGNIZANT TECHNOLOGY SOLUTIONS	163	1/17/2002	2/25/2003	11,080 98	12,305 45		(1,224.47)
COMCAST CORP CL A	4	7/1/1995	3/27/2003	114 17	157 65		(43 48)
COMCAST CORP CL A	3,231	7/1/1995	3/27/2003	92,218 63	44,206 58		48,012.05
ENPRO INDS INC COM	800	1/29/2002	8/7/2003	2,942 84	4,449 93		(1,507.09)
IMS HEALTH INC	4,734	1/14/2002	9/29/2003	98,167 71	87,831 29		10,336.42
IMS HEALTH INC	1,971	1/17/2002	9/29/2003	40,872 11	35,674 64		5,197.47
SBC COMMUNICATIONS INC	7,382	7/1/1995	8/7/2003	171,709 58	146,338.10		25,371 48
SBC COMMUNICATIONS INC	118	7/1/1995	8/7/2003	2,744 75	1,782 16		962.59
				712,314 39	642,051 16		70,263.23
TOTAL GAINS/LOSS				946,728 65	871,628 94	4,836 48	70,263.23
							75,099 71

ISRAEL HENRY BEREN CHARITABLE TRUST
Schedule 4

48-6337836
Form 990-PF, 2003

"X" = Written ackn rec'd
"NN" = Written ackn not necessary

CONTRIBUTIONS:		PURPOSE	
1/21/2003 #1181	BEIT MORASHA OF JERUSALEM 3 HA'ASKAN ST KIRYAT MORIAH JERUSALEM 93780, ISRAEL	100,000 00 X	CAPITALIZE CHAIR, ACADEMIC CENTER
12/19/2003 #1196	CHABAD LUBAVITCH OF NORTH BROWARD 1500 N STATE ROAD 7 MARGATE, FL 33063	30,000 00 X	RENOVATION OF EDUCATIONAL INSTITUTE
12/19/2003 #1195	JERUSALEM COLLEGE OF TECHNOLOGY 21 HAVAAD HALEUMI ST POB 16031 JERUSALEM, 91160 ISRAEL	350,000 00 X	DORMITORY
12/19/2003 #1193	NER ISRAEL RABBINICAL COLLEGE 400 MT WILSON LANE BALTIMORE, MD 21208	125,000 00 X	SCHOLARSHIPS
3/19/2003 #1183	UNITED LUBAVITCHER YESHIVOTH	75,000 00 X	Torah Center
12/4/2003 #1188 #1160	433 CROWN STREET BROOKLYN, NY 11225	100,000 00 X	Torah Center
1/21/2003 #1182	MESIVTA YESHIVA-RABBI CHAIM BERLIN 1605 CONEY ISLAND AVENUE BROOKLYN, NY 11230	5,000 00 X	2002 ANNUAL CAMPAIGN
12/19/2003 #1197	YESHIVA UNIVERSITY ISRAEL HENRY BEREN CHARITABLE TRUST ENDOWMENTS 500 WEST 185TH STREET NEW YORK, NY 10033-3299	1,530,000.00 X	Endowment Fund

TOTAL CONTRIBUTIONS **2,315,000 00**

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note: Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print	Name of Exempt Organization	Employer identification number
	ISRAEL HENRY BEREN CHARITABLE TRUST	48-6337836
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P O box, see instructions	
	P.O. BOX 20380 WICHITA, KS 67208-2038	

Check type of return to be filed (file a separate application for each return):

- | | | |
|---|--|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T(sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the **whole group**, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until **AUGUST 16**, **2004**, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶ calendar year **2003** or

▶ tax year beginning _____, _____, and ending _____, _____.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period


3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ **4,451**

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ **4,451**

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **NONE**

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶  Title ▶ **CPA** Date ▶ **5/12/04**

For Paperwork Reduction Act Notice, see instruction

• If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box

Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization ISRAEL HENRY BEREN CHARITABLE TRUST	Employer identification number 48-6337836
	Number, street, and room or suite no. If a P.O. box, see instructions P.O. BOX 20380	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions WICHITA, KS 67208-2038	

Check type of return to be filed (File a separate application for each return):

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form-8868.

• If the organization does **not** have an office or place of business in the United States, check this box

• If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the **whole** group, check this box If it is for **part** of the group, check this box and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until **NOVEMBER 15, 2004**
- 5 For calendar year **2003**, or other tax year beginning _____ and ending _____
- 6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period
- 7 State in detail why you need the extension **TAXPAYER REQUESTS ADDITIONAL TIME TO GATHER THIRD PARTY INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.**


8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ **4,451**

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ **4,451**

c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ **NONE**

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature  Title **CPA** Date **8/10/04**

Notice to Applicant - To Be Completed by the IRS

- We have approved this application. Please attach this form to the organization's return
- We have **not** approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have **not** approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We **cannot consider** this application because it was filed after the due date of the return for which an extension was requested.
- Other _____

Director _____ By _____ Date _____

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print	Name KPMG LLP
	Number and street (include suite, room, or apt. no.) Or a P.O. box number 345 RIVERVIEW, SUITE 100
	City or town, province or state, and country (including postal or ZIP code) WICHITA, KS 67203

