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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust OMB No 1545-0052 Form **990-PF** Treated as a Private Foundation Department of the Treasury Note The foundation may be able to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For calendar year 2012 or tax year beginning , and ending Name of foundation A Employer identification number BEREN SEA FOUNDATION 46-0800568 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 2020 N. BRAMBLEWOOD ST 316-265-3311 City or town, state, and ZIP code C If exemption application is pending, check here WICHITA, KS 67206 G Check all that apply: X Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization; E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 1,083 . (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (a) Revenue and expenses per books (c) Adjusted net (d) Disbursements for charitable purposes (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) income income (cash basis only) 396,848 N/A Contributions, gifts, grants, etc., received 2 Check if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 1 STATEMENT 3 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 0 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances ر ِ. b Less Cost of goods sold Ö 5 ZÜ13 O c Gross profit or (loss) 11 Other income 396,849 12 Total. Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees

1,774

1.774

8,846.

386,229

388,003

0

0.

0

1.

N/A

17 Interest and Administrative 18 Taxes 19 20 Operating

Depreciation and depletion Occupancy

c Other professional fees

21 Travel, conferences, and meetings

22 Printing and publications 23 Other expenses

24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid

26 Total expenses and disbursements. Add lines 24 and 25

27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions.

STMT 2

Form 990-PF (2012)

1,774.

<u>1,</u>774.

386,229.

388,003.

46-0800568

Form **990-PF** (2012)

Form 990-PF (2012)

BEREN SEA FOUNDATION

	EN SEA FOUNDATI		ne .		46-080	0568	_ Page
'(a) List and desc	ribe the kind(s) of property sold (e.g., real estate,) How acquired P - Purchase	(c) Date acquired	(d) Date	
	arehouse; or common stock, 200	shs. MLC Co.)		D - Donation	(mo., day, yr.)	(mo., da	y, yr.)
1a NO	NE						
b NO	NE			-			
 d		· · · · · · · · · · · · · · · · · · ·					
e							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense o			(h) Gain or (loss) (e) plus (f) minus (
a							
b							
C			 				
_d							
Complete only for accets shown	l hand owned	by the foundation on 12/2:	1/60		(D) O (O-1 (b)		_
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of c over col. (j), if	ol. (ı)		(I) Gains (Col. (h) gain bl. (k), but not less than Losses (from col. (l	ı -0-) or	
<u> </u>	as of 12/3 //03	Over cor. (j), ii	ally	-			
_a b							
C							
d							
e					· · · · · · · · · · · · · · · · · · ·		
2 Capital gain net income or (net ca		nter in Part I, line 7 -0- in Part I, line 7	`	2			
3 Net short-term capital gain or (lo: if gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5		`				
If (loss), enter -0- in Part I, line 8		D 1 - 17	51-4 1-	3			
	Inder Section 4940(e) f				come	/ -	
(For optional use by domestic private	•	on 4940(a) tax on net inves	stment inco	me.)		N/A	
If section 4940(d)(2) applies, leave t	nis part diank.						
Was the foundation liable for the sec			base perio	d? .		Yes	☐ No
If "Yes," the foundation does not qua 1 - Enter the appropriate amount in			ng anv entr	ies		-	
(a)	(b)			(c)	D.1.1	(d)	
Base periód years Calendar year (or tax year beginni	سينت كالمناس المساهمين المالية	distributions Net va	lue of nonc	haritable-use asset	s (col. (b) div	ùtion ratio ded by col.	(c))
2011							
2010							
2009							
2008							
2007						·	
2 Total of line 1, column (d)					2		
3 Average distribution ratio for the	5-year hase period - divide the to	al on line 2 by 5, or by the	number of	vears			
the foundation has been in existe	•	ar on mile 2 by 6, or by the		youro	3		
4 Enter the net value of noncharitat	ole-use assets for 2012 from Part	X, line 5			4		
Multiply line 4 by line 3					5		
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)				6		
7 Add lines 5 and 6					7		
3 Enter qualifying distributions from	n Part XII, line 4				8		
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI, l	ine 1b, and complete that	part using a	1% tax rate.		-	

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	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see II	nstru	ICTIO	ns)
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)		1			_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔛 and enter 1%	1	 			0.
	of Part 1, line 27b					
	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	-			<u> 0 </u>
3	Add lines 1 and 2	3	<u> </u>			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	 			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	 			0.
6	Credits/Payments:					
	2012 estimated tax payments and 2011 overpayment credited to 2012	4	ļ ,			
	Exempt foreign organizations - tax withheld at source	\dashv				
	E Tax paid with application for extension of time to file (Form 8868)	-				
	Backup withholding erroneously withheld 6d	┥ .	İ			^
_	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	1	-		0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	 			
11 P=	Enter the amount of line 10 to be: Credited to 2013 estimated tax ► Refunded ► art VII-A Statements Regarding Activities	1. 11	Ш			
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervei	ne in		Γ -	Yes	No
10	any political campaign?			1a	1.00	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish			 		<u> </u>
	distributed by the foundation in connection with the activities.					
c	Did the foundation file Form 1120-POL for this year?			1c	-	х
	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	•			1	
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?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		-	3	-	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	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 of the state	te law				
	remain in the governing instrument?			6_	X	—
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	├
	If "Yes," complete Part II, col. (c), and Part XV.			}		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	KS				ļ	
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	X	 -
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call the foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call the foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call the foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call the foundation within the foundation wi	lendar		_	1	
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	-	X
10_	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	<u> </u>	X

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Pa	rt 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		X
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	'	_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ THE FOUNDATION Telephone no. ▶ 316 –	<u> 265-3</u>	311	
	Located at ► 2020 N. BRAMBLEWOOD ST, WICHITA, KS ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			\cdot
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country			
Pa	rt 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 foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(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	ļ		
	termination of government service, if terminating within 90 days.)			
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)?	, <u>1b</u>		
	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 2012?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):	' -		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2012?	1		l
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
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	1		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	۵.		
	statement - see instructions.) N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		İ	
_	Dath to a data had a section of the			
за	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No	ŀ		
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after		l	
	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,	۱		
	Form 4720, to determine if the foundation had excess business holdings in 2012.) N/A	3b	-	v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
þ	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 2012?	_4b	<u> </u>	X

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on 'propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				Ì
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	☐ Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations		ŀ	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	еге				1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ned			
expenditure responsibility for the grant?	N	⊺/A □ Ye	s 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?		Ye	s X No	-	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	-	L	6b	X
If "Yes" to 6b, file Form 8870				- 1	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	es 🗶 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/		
1 List all officers, directors, trustees, foundation managers'and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense ount, other
(a) Name and address	to position	enter -0-)	and deterred compensation	al	lowances
ADAM E. BEREN	PRESIDENT		ł		
2020 N BRAMBLEWOOD					
WICHITA, KS 67206	1.00	0.	0.		0.
ADAM E. BEREN	SECRETARY				
2020 N BRAMBLEWOOD					
WICHITA, KS 67206	1.00	0.	0.		0.
ELLEN BEREN	TREASURER			1	
1739 DUCK CROSS COVE		_	_	ŀ	
WICHITA, KS 67206	1.00	0.	0.		<u> </u>
O Company of the bighest maid amplement (athout them there in	hudad an line 4). If name	ontor "NONE "			
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter MONE."	(d) Contributions to	10) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	acc	ount, other
NONE	devoted to position		compensation	al	lowances
NONE					
		 			
	1			1	
				 	
	1			1	
		1		 	
	1			1	
				 	
	1			1	
Total number of other employees paid over \$50,000			▶ [0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ition Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ente	r "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 statis number of organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 N/A		
2		
3		
4		
Dort IV P O		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions 3		
Total Add lines 1 through 3	b	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	I T	· · · · · · · · · · · · · · · · · · ·
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	0. 332.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	332.
е	Reduction claimed for blockage or other factors reported on lines 1a and		_
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	332.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	327.
6	Minimum investment return. Enter 5% of line 5	6	16.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	16.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	16.
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	16.
P	art 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	388,003.
p	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:		
а	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 -	-388,003
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	388,003.
	$\textbf{Note}. \ \ \textbf{The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation}$	qualifies for t	the section
	40.40(a) radication of tay in those years		

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Part XIII Undistributed Income (see instructions)

1. Dietzibutable amount for 2012 from Part VI	
1 Distributable amount for 2012 from Part XI,	1.6
line 7	16.
2 Undistributed income, if any, as of the end of 2012	
a Enter amount for 2011 only	<u> </u>
b Total for prior years:	
3 Excess distributions carryover, if any, to 2012:	<u> </u>
a From 2007	
b From 2008	
c From 2009	
d From 2010	
e From 2011	
f Total of lines 3a through e	,
4 Qualifying distributions for 2012 from	
Part XII, line 4: ►\$ 388,003.	
a Applied to 2011, but not more than line 2a	
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 2012 distributable amount	16.
e Remaining amount distributed out of corpus 387, 987.	<u> </u>
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.
6 Enter the net total of each column as indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	
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 O.	
d Subtract line 6c from line 6b. Taxable	-
amount - see instructions 0 •	
e Undistributed income for 2011. Subtract line	
4a from line 2a. Taxable amount - see instr.	
f Undistributed income for 2012. Subtract	
lines 4d and 5 from line 1. This amount must	
be distributed in 2013	0.
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3)	
8 Excess distributions carryover from 2007	
not applied on line 5 or line 7	
9 Excess distributions carryover to 2013.	
Subtract lines 7 and 8 from line 6a 387, 987.	
O Analysis of line 9:	
a Excess from 2008	
b Excess from 2009	
c Excess from 2010	
d Excess from 2011	
e Excess from 2012 387, 987.	rm 990-DE (2012)

Part XIV Private Operating Fo	CA FUUNDATI		-A guestion 9)	N/A	0-0800306 rage
1 a If the foundation has received a ruling or		 	7A, question sy	N/A	· · · · · · · · · · · · · · · · · · ·
foundation, and the ruling is effective for					
· · · · · · · · · · · · · · · · · · ·	•	-	un continu	4942(j)(3) or	4942(j)(5)
b Check box to indicate whether the found		ing roundation described	Prior 3 years	1 4342(J)(3) UI	4942(])(3)
2 a Enter the lesser of the adjusted net	Tax year (a) 2012	(b) 2011	(c) 2010	(d) 2009	e) Total
income from Part I or the minimum	(4) 2012	(0) 2011	(0) 20 10	(4) 2000	(0) 10(2)
investment return from Part X for					
each year listed				- 	
b 85% of line 2a	<u></u>	 			
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:	l		}		
(1) Total support other than gross	i				
investment income (interest, dividends, rents, payments on	l		ŀ		
securities loans (section	l				
512(a)(5)), or royalties)	,				
(2) Support from general public and 5 or more exempt	l		}		
organizations as provided in	l		}		
section 4942(j)(3)(B)(ui)					
(3) Largest amount of support from	l				
an exempt organization	<u> </u>			+	
Part XV Supplementary Info	rmation (Comple	to this part only	if the foundation	had \$5,000	or more in accete
at any time during the			ii tile iodiidatioi	11 11aa 45,000	or more in assets
1 Information Regarding Foundation		,			
a List any managers of the foundation who	-	than 2% of the total cont	ributions received by th	e foundation befor	e the close of any tax
year (but only if they have contributed m					
SEE STATEMENT 4					
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large port	on of the ownersh	nip of a partnership or
NONE	-				
2 Information Regarding Contribution	on, Grant, Gift, Loan	. Scholarship. etc Pr	rograms:		
Check here ► X if the foundation or				not accept unsolic	ated requests for funds. If
the foundation makes gifts, grants, etc. (see instructions) to indi	viduals or organizations u	inder other conditions, o	complete items 2a,	b, c, and d.
a The name, address, and telephone numb	er or e-mail of the perso	on to whom applications :	should be addressed:		
h. The form is which applications should be	o cultimitted and informa	ation and materials their st	hould include:		· · · · · · · · · · · · · · · · · · ·
b The form in which applications should be	= submittee and informa	adon and materials they s	noula include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields.	kinds of institutions, or	other factors:	
	,				

3 Grants and Contributions Paid During the Ye	ar or Approved for Future	Payment		_
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
PEF ISRAEL ENDOWMENT FUNDS, INC	NONE	PUBLIC	GALLA THE NORTHERN	
317 MADISON AVE			GALILEE DEVELOPMENT	
NEW YORK, NY 10017		j	FOUNDATION	386,229
				1
				П
			•	
_				
Total		l	▶ 3a	386_229
b Approved for future payment				
NONE				
			İ	
İ				
Total		L	▶ 3b	0

Excluded by section 512, 513, or 514

Analysis of Income-Producing Activities Part XVI-A

Enter gross amounts unless otherwise indicated.		Unrelated business income			ided by section 512, 513, or 514	(e)	
1 Program service rev		(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
		1					
			 		-		
			- ·	 -	<u> </u>		
f				•			
g Fees and contrac	ets from government agencies						
2 Membership dues a	nd assessments						
3 Interest on savings a	and temporary cash						
investments				14	1.		
4 Dividends and intere	est from securities						
5 Net rental income or	(loss) from real estate:						
a Debt-financed pr	operty						
b Not debt-finance	d property						
6 Net rental income or	(loss) from personal						
property		į į					
7 Other investment inc	come						
8 Gain or (loss) from s	sales of assets other						
than inventory							
9 Net income or (loss)	from special events						
) from sales of inventory						
11 Other revenue							
a							
					7.11.		
		1 1					
е							
12 Subtotal. Add colum	ns (b), (d), and (e)		0.		1.	0.	
13 Total. Add line 12, c	olumns (b), (d), and (e)				13	0.	
	3 instructions to verify calculations:)						
	Relationship of Activities t						
······							
	below how each activity for which inco idation's exempt purposes (other than			contrit	outed importantly to the accor	nplishment of	
1110 1001	dation o exempt pur poods (ether than	by providing fur	ida for addit purposes).				
			·				
	-						
					· · · · · · · · · · · · · · · · · · ·		
					 		
		· -					
							
							
· ·							
							
							
		··					

Unrelated business income

Form 99		SEA FOUNDA			800568		age 1
Part	Exempt Organ		ers to and transactions an	nd Relationships With Nonc	naritable)	
1 Did			e following with any other organization	described in section 501(c) of		Yes	No
			section 527, relating to political organiz	ations?			
	nsfers from the reporting found	lation to a noncharitable e	exempt organization of:				
٠,	Cash				1a(1)	-	X
	Other assets er transactions:				1a(2)		X
	Sales of assets to a noncharita	shle evemnt organization			1b(1)		Х
	Purchases of assets from a no		nization		1b(2)		X
	Rental of facilities, equipment,				1b(3)		X
	Reimbursement arrangements				1b(4)		X
(5)	Loans or loan guarantees				1b(5)		X
	Performance of services or me				1b(6)		X
	aring of facilities, equipment, ma				10		X
				ays show the fair market value of the goo		ets,	
				in any transaction or sharing arrangeme	ent, show in		
(a) Line n	umn (d) the value of the goods, (b) Amount involved		icharitable exempt organization	(d) Description of transfers, transactions,	and charing an	anceme	nte
(4)	(E)//intodite intolled	<u> </u>	N/A	(a) Description of datasets, datasetions,	, all siaing air	argerne	
			41/ 22				
							
					<u> </u>		
		· · · · · · · · · · · · · · · · · · ·					
					· –		
2a Ist	he foundation directly or indirec	tly affiliated with, or relate	ed to, one or more tax-exempt organiza	tions described			
ın s	ection 501(c) of the Code (othe	r than section 501(c)(3))	or in section 527?		Yes	X] No
<u>b lf"\</u>	es," complete the following sch						
	(a) Name of org	ganization	(b) Type of organization	(c) Description of relati	ionship		
	N/A						
		.=					
				· · · · · · · · · · · · · · · · · · ·			
			irn, including accompanying schedules and st				_
Sign			r (other than taxpayer) is based on all informat		May the IRS of return with the	prepar	er
Here	MAL	an	V/-/3-2013	PRESIDENT	shown below	(see ins	۳,۳ N

Sigi	nature of officer or trustee	Date	Title	<u>a. / []</u>	_ LAI les NO	
•	Print/Type preparer's name	Preparer's signature	Date	Check ıf	PTIN	
Paid Preparer Use Only	BRIAN A. WILKINSON Firm's name ► GUTSCHENRITT	PER & JOHNSON, L.L	Self- employed self-		P00744871 48-0970195	
	Firm's address > 345 RIVERVI WICHITA, KS			Phone no. (316) 267-9213	
		·		<u> </u>	Form QQO_DE (2012)	

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2012

Name of the organization

BEREN SEA FOUNDATION

46-0800568

Organization type (check one)

Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization 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) and received from any one contributor, during the year, a contribution 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, Ine 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to 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 of \$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 Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

BEREN SEA FOUNDATION

46-0800568

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ADAM E. BEREN REVOCABLE TRUST 2020 N. BRAMBLEWOOD WICHITA, KS 67206	\$233,333.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ADAM & ELLEN BEREN 1729 DUCK CROSS COVE WICHITA, KS 67206	\$163,515.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Omnicash Omnicash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

BEREN SEA FOUNDATION

46-0800568

Part II	Noncash Property (see instructions) Use duplicate copies of Part II r	f 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
		- - - - \$	

Employer identification number

EREN S	EA FOUNDATION		46-0800568					
art III	year. Complete columns (a) through (e) and the total of exclusively religious, charitable, et Use duplicate copies of Part III if addition	c., contributions of \$1,000 or less for	c)(7), (8), or (10) organizations that total more than \$1,000 for tools completing Part III, enter the year. (Enter this information once)					
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
art I								
_ -	1							
		(e) Transfer of gif	it					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
art I	(1)							
		(e) Transfer of gif	nt					
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gif	ft					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
No. om art I	(b) Purpose of gift	(c) Use of grft	(d) Description of how gift is held					
	(e) Transfer of grft							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
-								
1								

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	IPORARY CA	SH I	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
BANK OF AMERICA						1.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CC	LUMN A				1.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS		ST-	(C) ADJUSTED NET INCOM		
ADVERTISING & PROMOTION TELEPHONE AMORTIZATION AMORTIZATION	1,497. 55. 0. 222.		0. 0. 0.			97. 55. 22.
TO FORM 990-PF, PG 1, LN 23	1,774.		0.		1,7	74.
FORM 990-PF DEPRECIATION OF	ASSETS NOT	HELD FOR	INV	ESTMENT	STATEMENT	3
DESCRIPTION		T OR BASIS		UMULATED RECIATION	BOOK VALU	E
ORGANIZATIONAL COSTS		7,985.		222.	7,7	63.
TOTAL TO FM 990-PF, PART II, I	LN 14	7,985.		222.	7,7	63.
	PART XV - L		RS		STATEMENT	4

NAME OF MANAGER

ADAM E. BEREN ADAM E. BEREN ELLEN BEREN

2012 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

5	Description	Date Acquired	Method	Life	en o	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ORGANIZATIONAL 1COSTS * TOTAL 990-PF PG 1 DEPR & AMORT	080112248		180M	42	985		0	7,985.	0	0	222.
228102 05-01-12						(D) - Asset disposed		*	*ITC Section 179 Salvage Bonus Commercial Revitalization Deduction	age Bonis Com	mercial Bevital	zation Deduction

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization 990-PF (Including Information on Listed Property)

► See separate instructions.

► Attach to your tax return.

Business or activity to which this form relates

OMB No 1545-0172

Attachment Sequence No 179

Identifying number

BEF	REN SEA FOUNDATION			FORM	1 99	90-I	PF PAGE	1	46-0800568
Par	rt Election To Expense Certain Proper	y Under Section 1	79 Note: If you	have any liste	ed pro	perty,	complete Part	V before y	ou complete Part I
1 N	Maximum amount (see instructions)							1	500,000.
2 T	otal cost of section 179 property place	d in service (see	instructions)					2	
3 Threshold cost of section 179 property before reduction in limitation 3									2,000,000.
4 F	Reduction in limitation. Subtract line 3 fi	rom line 2. If zero	or less, enter	-0-			•	4	
5 D	ollar limitation for tax year. Subtract line 4 from line	1 if zero or less, enter	-0- If married filin	g separately, see i	nstruction	ons		5	
6	(a) Description of pro	perty		(b) Cost (busines	ss use o	nly)	(c) Elected	l cost	
-									
			, I.,						
	usted property Enter the amount from	•			L	7			-
	otal elected cost of section 179 proper	•	s in column (c)	, lines 6 and 7	7			8	
	entative deduction. Enter the smaller		<u>.</u>	_				9	
	Carryover of disallowed deduction from	•				_		10	
	Business income limitation. Enter the sn		•		•	ne 5	•	11	<u> </u>
	Section 179 expense deduction Add In	•			ъ г	40		12	<u> </u>
	Carryover of disallowed deduction to 20 : Do not use Part II or Part III below for					13			<u> </u>
Par			•		a lieta	d prop	orty)		
	special depreciation allowance for quali			-					
	ne tax year	nea property (ou	ier man listed	property) pia	cea in	servic	e during	44	
	Property subject to section 168(f)(1) elec	stion					•	14	
	Other depreciation (including ACRS)	Stion		•				15 16	
Par		ınclude listed pi	roperty.) (See	instructions.)				1 10	
			···········	tion A					
17 N	MACRS deductions for assets placed in	service in tax ve	ears beginning	before 2012				17	
		_			unts, che	eck here	▶ □] [•
	18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System								
	(a) Classification of property	(b) Month and year placed	(c) Basis for ((business/inv			Recovery	(e) Convention	(f) Method	(g) Depreciation deduction
	(7)	in service	only - see in		P	eriod	(0) 2 3 11 3 11 11 11	(7,	(9/00)/00/21/01/01/01/01/01
19a	3-year property								
<u>b</u>	5-year property		, <u>.</u> ,						
c_	7-year property								
<u>d</u>	10-year property								
<u>e</u>	15-year property								
<u>f</u>	20-year property	ž.	l						
<u>g</u>	0.5								
	25-year property					5 yrs		S/L	
h		/			27	5 yrs	MM	S/L	
h	25-year property Residential rental property	/			27 27	5 yrs 5 yrs	ММ	S/L S/L	
h i		/			27 27	5 yrs	MM MM	S/L S/L S/L	
	Residential rental property Nonresidential real property	/ /	D	TV	27 27 39	5 yrs 5 yrs 9 yrs	MM MM MM	S/L S/L S/L	
i 	Residential rental property Nonresidential real property Section C - Assets Pl	/ /	During 2012	Tax Year Usi	27 27 39	5 yrs 5 yrs 9 yrs	MM MM MM	S/L S/L S/L S/L sation Sy	stem
i 	Residential rental property Nonresidential real property Section C - Assets Pl Class life	/ /	During 2012	Tax Year Us	27 27 39 ing the	5 yrs 5 yrs 9 yrs e Alter	MM MM MM	S/L S/L S/L S/L siation Sy	stem
i 20a b	Residential rental property Nonresidential real property Section C - Assets Pl Class life 12-year	/ /	During 2012	Tax Year Us	27 27 39 ing the	5 yrs 5 yrs 9 yrs e Alter	MM MM MM rnative Deprec	S/L S/L S/L S/L siation Sy: S/L S/L	stem
i 20a b	Residential rental property Nonresidential real property Section C - Assets Pl Class life 12-year 40-year	/ /	During 2012	Tax Year Usi	27 27 39 ing the	5 yrs 5 yrs 9 yrs e Alter	MM MM MM	S/L S/L S/L S/L siation Sy	stem
i 20a b c	Residential rental property Nonresidential real property Section C - Assets Pl Class life 12-year 40-year t IV Summary (See instructions)	/ / aced in Service	During 2012	Tax Year Usi	27 27 39 ing the	5 yrs 5 yrs 9 yrs e Alter	MM MM MM rnative Deprec	S/L S/L S/L S/L S/L Siation Sy S/L S/L S/L	stem
i 20a b c Par	Residential rental property Nonresidential real property Section C - Assets Pl Class life 12-year 40-year t IV Summary (See instructions) Isted property Enter amount from line	/ / aced in Service /			27 27 39 ing the	5 yrs 5 yrs 9 yrs e Alter 2 yrs 9 yrs	MM MM MM rnative Deprec	S/L S/L S/L S/L siation Sy: S/L S/L	stem
i 20a b c Par 21 L	Residential rental property Nonresidential real property Section C - Assets Pl Class life 12-year 40-year t IV Summary (See instructions) Isted property Enter amount from line total. Add amounts from line 12, lines 1	/ // aced in Service / 28 4 through 17, lin	es 19 and 20	ın column (g),	27 27 39 ing the	5 yrs 5 yrs 9 yrs e Alter 2 yrs) yrs	MM MM MM rnative Deprec	S/L S/L S/L S/L siation Sy S/L S/L S/L S/L S/L S/L	
i 20a b c Par 21 L 22 Te	Residential rental property Nonresidential real property Section C - Assets Pl Class life 12-year 40-year t IV Summary (See instructions) isted property Enter amount from line total. Add amounts from line 12, lines 1 inter here and on the appropriate lines of	/ // aced in Service / 28 4 through 17, lin of your return Pa	es 19 and 20 artnerships an	n column (g), d S corporati	27 27 39 ing the	5 yrs 5 yrs 9 yrs e Alter 2 yrs) yrs	MM MM MM rnative Deprec	S/L S/L S/L S/L S/L Siation Sy S/L S/L S/L	stem 0.
i 20a b c Par 21 L 22 To	Residential rental property Nonresidential real property Section C - Assets Pl Class life 12-year 40-year t IV Summary (See instructions) Isted property Enter amount from line total. Add amounts from line 12, lines 1	/ /aced in Service / 28 4 through 17, lin of your return Pa	es 19 and 20 artnerships an	n column (g), d S corporati	27 27 39 ing the	5 yrs 5 yrs 9 yrs e Alter 2 yrs) yrs	MM MM MM rnative Deprec	S/L S/L S/L S/L siation Sy S/L S/L S/L S/L S/L S/L	

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement) Part V

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a)

	through (c) of												.,		
	Section A	- Depreciation	on and Other	Informa	tion (Ca	ution: S	See the II	nstruc	tions for li	mıts fo	r passeng	ger auto	mobiles)	
24	a Do you have evidence to	support the bu	siness/investm	ent use cl	aimed?	Y	es 🗀	No	24b If "Y	es," is	the evide	nce wri	tten?] Yes [No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investmen use percenta	1 01	(d) Cost or her basis	four	(e) is for depre siness/inve use only	stment	(f) Recovery period		(g) ethod/ evention	Depr	(h) eciation luction	Elei sectio	(i) cted on 179 ost
25	Special depreciation all	owance for q	ualified listed	property	placed	ın servi	ce during	the t	ax year an	ıd					
	used more than 50% in	a qualified b	usiness use		_						25				
26	Property used more that	an 50% in a q	ualified busin	ess use:											
				%								<u> </u>			
		<u> </u>		%								<u> </u>		<u> </u>	
_	D	<u> </u>		%					<u> </u>	L.				L	
2/	Property used 50% or I	ess in a quaii				- T			<u> </u>	S/L -		· -			
_		 	+	% %						S/L				1	
			 	%						S/L		 		1	
28	Add amounts in column	n (h), lines 25			e and or	line 21.	. page 1		<u> </u>	JOIL	28	 		1	
	Add amounts in column		_				, ,9- ,		••				29	-	
							on Use	of Vel	nicles						-
-	ou provided vehicles to yose vehicles	your employe	ees, first answ		estions a)	,	on C to : b)	see if y	you meet :	an exce	eption to		ting this :	section fo	
30	Total business/investment	miles driven d	uring the	L	ncle	1	hicle	\	/ehicle	V	ehicle	1	hicle	Veh	
	year (do not include com	muting miles)			_						_				
31	Total commuting miles	driven during	the year		_										
32	Total other personal (no driven	oncommuting	j) miles												
33	Total miles driven during Add lines 30 through 32														
34	Was the vehicle availab	le for person	al use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?														
35	Was the vehicle used p	rimarily by a	more				 	-							-
	than 5% owner or relate	ed person?								<u> </u>					
36	Is another vehicle availa	able for perso	onal												
	use?	Section C	- Questions	for Emp	lovers W	/ho Pro	vide Veh	icles	for Use b	v Their	Employ		<u> </u>	<u> </u>	
An	swer these questions to			•	-					-			re not n	nore than	5%
	ners or related persons		, • •			,				,					•
37	Do you maintain a writte employees?	en policy stat	tement that p	ohibits a	ıll persor	nal use o	of vehicle	es, inc	luding cor	nmutin	g, by you	ır		Yes	No
38	Do you maintain a writte employees? See the ins							-				•			
39	Do you treat all use of v					,	00.0.0,	O.	0. 1110.0	• • • • • • • • • • • • • • • • • • • •					1
	Do you provide more th	•				ınformat	tion from	your	employee	s abou	t				
	the use of the vehicles,							•							
41	Do you meet the require	ements conce	erning qualifie	d autom	obile de	monstra	ition use	?							
	Note: If your answer to	<i>37, 38, 39, 4</i> 0	0, or 41 is "Ye	s," do no	ot compi	ete Sec	tıon B fo	r the c	covered ve	hicles					
P	art VI Amortization											·			
	(a) Description o	f costs	Date	(b) amortization begins		(C) Amortizat amount	ole t		(d) Code section		(e) Amortiz period or pe	ation	A	(f) mortization or this year	
42	Amortization of costs th	nat begins du	rıng your 201	2 tax yea	ır.										
OF	RGANIZATIONAL	COSTS	0.8	0112		7	,985	•	248		180)M			222.
				· · · · · · · · · · · · · · · · · · ·	<u></u>						<u></u>				
	Amortization of costs th	_	=									43			222
<u>44</u>	Total. Add amounts in o	column (f) Se	e the instruc	ions for	where to	report	<u> </u>					44			<u> 222.</u>

FORM 8688 ·

EXPLANATION FOR EXTENSION

STATEMENT

EXPLANATION

AN ATTEMPT TO OBTAIN INFORMATION NECESSARY FOR FILING A RETURN WAS REQUESTED IN A TIMELY FASHION, BUT THE INFORMATION WAS NOT FURNISHED IN SUFFICIENT TIME TO PERMIT THE TIMELY FILING OF THE RETURN

Form **8868**

(Rev. January 2013)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev 1-2013)

 $\triangleright [X]$ 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) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form. visit www irs.gov/efile and click on e-file for Charities & Nonprofits. **Automatic 3-Month Extension of Time.** Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part Lonly All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print BEREN SEA FOUNDATION 46-0800568 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your 2020 N. BRAMBLEWOOD ST return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions WICHITA, KS 67206 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990-T (corporation) Form 990 or Form 990-EZ 01 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 05 11 Form 990-T (trust other than above) 06 Form 8870 12 THE FOUNDATION • The books are in the care of ▶ 2020 N. BRAMBLEWOOD ST - WICHITA, KS 67206 Telephone No. ► 316-265-3311 FAX No > 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. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for. ► X calendar year 2012 or tax year beginning , and ending ___ Initial return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period 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 За 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 3b \$ Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 886	58 (Rev. 1-2013)					Page 2
If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II and check this	s box		▶ X
	nly complete Part II if you have already been granted an a				8868.	
	are filing for an Automatic 3-Month Extension, comple		•			
Part II				al (no c	opies ne	eded).
					_ -	see instructions
Type or	Name of exempt organization or other filer, see instru	ctions	Zirtoi moi o			on number (EIN) or
print	Trains of exempt enganization of early files, ede instru	00000		Linployo	dominoad	on namber (Ent) or
-	BEREN SEA FOUNDATION				46-08	300568
File by the due date for		oo inetnie	strone	Social or		
filing your	2020 N. BRAMBLEWOOD ST	ee msuuc	itions.	Social Se	cunty numl	Der (SSIN)
return See instructions	· · · · · · · · · · · · · · · · · · ·		draga and matricians	·····		
	the state of the s	oreign auc	ress, see instructions.			
	WICHITA, KS 67206		 			- · · · - · · · · · · · · · · · · · · ·
_	_					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)	•		0 4
		ı				
Applicati	ion	Return	1 ''			Return
<u>Is For</u>		Code	ls For			Code
Form 990	or Form 990-EZ	01				
Form 990)-BL	02	Form 1041-A			08
Form 472	20 (ındıvıdual)	03	Form 4720			09
Form 990)-PF	04	Form 5227			10
Form 990	Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069					11
Form 990	O-T (trust other than above)	06	Form 8870			12
STOP! D	o not complete Part II if you were not already granted	an autor	natic 3-month extension on a prev	iously file	d Form 88	68
	THE FOUNDATION					
The be	ooks are in the care of 2020 N. BRAMBLI	EWOOD	ST - WICHITA, KS	<u>67206</u>		
Teleph	none No. ► 316-265-3311		FAX No. ▶			
If the c	organization does not have an office or place of business	s in the Ur	nited States, check this box			. ▶ 🔲
If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) i	f this is fo	r the whole	group, check this
box 🕨	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the exte	ension is for.
4 Ire	quest an additional 3-month extension of time until	NOVEM	BER 15, 2013			
5 For	calendar year 2012, or other tax year beginning		, and ending	9		
6 If th	ne tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	Final r	eturn	
	Change in accounting period					
- 7 - Sta	te in detail why you need the extension - SEE STA	ATEME	NT -1 · · - · · ·	-		
			-			
						
8a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069. e	nter the tentative tax, less any			
	refundable credits. See instructions	, .	·····	8a	\$	0.
	ns application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated		Ψ	
	payments made. Include any prior year overpayment all	•				
		oweu as a	credit and any amount paid	Oh.	•	0
	eviously with Form 8868.		h this form of required by young	8b	\$	0.
	ance due. Subtract line 8b from line 8a. Include your pa	-	ir ans rorm, ir required, by asing	0.	¢	^
EŗI	PS (Electronic Federal Tax Payment System). See instru		st be completed for Part II o			0.
Indor sos	•		•	•	fmu lenaud-	las and halist
onder pena It is true, co	alties of perjury, I declare that I have examined this form, includi orrect, and complete, and that I am authorized to prepare this fo	ng accomp rm.	ranying scriedules and statements, and to	uie dest 0	i iliy knowled	ige and beliet,
		•		Det		
Signature	Trtle >			Date		

Form 8868 (Rev. 1-2013)