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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

2009 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 2009, or tax year beginning and ending Initial return G Check all that apply: Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS label. 25-1407410 THE BURKE FOUNDATION Otherwise, Number and street (or P O box number if mail is not delivered to street address) Room/suite print B Telephone number or type. 650 SMITHFIELD STREET 250 (412) 471-4550 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions. PITTSBURGH, 15222 D 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Uther taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual under section 507(b)(1)(A), check here (from Part II, col (c), line 16) Other (specify) If the foundation is in a 60-month termination 7,702,054. (Part I, column (d) must be on cash basis) ▶\$ under section 507(b)(1)(B), check here Analysis of Revenue and Expenses Part I (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books for charitable purposes income іпсоте (cash basis only) Contributions, gifts, grants, etc., received 971,301 N/A if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 4,571 4,571 STATEMENT 136,280 136,280 STATEMENT 4 Dividends and interest from securities <380.5 <380.⊳ 5a Gross rents STATEMENT b Net rental income or (loss) <52,933. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain RFCEIVED Income modifications 10a Gross sales less returns and allowances NUV 0 9 2010 b Less Cost of goods c Gross profit or (loss) OGDEM 4,991 4,991 STATEMENT 11 Other income UI Total, Add lines 1 through 11 063,830 145.462. Compensation of officers, directors, trustees, etc 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits SCANNED NOV 1 5 2010 16a Legal fees 1,300 b Accounting fees STMT 5 0. 0. c Other professional fees 17 Interest STMT 6 2,457 2,442 18 Taxes 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 7 71,238 <u>71,238</u> 0. 24 Total operating and administrative <u>74,9</u>95 0. expenses. Add lines 13 through 23 73,680 165,370 25 Contributions, gifts, grants paid 165,370. 26 Total expenses and disbursements. Add lines 24 and 25 240,365 73,680 165,370. 27 Subtract line 26 from line 12; 823,465 3 Excess of revenue over expenses and disbursements 71,782 b Net investment income (if negative, enter -0-)

N/A

c Adjusted net income (if negative, enter -0-)

Parl	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
Fari	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	9,932.	203,382.	203,382
2	Savings and temporary cash investments			
	Accounts receivable ►			
	Less; allowance for doubtful accounts ▶]	
4				
	Less; allowance for doubtful accounts			•
5	Grants receivable		-	
6	Receivables due from officers, directors, trustees, and other	-		
۱°	·			
١,	disqualified persons		•	
7				
	Less: allowance for doubtful accounts		· ·	
8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Inventories for sale or use			
<u> </u>	Prepaid expenses and deferred charges			
10	Investments - U.S. and state government obligations			
	h Investments - corporate stock			
	Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation		_	
12	Investments - mortgage loans			
13	Investments - other STMT 8	7,780,199.	8,482,654.	7,498,672.
14	Land, buildings, and equipment; basis		, ,	
'	Less accumulated depreciation			
15	Other assets (describe >			
'")			
16	Total assets (to be completed by all filers)	7,790,131.	8,686,036.	7,702,054
17		1,190,131.	0,000,030.	
1				
18	Grants payable			
ន្ន 19	Deferred revenue	-		
≝ 20	Loans from officers, directors, trustees, and other disqualified persons			
20 21 21 21 21 21 21 21 21 21 21 21 21 21	Mortgages and other notes payable			
- 22	Other liabilities (describe)			
			_	
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
,,	and complete lines 24 through 26 and lines 30 and 31			
ဗ္ဗ 24	Unrestricted			
<u> </u>	Temporarily restricted			
ຶດ 26	Permanently restricted			
₽	Foundations that do not follow SFAS 117, check here			
2	and complete lines 27 through 31.			
5 27	Capital stock, trust principal, or current funds	0.	0.	
28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets of Fund balance 25 26 27 28 29 30 30	Retained earnings, accumulated income, endowment, or other funds	7,790,131.	8,686,036.	
30	Total net assets or fund balances	7,790,131.	8,686,036.	
٤ ٥٠	1041 1101 200000 01 10110 221211000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	37000,0201	
31	Total liabilities and net assets/fund balances	7,790,131.	8,686,036.	
			0,000,030.	
Part	Analysis of Changes in Net Assets or Fund B	alances		
Tota	al net assets or fund balances at beginning of year - Part II, column (a), line	30	T	-
		00		7 700 121
	st agree with end-of-year figure reported on prior year's return)		1	7,790,131
	er amount from Part I, line 27a	01 T11 011 T19990	2	823,465
	er increases not included in line 2 (itemize) UNREALIZED	GAIN ON INVEST		72,440
	lines 1, 2, and 3		4	8,686,036
	reases not included in line 2 (itemize)		5	0.
Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	<u>8,686,036</u> .
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THE BURKE FOUNDATION b THE BURKE FOUNDATION

(e) Gross sales price

(i) F.M.V. as of 12/31/69

2 Capital gain net income or (net capital loss)

If (loss), enter -0- in Part I, line 8

If gain, also enter in Part I, line 8, column (c).

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

(a) Base period years

Calendar year (or tax year beginning in) 2008

2007

2006

2005

2004

the foundation has been in existence if less than 5 years

Enter 1% of net investment income (1% of Part I, line 27b)

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.

2 Total of line 1, column (d)

Multiply line 4 by line 3

See the Part VI instructions.

7 Add lines 5 and 6

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(f) Depreciation allowed

(or allowable)

(j) Adjusted basis

as of 12/31/69

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212,508.

213,226.

165,370.

718.

8 Enter qualifying distributions from Part XII, line 4

	990-PF (2009) THE BURKE FOUNDATION 25-14 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se			Page 4 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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		1,4	36.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2		1,4	36.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1,4	36.
6	Credits/Payments:	•		
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 8,841.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d 6d			
	Total credits and payments. Add lines 6a through 6d		8,8	41.
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			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		7,4	05.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax > 7,405. Refunded > 11			0.
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	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 published or			
	distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \triangleright \$ 0. (2) On foundation managers. \triangleright \$ 0.			
е	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/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.	İ		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	ĺ		
	By language in the governing instrument, or	ľ		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	<u> </u>
	If "Yes," complete Part II, col. (c), and Part XV.	1		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	_		
	PA	_		
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	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2009 or the taxable year beginning in 2009 (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		X
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b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Form 990-PF (2009) THE BURKE FOUNDATION Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F		25-14074	10 Page 6
 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section). Influence the outcome of any specific public election (see section 4955); any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes. Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53.4945 or in a current notice regarding disaster assistance (see instruorganizations relying on a current notice regarding disaster assistance check in the answer is "Yes" to question 5a(4), does the foundation claim exemption expenditure responsibility for the grant? "Yes," attach the statement required by Regulations section 53.494 Did the foundation, during the year, receive any funds, directly or indirectly, to 	on 4945(e))? or to carry on, directly or indirectly or indirectly or indirectly or indirectly or indirectly or indirectly or or described in section or educational purposes, or for index the exceptions described in uctions)? there from the tax because it maintain the individual of the individual o	or Ye	S X No S X No S X No S X No	5b
a personal benefit contract?		Y6	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a lf "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax b If yes, did the foundation receive any proceeds or have any net income attributed the light of the foundation About Officers, Directors, Trust Paid Employees, and Contractors	shelter transaction? table to the transaction?	<u> </u>	s X No N/A	Sb X
1 List all officers, directors, trustees, foundation managers and their	compensation.			
(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
STEVEN E. BURKE 650 SMITHFIELD STREET, SUITE 250	PRESIDENT	,	·	
PITTSBURGH, PA 15222 PATRICIA G. BURKE 650 SMITHFIELD STREET, SUITE 250	10.00 VICE PRESIDEN	T, TREASU	RER	0.
PITTSBURGH, PA 15222 CHARLES R. BURKE, JR.	5.00 TRUSTEE	0.	0.	0.
650 SMITHFIELD STREET, SUITE 250 PITTSBURGH, PA 15222	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in	oluded on line 1) If none	enter INONE II		
(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
NONE				
Total number of other employees paid over \$50,000				

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations mi	ust complete t	his part Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	. etc., purposes			
a	Average monthly fair market value of securities	, , , ,		1a	5,651,544.
b	Average of monthly cash balances			1b	163,825.
C	Fair market value of all other assets			1c	404,201.
d	Total (add lines 1a, b, and c)			1d	6,219,570.
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	6,219,570.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount,	see instructions)	4	93,294.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on	Part V, line 4		5	6,126,276.
6	Minimum investment return. Enter 5% of line 5			6	306,314.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part.)	d (j)(5) private o	perating foundations an	d certain	
1	Minimum investment return from Part X, line 6			1	306,314.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	1,436.		
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	1,436.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	304,878.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	304,878.
6	Deduction from distributable amount (see instructions) .			6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part X	KIII, line 1		7	304,878.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purp	oses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	<u> 165,370.</u>
b	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable	e, etc., purpose:	S	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			4	165,370.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inves	tment			
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4			6	165,370.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years wh	nan calculatina v	whathar the foundation o	unalifice fo	or the coetion

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4940(e) reduction of tax in those years.

- Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				304,878.
2 Undistributed income, if any, as of the end of 2009				33274,34
a Enter amount for 2008 only			157,589.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2009:			,	
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				:
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 165,370.				
a Applied to 2008, but not more than line 2a			157,589.	
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 2009 distributable amount				7,781.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		<u> </u>
d Subtract line 6c from line 6b. Taxable				1
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				297,097.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.	·		<u>-</u>
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007 d Excess from 2008				
e Excess from 2009				
6 FV0629 HOHI 5003				Corr. 000 DE (0000)

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Part XIV Private Operating Fo			-A, question 9)	N/A	
1 a If the foundation has received a ruling or			1		
foundation, and the ruling is effective for	•	•	▶ _		
b Check box to indicate whether the found	· · ·	ng foundation described i			4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		_
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for		İ			
each year listed		<u> </u>			
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(i)(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		<u></u>			
Part XV Supplementary Info			if the founda	ation had \$5,000 or n	nore in assets
at any time during the	ne year-see tne	instructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation who			ributions received	by the foundation before the c	lose of any tax
year (but only if they have contributed m	iore than \$5,000). (See s	ection 507(a)(2).)			
NONE					
b List any managers of the foundation who			or an equally large	portion of the ownership of a	partnership or
other entity) of which the foundation has	s a 10% or greater interes	SL			
NONE					
2 Information Regarding Contribution					
Check here X if the foundation of	nly makes contributions	to preselected charitable	organizations and	does not accept unsolicited re	quests for funds. If
the foundation makes gifts, grants, etc. ((see instructions) to indiv	viduals or organizations u	nder other condition	ons, complete items 2a, b, c, a	nd d.
a The name, address, and telephone numb	per of the person to who	n applications should be	addressed:		
b The form in which applications should be	e submitted and informa	tion and materials they st	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kınds of institution	ns, or other factors:	
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1 C : 10 : 11 : 11 : 11 : 11 : 11	•			T
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment	1	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year THE BURKE FAMILY FOUNDATIONS 650 SMITHFIELD STREET; SUITE 250 PITTSBURGH, PA	SEE ATTACHED	recipient SEE ATTACHED	SEE ATTACHED	165,370.
Total	<u> </u>		► 3a	165,370.
NONE				
Total		<u>. </u>	▶ 3b	0.
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Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
g. 555 aautto utiloso otto moo maiottod	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b	\	· -			
G					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	4,571.	
4 Dividends and interest from securities			14	4,571. 136,280.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property				• • •	
b Not debt-financed property			14	<380.	>
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	4,991.	
8 Gain or (loss) from sales of assets other					
than inventory			18	<52,933.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1				
a		<u> </u>			
b					
C					· - · · · · · · · · · · · · · · · · · ·
d		·			
e					
12 Subtotal. Add columns (b), (d), and (e)	<u></u>	(0.	92,529.	
13 Total. Add line 12, columns (b), (d), and (e)				13	92,529.
(See worksheet in line 13 instructions to verify calculations.)	 				

Dart YVI_R	Polationship of	of Activities to	the Accomplishm	ent of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).	
		_
		_
		_
		_
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923621 02-02-10 Form **990-PF** (2009)

25-1407410 Form 990-PF (2009) THE BURKE FOUNDATION Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) (1) Cash (2) Other assets 1a(2) **b** Other transactions: 1b(1) (1) Sales of assets to a noncharitable exempt organization 1b(2) (2) Purchases of assets from a noncharitable exempt organization 1b(3) (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 1b(4) 1b(5) (5) Loans or loan guarantees 1b(6) (6) Performance of services or membership or fundraising solicitations 1c c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b if "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 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 Title Signature of officer or trustee Date Preparer's identifying number Date Preparer's self-employed 10/13/10 signature

Form **990-PF** (2009)

(412)367-8190

EIN >

Phone no.

Firm's name (or yours

if self-employed),

LALLY & CO., LLC

5700 CORPORATE DRIVE, SUITE 800

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Maine of the organization	л	Employer identification number
	THE BURKE FOUNDATION	25-1407410
Organization type (chec	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Specia	al Rule See instructions
General Rule		
=	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (inplete Parts I and II.	in money or property) from any one
Special Rules		
509(a)(1) and 17	or (c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the (o(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of in (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II	_
aggregate contr	11(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one constitutions of more than \$1,000 for use exclusively for religious, charitable, scientific, literal of cruelty to children or animals. Complete Parts I, II, and III.	
contributions fo If this box is che purpose Do not	or (c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions did not be exclusively for religious, charitable, etc., purposes, but these contributions did not be exclusively for religious, charitable, etc., purposes, but these contributions did not be exclusively for an exclusive exclusive that were received during the year for an exclusive	ot aggregate to more than \$1,000 usively religious, chantable, etc.,
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedi on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on I filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	, , , , , , , , , , , , , , , , , , , ,
LHA For Privacy Act ar for Form 990, 990		ule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

THE BURKE FOUNDATION

25-1407410

Part I	Contributors (see instructions)		7-1407410
	Contributors (see instructions)		T
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CHARLES R BURKE CLAT00 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$ 240,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	CHARLES R BURKE CLAT02 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	CHARLES R BURKE CLAT03 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	CHARLES R BURKE CLAT99 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	CHARLES R BURKE CLUT03 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$\$\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	CHARLES R BURKE CLUT08 650 SMITHFIELD STREET	\$\$	Person X Payroll Noncash (Complete Part II if there
	PITTSBURGH, PA 15222		is a noncash contribution)

	orm 990, 990-EZ, or 990-PF) (2009)		Page 2 of 2 of Part I
Name of or			loyer identification number
	URKE FOUNDATION		25-1407410
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	CHARLES R BURKE CLUT98 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate 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) Aggregate 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) Aggregate 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) Aggregate 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) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

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1 North Lindent Street Duquesne, PA 15110
Boca Grande, FL 33921
5115 Centre Avenue, Pittsburgh, PA 15232
320 Bilmar Drive; Pittsburgh, PA 15205
Boca Grande, FL 33921
1220 Powers Run Road Pittsburgh, PA 15238
2934 Smallman Street 2nd Floor Pittsburgh, PA 15201
209 Ninth Street - Suite 400 Pittsburgh, PA 15222-3501
384 Fox Chapel Road Pittsburgh, PA 15238
ALS Assoc 1201 E Colfax Ave Denver CO 80218
Longwood at Oakmont Verona, PA 15147
Boca Grande, FL 33921
Pittsburgh, PA 15233
4802 Fifth Avenue; Pittsburgh, PA 5213
1275 Bedford Avenue; Pittsburgh, PA 15219
225 Boulevard of the Allies; Pittsburgh, PA 15222
Five PPG Place - Suite 250 Pittsburgh, PA 15222

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Date	Name	Name Address	Name Address	Amount
12/21/2009	Princeton University	Princeton, NJ 08540	General Operating Support	\$500.00
12/21/2009	Rails-to-Trails Conservancy	2121 Ward Ct NW; Washington DC 20037	General Operating Support	\$50.00
12/21/2009	Salvation Army	P.O. Box 641106 Pittsburgh, PA 15264-1106	General Operating Support	\$50 00
12/21/2009	Senator John Heinz History Center	1212 Smallman Street Pittsburgh, PA 15222-4200	General Operating Support	\$0.00
12/21/2009	Senator John Heinz History Center	1212 Smallman Street Pittsburgh, PA 15222-4200	General Operating Support	\$5,000.00
12/21/2009	Shady Side Academy	423 Fox Chapel Road Pittsburgh, PA 15238-2296	General Operating Support	\$125.00
12/21/2009	Shadyside Hospital Foundation	Pittsburgh, PA 15232	General Operating Support	\$50 00
12/21/2009	Sojourner House	Pittsburgh, PA 15233	General Operating Support	\$250.00
12/21/2009	St. Margaret Memorial Hospital Foundation	815 Freeport Road Pittsburgh, PA 15215	General Operating Support	\$250.00
12/21/2009	The Pittsburgh Foundation	Five PPG Place - Suite 250 Pittsburgh, PA 15222	General Operating Support	\$2,500.00
12/21/2009	The Pittsburgh Project	2801 North Charles Street Pittsburgh, PA 15214	General Operating Support	\$5,000.00
12/21/2009	United Way of Allegheny County	1250 Penn Avenue Pittsburgh, PA 15222	General Operating Support	\$25,000.00
12/21/2009	Unity Lutheran Community Mission	7825 1/2 Hamilton Avenue Pittsburgh, PA 15208	General Operating Support	\$500.00
12/21/2009	University of Virginia Law School Foundat	580 Massie Road Charlottesville, VA 22903-1789	General Operating Support	\$500 00
12/21/2009	Western Pennsylvania Conservancy	209 Fourth Avenue Pittsburgh, PA 15222-2075	General Operating Support	\$125.00
12/21/2009	Westminster College	New Wilmington, PA	General Operating Support	\$12,500.00
12/21/2009	Women's Center & Shelter	P.O. Box 9024 Pittsburgh, PA 15224	General Operating Support	\$250.00
12/21/2009	World Affairs Council	501 Grant Street Suite 1175 Pittsburgh, PA 15219	General Operating Support	\$50 00
12/21/2009	WQED of Pittsburgh	4802 Fifth Avenue Pittsburgh, PA 15213	General Operating Support	\$500.00

\$165,370.00

FORM 990-PF INTEREST ON SAVINGS AN	ID TEMPORARY CAS	SH INV	ESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
IRS PNC BANK THE BURKE FOUNDATIONS			-		58. 37. 76.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		=	4,5	71.
FORM 990-PF DIVIDENDS AND	INTEREST FROM S	SECURI	ries	STATEMENT	2
SOURCE	GROSS AMOUNT		AL GAINS IDENDS	COLUMN (A)
THE BURKE FOUNDATIONS	136,280.		0.	136,28	30.
TOTAL TO FM 990-PF, PART I, LN 4	136,280.		0.	136,28	30.
FORM 990-PF RENT	PAL INCOME			STATEMENT	3
KIND AND LOCATION OF PROPERTY			ACTIVITY NUMBER	GROSS RENTAL INCO	OME
THE BURKE FOUNDATIONS (K-1)		•	1	<38	30.>
TOTAL TO FORM 990-PF, PART I, LINE	5 A		=	<38	30.>
FORM 990-PF OT	THER INCOME			STATEMENT	4
FORM 990-FF OI	THER INCOME				
DESCRIPTION	(A) REVENUE PER BOOKS		(B) F INVEST- NT INCOME	(C) ADJUSTEI NET INCO	
	(A) REVENUE PER BOOKS 4,6' <1,0	3. 79. 55.>	r invest-	ADJUSTEI NET INCOM	

FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOMI		
ACCOUNTING	1,300.		0.			0.
TO FORM 990-PF, PG 1, LN 16B	1,300.		0.			0.
FORM 990-PF	TAX	ES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME		
PA TAX FOREIGN TAX	15. 2,442.	2,4	0. 42.			0.
-	2.455					
TO FORM 990-PF, PG 1, LN 18 =	2,457.	2,4	42. ====================================			0.
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			т-	(C) ADJUSTED NET INCOME	(D) CHARITA	7
FORM 990-PF	OTHER EX	XPENSES (B) NET INVES MENT INCO 48,5	T- ME 06.	ADJUSTED	(D) CHARITA	7
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Form 8868) (Rev. 4-2009)	·			Page 2
• If you a	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and ch	neck this bo	х .		■ X
Note. Onl	ly complete Part II if you have already been granted an automatic 3-month extension on a prev	nously filed	Form	8868	,
If you a	re filing for an Automatic 3-Month Extension, complete only Part I (on page 1)				
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the ori	iginal (no co	pies r	needed).	
Type or	Name of Exempt Organization		Emp	loyer identific	ation number
print	THE BURKE FOUNDATION	· <u>.</u>	2	5-14074	1.0
File by the	Number, street, and room or surte no II a P O box, see instructions	, , ,		3-14074 RS use only	10
extended due date for	650 SMITHFIELD STREET, NO. 250		10111	no use only	
filing the return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	——— <u>—</u>			
instructions	PITTSBURGH, PA 15222		-		
	pe of return to be filed (File a separate application for each return):				
	m 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 16	041-А		rm 5227	Form 8870
For	m 990-BL X Form 990 PF Form 990-T (trust other than above) Form 4	720		rm 6069	
STOP! Do	not complete Part II if you were not already granted an automatic 3-month extension on	a previous	ly file	d Form 8868.	
	STEVEN BURKE				
• The bo	oks are in the care of > 650 SMITHFIELD STREET, STE. 250 -	PITTS	BURG	сн. ра	15222
Telepho	one No ▶ (412) 471-4550 FAX No ▶			211/ 111 .	13222
	rganization does not have an office or place of business in the United States, check this box				<u>~</u>
e if this is	s for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	If this	is for	the whole ara	ID chack this
	. If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and	EINs of all n	nembe	ers the extensu	on is for
4 I req	quest an additional 3-month extension of time until NOVEMBER 15, 2010.			o the extensi	2(13 loi.
5 For	calendar year 2009, or other tax year beginning, and	d ending			
6 If thi	is tax year is for less than 12 months, check reason: Initial return Final ret			Change in acco	unting period
	e in detail why you need the extension				•
AD:	DITIONAL TIME IS NEEDED TO GATHER THE INFORMATI	ON NEC	ESS	SARY TO	FILE A
	MPLETE AND ACCURATE RETURN.				
8a If thi	is application is for Form 990 BL, 990 PF, 990-T, 4720, or 6069, enter the tentative tax, less any	у			
nonr	refundable credits. See instructions.		8a	\$	2,503.
b If thi	s application is for Form 990 PF, 990 T, 4720, or 6069, enter any refundable credits and estimate	ated			
tax p	payments made Include any prior year overpayment allowed as a credit and any amount paid		. 1		
	viously with Form 8868.		8ь	\$	8,841.
c Bala	nce Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, de	posit			
with	FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See ins	tructions.	8c	\$	0.
	Signature and Verification				
Under penal it is true, cor	lties of perjury, I declare that I have examined this form, including accompanying schedules and statements rrect, and complete, and that I am authorized to prepare this form.				
Signature b	Ralph (Man Title > CPA		Date 1	8/12/	<i>'</i> 70
	()				8 (Rev. 4-2009)
	V				2 (1.04. 7 2003)

OPY