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## Form **990-PF**

## **Return of Private Foundation**

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

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

2000

| Fo        | or c           | alendar v             | ear 2009, or tax ye                               | ar beginning  |          |                                    | , and er    |               | g.roquironion                                       |   |
|-----------|----------------|-----------------------|---|---|----------|------------------------------------|-------------|---------------|---|---|
|           |                | hệck all tha          |   | Initial return  |          | Initial return of a f              | <u>-</u> -  |               | Final retur   | n   |
|           | -              |                       |   | Amended return  |          | Address char                       | -           | ,             | Name change   |   |
| u         |                | the IRS               | Name of foundation                                |   |          |                                    |             |               | A Employer identification                           | n number  |
| (         |                |                       | HE BURKE  | FAMILY FOUN   | ID.      | ATION                              |             |               | 31-158375   | 7   |
|           |                | · · · · · · ·         |   | O box number if mail is not di                                      |          |                                    |             | Room/suite    | B Telephone number                                  | · · · · · · · · · · · · · · · · · · ·                             |
| _         |                | type. 6               | 50 SMITH  | FIELD STREET  | •        |                                    |             | 250           |   | -4550   |
|           |                | Specific (            | City or town, state, a                            | and ZIP code  |          |                                    |             |               | C If exemption application is                       |   |
|           | ısu            | P                     | ITTSBURG  |   |          |                                    |             |               | D 1. Foreign organization                           | ıs, check here 🕨 🗔  |
| H         | С              | heck type (           | of organization:                                  | X Section 501(c)(3) ex  | xem      | pt private foundation              |             |               | Foreign organizations m<br>check here and attach of | eeting the 85% test, computation                                  |
| <u> </u>  |                |                       |   |   |          | er taxable private found           | ation       |               | E If private foundation st                          | atus was terminated   |
|           |                |                       | alue of all assets at                             | ·   —   | -        |                                    | Accrı       | ıal           | under section 507(b)(                               |   |
|           |                |                       | l, col (c), line 16)                              |   |          | (specify)                          |             |               | F If the foundation is in a                         |   |
| _         | <u>&gt;</u>    |                       |   | 2,994. (Part I, colu  | ımr      |                                    | Γ           |               | under section 507(b)(1                              |   |
|           | -a             | rt I Ana<br>(The nece | total of amounts in colissarily equal the amounts | nd Expenses<br>umns (b), (c), and (d) may not<br>nts in column (a)) |          | (a) Revenue and expenses per books | (b) Net inv |               | (c) Adjusted net income                             | (d) Disbursements<br>for charitable purposes<br>(cash basis only) |
|           |                |                       | ributions, gifts, grar                            |   | _        | 971,301.                           |             |               | N/A   | <del></del>   |
|           |                | 2 Check               |   | on is not required to attach Sch. B<br>corary                       | -        | 4 520                              |             | 4 522         |   | GD2 FF  |
|           |                |                       | st on savings and temp<br>investments             |   | -        | 4,539.                             |             | 4,539.        |   | STATEMENT 1   |
|           | - 1            |                       | ends and interest fr                              | om securities   | -        | 136,279.                           | 13          | <u>5,279.</u> |   | STATEMENT 2   |
|           |                | 5a Gross              | ntal income or (loss)                             | -380.   | H        | -380.                              |             | -380.         |   | STATEMENT 3   |
|           |                | _                     | un or (loss) from sale of                         |   | ┢        | -52,931.                           |             |               |   |   |
|           | 흵              | b Gross               | sales price for all<br>s on line 6a               | assets not on time to   | ┢        |                                    |             |               |   |   |
|           | Revenue        |                       | s on tine oa<br>al gain net in <u>çome (fro</u> m | Part IV June 2)   |          | ·                                  |             | 0.            |   |   |
| 1         | ۳              |                       |   | RECEIVED  |          |                                    |             |               |   |   |
|           |                | 9 Incon               | ne modifications                                  |   | ی        |                                    |             |               |   |   |
|           | -              | 10a Gross<br>and all  | sales less réturns                                | LUV 00 2010   | )<br>(2) |                                    |             |               |   |   |
|           | ı              |                       | Cost of goods sold                                | TOV TO DE LITTLE  | 'n       |                                    |             |               |   |   |
|           | ļ              | c Gross               | s profit or (loss)                                | O AN ADMINISTRACTION AND TRACTIONS                                  | ¥        |                                    |             |               |   |   |
|           |                | 11 Other              | income (  | OGDEN, UT   |          | 3,621.                             |             | 3,621.        |   | STATEMENT 4   |
| _         | 4              |                       | l. Add lines 1 throug                             |   | _        | 1,062,429.                         | 14          | <u>1,059.</u> |   |   |
|           |                |                       | ensation of officers, dir                         |   | L        | 0.                                 | <del></del> | 0.            |   | 0.  |
|           |                |                       | employee salaries                                 | J   | ┝        |                                    |             |               |   | <del> </del>  |
|           | ses            | 15 Pensi<br>16a Legal | ion plans, employee                               | e denems  |          |                                    |             |               |   | <del></del>   |
|           |                |                       | unting fees                                       | STMT 5  | -        | 1,300.                             |             | 0.            |   | 0.  |
| ٠ .       | Expen          |                       | professional fees                                 | STMT 6  | _        | 100.                               |             | 0.            |   | 0.  |
|           |                | 17 Intere             |   | 51111   | -        |                                    |             |               |   | - 0.  |
| A ( ) A ( | at             | 18 Taxes              | 3   | STMT 7  |          | 2,455.                             |             | 2,440.        |   | 0.  |
| ٔ خ       | Administrative | 19 Depre              | eciation and depletion                            | on  |          |                                    |             |               |   |   |
| ) ;       | Ē              | <b>20</b> Occup       | pancy   |   |          |                                    |             |               |   |   |
|           | ≥              | 21 Trave              | l, conferences, and                               | meetings  |          |                                    |             |               |   |   |
|           | and            | 22 Printi             | ng and publications                               |   | _        |                                    |             |               |   | <u></u>   |
|           | 밁              |                       | expenses  | STMT 8  | _        | 71,236.                            | 7:          | <u>1,236.</u> |   | 0.  |
| )         | ğ              |                       | operating and adm                                 |   |          | 75 004                             |             |               |   |   |
| (         | Operating      | -                     | nses. Add lines 13 i                              | =   | _        | 75,091.                            | <i>T</i> :  | 3,676.        |   | 0.  |
|           |                |                       | ibutions, gifts, gran                             | •   | $\vdash$ | 165,370.                           |             |               |   | 165,370.  |
|           |                |                       | expenses and dist                                 | oursements.   |          | 240 461                            |             | 2 676         |   | 166 270   |
| _         | +              |                       | ines 24 and 25<br>act line 26 from line           | 12  | -        | 240,461.                           |             | <u>3,676.</u> |   | 165,370.  |
|           |                |                       |   |   |          | 821,968.                           |             |               |   |   |
|           |                |                       | s of revenue over exper<br>1vestment income (     | rises and disbursements   | -        | UZI, 300.                          | 71          | 383.          |   |   |
|           |                |                       | ted net income (if n                              |   |          | <del></del>                        |             | ,, J          | N/A   | <u> </u>  |
| 92        | 350            |                       |   | and Danaguark Paduation   |          | M-4' Ab - ' A                      |             |               | 1 H/B   | Form 000 DE (0000)  |

| Par                               | Balance Sheets Attached schedules and amounts in the description   | Beginning of year                       | End of            | year  |
|-----------------------------------|--|---|-------------------|---|
| гаг                               | column should be for end-of-year amounts only  | (a) Book Value                          | (b) Book Value    | (c) Fair Market Value                           |
| 1                                 | Cash - non-interest-bearing  | 12,282.                                 | 204,231.          | 204,322   |
| 2                                 | Savings and temporary cash investments   |   |                   |   |
| 3                                 | Accounts receivable ►  |   |                   |   |
|                                   | Less: allowance for doubtful accounts ▶  |   |                   |   |
| 4                                 | Pledges receivable >   |   |                   |   |
| '                                 | Less; allowance for doubtful accounts ▶  |   |                   |   |
| 5                                 |  |   |                   |   |
| ء ا                               | Receivables due from officers, directors, trustees, and other  |   | <del></del>       | <del></del>                                     |
| "                                 |  |   |                   |   |
| 1,                                | disqualified persons   |   | · - · · ·         |   |
| '                                 | Other notes and loans receivable   |   |                   |   |
|                                   | Less; allowance for doubtful accounts  |   |                   |   |
| 2   8                             |  |   |                   |   |
| 8198818<br>9                      | Prepaid expenses and deferred charges  |   |                   |   |
| יון י                             | a Investments - U.S. and state government obligations  |   |                   |   |
|                                   | b Investments - corporate stock  |   |                   |   |
|                                   | c Investments - corporate bonds  |   |                   |   |
| 11                                | Investments - land, buildings, and equipment basis   |   |                   |   |
|                                   | Less accumulated depreciation  |   |                   |   |
| 12                                | Investments - mortgage loans   |   |                   |   |
| 13                                | Investments - other STMT 9   | 7,780,212.                              | 8,482,669.        | 7,498,672                                       |
| 14                                |  |   |                   |   |
|                                   | Less accumulated depreciation  |   | Ī                 |   |
| 15                                |  |   |                   |   |
| '                                 | )  |   |                   |   |
| 16                                | Total assets (to be completed by all filers)   | 7,792,494.                              | 8,686,900.        | 7,702,994                                       |
| 17                                |  | 1,174,474.                              | 0,000,500.        | 1,102,334                                       |
|                                   |  |   |                   |   |
| 18                                | - · · · · · · · · · · · · · ·  |   |                   |   |
| 20<br>21                          |  |   |                   |   |
| ≝  20                             |  |   | ····              |   |
| g   21                            | . ,  |   |                   |   |
| 22                                | Other liabilities (describe >)   |   |                   |   |
| 1                                 |  |   | _                 |   |
| 23                                | Total liabilities (add lines 17 through 22)  | 0.                                      | 0.                |   |
| ŀ                                 | Foundations that follow SFAS 117, check here   |   |                   |   |
| ,                                 | and complete lines 24 through 26 and lines 30 and 31.  |   |                   |   |
| 24                                | Unrestricted   |   |                   |   |
| 25<br>26<br>26                    | Temporarily restricted   |   |                   |   |
| ሷ   26                            | •  |   |                   |   |
| <b>]</b>                          | Foundations that do not follow SFAS 117, check here  |   |                   |   |
|                                   | and complete lines 27 through 31.  |   |                   |   |
| 27<br>28<br>29<br>30              | Capital stock, trust principal, or current funds   | 0.                                      | 0.                |   |
| 28                                | Paid-in or capital surplus, or land, bldg., and equipment fund   | 0.                                      | 0.                |   |
| 29                                |  | 7,792,494.                              | 8,686,900.        |   |
| 30                                |  | 7,792,494.                              | 8,686,900.        |   |
| -   "                             |  | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                   |   |
|                                   |  | 7 700 404                               | 8,686,900.        |   |
| 21                                | Total liabilities and not accets/fund halances   | / /4/ /4/                               |                   |   |
|                                   | Total liabilities and net assets/fund balances   | 7,792,494.                              | 0,000,000,        |   |
| 31<br>Part                        |  | -                                       | 0,000,500.        |   |
| Part                              | Analysis of Changes in Net Assets or Fund B  | alances                                 | 3,000,500.        |   |
| Pari<br>Tota                      | Analysis of Changes in Net Assets or Fund B  | alances                                 |                   | 7 702 404                                       |
| Pari                              | Analysis of Changes in Net Assets or Fund B al net assets or fund balances at beginning of year - Part II, column (a), line ust agree with end-of-year figure reported on prior year's return)   | alances                                 | 1                 |   |
| Pari<br>Tota<br>(mu               | Analysis of Changes in Net Assets or Fund B<br>al net assets or fund balances at beginning of year - Part II, column (a), line<br>ust agree with end-of-year figure reported on prior year's return)<br>er amount from Part I, line 27a  | alances<br>30                           | 1 2               | 821,968   |
| Pari<br>Tota<br>(mu<br>Ent        | Analysis of Changes in Net Assets or Fund B al net assets or fund balances at beginning of year - Part II, column (a), line ust agree with end-of-year figure reported on prior year's return) er amount from Part I, line 27a er increases not included in line 2 (itemize)  UNREALIZED   | alances<br>30                           | 1<br>2<br>MENTS 3 | 821,968<br>72,438                               |
| Total<br>(mu<br>Entil<br>Oth      | Analysis of Changes in Net Assets or Fund B al net assets or fund balances at beginning of year - Part II, column (a), line ust agree with end-of-year figure reported on prior year's return) er amount from Part I, line 27a er increases not included in line 2 (itemize)  UNREALIZED of lines 1, 2, and 3  | alances<br>30                           | 1<br>2<br>3<br>4  | 821,968,<br>72,438,<br>8,686,900.               |
| Pari<br>(mu<br>Enti<br>Oth<br>Add | Analysis of Changes in Net Assets or Fund B al net assets or fund balances at beginning of year - Part II, column (a), line ust agree with end-of-year figure reported on prior year's return) er amount from Part I, line 27a er increases not included in line 2 (itemize)  UNREALIZED of lines 1, 2, and 3 creases not included in line 2 (itemize) | alances 30 GAIN ON INVEST               | MENTS 3 4 5       | 7,792,494.<br>821,968.<br>72,438.<br>8,686,900. |
| Pari<br>(mu<br>Enti<br>Oth<br>Add | Analysis of Changes in Net Assets or Fund B al net assets or fund balances at beginning of year - Part II, column (a), line ust agree with end-of-year figure reported on prior year's return) er amount from Part I, line 27a er increases not included in line 2 (itemize)  UNREALIZED of lines 1, 2, and 3  | alances 30 GAIN ON INVEST               | 1<br>2<br>3<br>4  | 821,968,<br>72,438,<br>8,686,900.               |

|  | BURKE FAMILY FO  |  |                                      |  | <u>.</u>                         | 3                    | 1-158                          | 3757 Pa                         |
|--|--|--|--------------------------------------|--|----------------------------------|----------------------|--------------------------------|---------------------------------|
|  | ribe the kind(s) of property sold (e.garehouse; or common stock, 200 sh      |  |                                      | ( <b>b)</b> Hov<br>P - P<br>D - D      | v acquired<br>urchase<br>onation |                      | acquired<br>day, yr.)          | (d) Date sold<br>(mo., day, yr. |
| 1a THE BURKE FOUN  | DATIONS  |  |                                      |  |                                  | •                    |                                |                                 |
| b THE BURKE FOUN   | DATIONS  |  |                                      | ļ                                      |                                  |                      |                                |                                 |
| <u>c</u>   |  |  | <del></del>                          | ļ                                      |                                  |                      |                                |                                 |
| d  | <del>-</del>   |  |                                      |  |                                  |                      |                                |                                 |
| (e) Gross sales price  | (f) Depreciation allowed   |  | st or other basis                    |  |                                  |                      | ain or (loss)                  |                                 |
|  | (or allowable)   | pius e                                 | expense of sale                      |  |                                  | (e) pius             | s (f) mınus (                  |                                 |
| <u>a</u><br>b  |  |  |                                      |  |                                  |                      |                                |                                 |
| C .  |  |  |                                      |  |                                  |                      |                                | -31,10                          |
| d  |  |  |                                      |  |                                  |                      |                                |                                 |
| е  |  |  |                                      |  |                                  |                      |                                |                                 |
| Complete only for assets showing   | ng gain in column (h) and owned by   | the foundation                         | on 12/31/69                          |  | ()                               | Gains (C             | Col. (h) gain                  | minus                           |
| (i) F.M.V. as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69   |  | cess of col. (ı)<br>col. (ı), ıf any |  | col                              | (k), but i<br>Losses | not less than<br>(from col. (f | 1 -0-) <b>or</b>                |
| a  |  |  |                                      |  | •                                |                      |                                | -1,74                           |
| b  |  |  |                                      | $\bot$                                 |                                  |                      |                                | -51,18                          |
| <u>c</u>   |  |  |                                      |  |                                  |                      |                                |                                 |
| <u>d</u>   |  |  |                                      | -                                      |                                  |                      |                                |                                 |
| е.   | C.,  |  |                                      | $\overline{}$                          | <del></del>                      |                      |                                |                                 |
| 2 Capital gain net income or (net ca   | $\{$ If gain, also ente<br>If (loss), enter -0                               | r in Part I, line<br>- in Part I, line | <i>7</i><br>7                        | } 2                                    |                                  |                      |                                | -52,93                          |
| 3 Net short-term capital gain or (los  |  | nd (6):                                |                                      |  |                                  |                      |                                |                                 |
| If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8                | column (c).  |  |                                      | <u>                               </u> | .                                |                      | N/A                            |                                 |
|  | nder Section 4940(e) for   | Reduced                                | Tax on Net                           | Inves                                  | tment Inc                        | ome                  | 14/ 11                         |                                 |
| (For optional use by domestic private  | foundations subject to the section   | 4940(a) tax on                         | net investment in                    | come.)                                 |                                  |                      |                                |                                 |
| If section 4940(d)(2) applies, leave the   | no part blank  |  |                                      |  |                                  |                      |                                |                                 |
| n section 4340(u)(2) applies, leave ti   | iis part bialik.   |  |                                      |  |                                  |                      |                                |                                 |
| Was the foundation liable for the sec  |  |  | •                                    | lod?                                   |                                  |                      |                                | Yes X                           |
| If "Yes," the foundation does not qual  Foter the appropriate amount in a                    | ify under section 4940(e). Do not co<br>each column for each year; see instr |  |                                      | 90                                     | <del></del>                      |                      |                                |                                 |
| (a)  | (b)  | actions belore                         | making any entitie                   | (c)                                    |                                  | T                    |                                | (d)                             |
| Base period years<br>Calendar year (or tax year beginnii                                     |  | tributions                             | Net value of no                      |  | ole-use assets                   |                      | Distribi                       | ution ratio<br>ded by col. (c)) |
| 2008   |  | 8,975.                                 |                                      | 6,1                                    | 25,712                           |                      | (                              | .0324                           |
| 2007   |  | 3,923.                                 |                                      |  | 69,029                           |                      |                                | .0241                           |
| 2006   |  | 7,719.                                 |                                      |  | 06,374                           |                      |                                | .0295                           |
| 2005   |  | 2,460.                                 | <del></del>                          |  | 59,097                           |                      |                                | .0405                           |
| 2004   | 12   | 8,907.                                 |                                      | 2,7                                    | 62,403                           | •                    | <u> </u>                       | .0466                           |
| Trial of loss 4 religion (d)   |  |  |                                      |  |                                  |                      |                                | 1777                            |
| <ul><li>Total of line 1, column (d)</li><li>Average distribution ratio for the</li></ul>     | 5-vear hase period - divide the total i                                      | on line 2 by 5                         | or by the number                     | of waare                               |                                  | _2                   |                                | .1733                           |
| the foundation has been in exister   |  | on mic z by o,                         | or by the number                     | oi years                               |                                  | 3                    |                                | .0346                           |
| and realisation has been in existen  | noo ii looo than o youro   |  |                                      |  |                                  | -                    |                                | 0340                            |
| 4 Enter the net value of noncharitab   | le-use assets for 2009 from Part X,  | line 5                                 |                                      |  |                                  | 4                    | (                              | 5,127,57                        |
|  |  |  |                                      |  |                                  |                      |                                |                                 |
| C. Multiply lips 4 by lips 2   |  |  |                                      |  |                                  | 5                    |                                | 212,48                          |
| Multiply line 4 by line 3  |  |  |                                      |  |                                  |                      |                                |                                 |
|  |  |  |                                      |  |                                  |                      |                                |                                 |
|  | ne (1% of Part I, line 27b)  |  |                                      |  |                                  | 6                    | -                              | 70                              |
| Enter 1% of net investment incom   | ne (1% of Part I, line 27b)  |  |                                      |  |                                  |                      |                                |                                 |
| 6 Enter 1% of net investment incom   | ne (1% of Part I, line 27b)  |  |                                      |  |                                  | _ 6<br>7             |                                | 70<br>213,18                    |
| 5 Enter 1% of net investment incom 7 Add lines 5 and 6 8 Enter qualifying distributions from | n Part XII, line 4   |  |                                      |  |                                  |                      |                                |                                 |
| 5 Enter 1% of net investment incom 7 Add lines 5 and 6 8 Enter qualifying distributions from | , ,  | 1b, and comp                           | lete that part usın                  | g a 1% ta                              | ax rate.                         | 7                    |                                | 213,18                          |

| _        |  |                  | <u> 15837</u> |                  |       | Page 4     |
|----------|--|------------------|---------------|------------------|-------|------------|
| Pa       | art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49   | <del>)48 -</del> | see in        | strı             | ıctio | ns)        |
| 18       | Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.                                      | 1                |               |                  |       |            |
|          | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)  | l                |               |                  |       |            |
| t        | Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🛄 and enter 1%                                       | 1                |               |                  | 1,4   | <u>.80</u> |
|          | of Part I, line 27b  |                  |               |                  |       |            |
|          | e All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)                    | - 1              |               |                  |       |            |
| 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                |               |                  | 1,4   | 08.        |
| 4        | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                  | 4                |               |                  |       | 0.         |
| 5        | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  | 5                |               |                  | 1,4   | 08.        |
| 6        | Credits/Payments:  |                  |               |                  |       |            |
|          | a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 5,934.  |                  |               |                  |       |            |
|          | Exempt foreign organizations - tax withheld at source  |                  |               |                  |       |            |
|          | E Tax paid with application for extension of time to file (Form 8868)  |                  |               |                  |       |            |
|          | Backup withholding erroneously withheld  6d  |                  |               |                  | _ ^   |            |
| _        | Total credits and payments. Add lines 6a through 6d  | 7                |               |                  | 5,9   | 34.        |
| 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                |               |                  |       | 26         |
| 10       | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  | 10               |               |                  | 4,5   | 26.        |
| 11<br>Ps | Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 4,526 • Refunded ▶ art VII-A Statements Regarding Activities             | 11               |               |                  |       | 0.         |
| ·        | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in |                  | <del></del>   |                  | Vac   | No         |
|          | any political campaign?  | "                | -             | 1a               | 100   | X          |
| h        | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?       |                  |               | 1 <u>a</u><br>1b |       | X          |
| •        | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published                    | tor              | H             | עו               |       |            |
|          | distributed by the foundation in connection with the activities  | 01               |               |                  | ŀ     |            |
| c        | Did the foundation file Form 1120-POL for this year?   |                  |               | 1c               |       | x          |
|          | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:   |                  | -             | 10               |       |            |
|          | (1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers. $\blacktriangleright$ \$ 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                |       | х          |
|          | 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          |                  | i             |                  |       |            |
|          | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes   |                  |               | 3                |       | <u>x</u>   |
| 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.  |                  |               |                  |       |            |
| 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 I         | aw               |               |                  | -     |            |
|          | remain in the governing instrument?  |                  | L             | 6                | X     |            |
| 7        | Did the foundation have at least \$5,000 in assets at any time during the year?  |                  | $\vdash$      | 7                | X     |            |
| _        | 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)   |                  | <u> </u>      |                  |       |            |
|          | PA   |                  | <u> </u>      |                  |       |            |
| 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)                  |                  | 1             |                  |       |            |
| _        | of each state as required by General Instruction G? If "No," attach explanation  |                  | -<br> -       | 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 calen         | aar              |               |                  |       |            |
| 10       | year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV                                 |                  | <b>-</b>      | 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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3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2009)

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

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

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

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4a

X

Yes X No

N/A

during the year?

| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, H  | lighly             |            |
|--|--------------------|------------|
| Paid Employees, and Contractors (continued)  |                    |            |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."  |                    |            |
| (a) Name and address of each person paid more than \$50,000 (b) Type (   | of service (c) Cor | npensation |
| NONE   |                    |            |
|  |                    |            |
|  |                    |            |
|  |                    |            |
|  |                    |            |
|  |                    |            |
|  |                    |            |
|  |                    |            |
|  |                    |            |
|  |                    |            |
| Total number of others receiving over \$50,000 for professional services   | <b>&gt;</b>        | 0          |
| Part IX-A Summary of Direct Charitable Activities  |                    |            |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | he Expense         | :S         |
| 1 N/A  |                    |            |
|  |                    |            |
|  | -                  |            |
| 2  |                    |            |
|  |                    |            |
|  |                    |            |
| 3  |                    |            |
|  |                    |            |
|  |                    |            |
| 4  |                    |            |
|  |                    |            |
| D-HV DIO   |                    |            |
| Part IX-B Summary of Program-Related Investments   | 1                  |            |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  | Amount             |            |
| 1 <u>N/A</u>   |                    |            |
|  |                    |            |
|  |                    |            |
| 2  |                    |            |
|  |                    |            |
| All other program-related investments. See instructions  |                    |            |
| All other program-related investments. See instructions.   |                    |            |
| 3  |                    |            |
|  |                    |            |
| Total. Add lines 1 through 3   | <b>•</b>           | 0.         |
|  | Form <b>990-I</b>  |            |

| P  | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four   | ndations    | s, see instructions) |
|----|---|-------------|----------------------|
| 1  | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:   |             |                      |
| a  |   | 1a          | 5,651,544.           |
| b  | Average of monthly cash balances  | 1b          | 165,146.             |
|    | Fair market value of all other assets   | 1c          | 404,201.             |
| d  |   | 1d          | 6,220,891.           |
| e  | Reduction claimed for blockage or other factors reported on lines 1a and  |             |                      |
| Ī  | 1c (attach detailed explanation) 1e 0 •   |             |                      |
| 2  | Acquisition indebtedness applicable to line 1 assets  | 2           | 0.                   |
| 3  | Subtract line 2 from line 1d  | 3           | 6,220,891.           |
| 4  | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)   | 4           | 93,313.              |
| 5  | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4  | 5           | 6,127,578.           |
| 6  | Minimum investment return. Enter 5% of line 5   | 6           | 306,379.             |
| P  | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.) | d certair   | 1                    |
| 1  | Minimum investment return from Part X, line 6   | 1           | 306,379.             |
| 2a | Tax on investment income for 2009 from Part VI, line 5  |             | *                    |
| b  | Income tax for 2009. (This does not include the tax from Part VI.)  |             |                      |
| C  | Add lines 2a and 2b   | 2c          | 1,408.               |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1   | 3           | 304,971.             |
| 4  | Recoveries of amounts treated as qualifying distributions   | 4           | 0.                   |
| 5  | Add lines 3 and 4   | 5           | 304,971.             |
| 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           | 304,971.             |
| P  | art XII Qualifying Distributions (see instructions)   | <del></del> |                      |
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:  |             |                      |
| а  | ,   | 1a          | 165,370.             |
| b  | Program-related investments - total from Part IX-B  | 1b          | 0.                   |
| 2  | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes   | 2           | -                    |
| 3  | Amounts set aside for specific charitable projects that satisfy the:  |             |                      |
| a  | Suitability test (prior IRS approval required)  | 3a          |                      |
| b  | Cash distribution test (attach the required schedule)   | 3b          | 465.050              |
| 4  | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4  | 4           | 165,370.             |
| 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           | 165,370.             |
|    | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.            | qualifies   | for the section      |

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2008 | (c)<br>2008 | (d)<br>2009               |
|--|---------------|----------------------------|-------------|---------------------------|
| 1 Distributable amount for 2009 from Part XI,  |               |                            |             |                           |
| line 7   |               |                            |             | 304,971.                  |
| 2 Undistributed income, if any, as of the end of 2009  |               |                            |             |                           |
| a Enter amount for 2008 only   |               |                            | 157,995.    |                           |
| b Total for prior years:   |               |                            |             |                           |
| ,,   |               | 0.                         |             | ····                      |
| 3 Excess distributions carryover, if any, to 2009:   |               |                            |             |                           |
| a From 2004  |               |                            |             |                           |
| <b>b</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.  |               |                            | 155 005     |                           |
| a Applied to 2008, but not more than line 2a   |               |                            | 157,995.    |                           |
| <b>b</b> Applied to undistributed income of prior  |               | 0                          |             |                           |
| years (Election required - see instructions)   |               | 0.                         |             | <del></del>               |
| c Treated as distributions out of corpus   | •             |                            |             |                           |
| (Election required - see instructions)   | 0.            |                            |             | 7 275                     |
| d Applied to 2009 distributable amount   |               |                            | *           | 7,375.                    |
| e Remaining amount distributed out of corpus   | 0.            |                            |             | 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:   |               |                            |             |                           |
| a 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.                         |             |                           |
| d Subtract line 6c from line 6b. Taxable   |               |                            |             |                           |
| 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   |               |                            |             | 297,596.                  |
| 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.            |                            |             | <del></del>               |
| 9 Excess distributions carryover to 2010.  | 0             |                            |             |                           |
| 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<br>d Excess from 2008   |               |                            |             |                           |
| e Excess from 2009   |               |                            |             |                           |
| 6 EV0033 HOH 5000  |               |                            |             | Form <b>990-PF</b> (2009) |

| Part XIV Private Operating For   | KE FAMILY F                           |                                       | II A guestion (I)                                |                              | -1383/3/_ Fage 10         |
|--|---------------------------------------|---------------------------------------|--|------------------------------|---------------------------|
| <del></del>  |                                       |                                       | II-A, question 9)                                | N/A                          |                           |
| 1 a If the foundation has received a ruling of   |                                       | · -                                   |  |                              |                           |
| foundation, and the ruling is effective for  |                                       |                                       | ▶ ∟  | 4040(1)(2) 05                | 4049(4)(5)                |
| b Check box to indicate whether the found  |                                       | ig toundation described               | Prior 3 years                                    | 4942(j)(3) or L              | 4942(j)(5)                |
| 2 a Enter the lesser of the adjusted net   | Tax year<br>(a) 2009                  | (b) 2008                              | (c) 2007   | (d) 2006                     | (e) Total                 |
| income from Part I or the minimum  | (a) 2003                              | (6) 2000                              | (6) 2007   | (4) 2000                     | (0) 10141                 |
| investment return from Part X for  |                                       |                                       |  |                              |                           |
| each year listed   |                                       |                                       | ·  |                              | <del></del>               |
| <b>b</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  | - <u>-</u>                            |                                       | ļ  |                              |                           |
| 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<br>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  | L                                     |                                       |  |                              |                           |
| and 5 or more exempt   |                                       |                                       |  |                              |                           |
| organizations as provided in<br>section 4942(j)(3)(B)(iii)   |                                       |                                       |  |                              |                           |
| (3) Largest amount of support from   |                                       | <u></u>                               | <del>                                     </del> |                              |                           |
| • • •  |                                       |                                       |  |                              |                           |
| an exempt organization (4) Gross investment income   |                                       |                                       | ·  |                              |                           |
| Part XV Supplementary Info   | rmation (Comple                       | te this part only                     | if the founda                                    | tion had \$5,000             | or more in assets         |
| at any time during t   |                                       |                                       | ii tiio ioaiiae                                  | don naa qo,ooo               | J. 111010 111 400010      |
|  |                                       | · · · · · · · · · · · · · · · · · · · |  |                              |                           |
| <ul> <li>Information Regarding Foundation</li> <li>a List any managers of the foundation wh</li> </ul>   | ~                                     | than 2% of the total con              | stributions received h                           | w the foundation hefore      | the close of any tay      |
| year (but only if they have contributed in   |                                       |                                       | iti ibations received b                          | y the loundation before      | the close of any tax      |
| NONE   | , , , ,                               | ( /, / /                              |  |                              |                           |
| b List any managers of the foundation wh   | o own 10% or more of th               | e stock of a cornoration              | (or an equally large                             | nortion of the ownershir     | o of a partnership or     |
| other entity) of which the foundation has  |                                       |                                       | to an equally large                              | portion of the ownerstill    | , οι α ραι αιοιοπήρ στ    |
| NONE   | •                                     |                                       |  |                              |                           |
|  | on Cront Gift Loon                    | Sabalarahin ata P                     | rograme:   |                              |                           |
| 2 Information Regarding Contribution Check here ► X if the foundation of the fou |                                       |                                       |  | lage ant accept uncollect    | ad requests for funds. If |
| the foundation makes gifts, grants, etc.   |                                       |                                       |  |                              |                           |
|  | · · · · · · · · · · · · · · · · · · · |                                       |  | 110, 0011p1010 1101110 24, 2 | , 0, 4.10 4.              |
| a The name, address, and telephone num   | DEL OF THE PERSON TO WHO              | m applications snould D               | e auuresseu.                                     |                              |                           |
|  |                                       |                                       |  |                              |                           |
| T T ( )  |                                       | A                                     | abassid saalssidae                               |                              |                           |
| <b>b</b> The form in which applications should b   | e submitted and informa               | tion and materials they s             | snoula include;                                  |                              |                           |
|  | ····                                  |                                       |  |                              |                           |
| c Any submission deadlines:  |                                       |                                       |  |                              |                           |
|  |                                       | alaras abritili fili                  | landa of material -                              | o or other forters:          | <del></del>               |
| d Any restrictions or limitations on awards  | s, such as by geographic              | ai ai eas, charttadie fields          | s, kinas oi institution                          | s, or other factors:         |                           |
|  |                                       |                                       |  |                              |                           |
|  |                                       |                                       |  |                              | 5 000 PE (0000)           |

| Part XV Supplementary Informatio  |  |                      |                                  | · <sub>T</sub> ·         |
|---|--|----------------------|----------------------------------|--------------------------|
| 3 Grants and Contributions Paid During the  |  | Payment              |                                  |                          |
| Recipient Name and address (home or business)   | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount                   |
|   | or substantial contributor   | recipient            |                                  |                          |
| a Paid during the year THE BURKE FAMILY FOUNDATIONS 650 SMITHFIELD STREET; SUITE 250 PITTSBURGH, PA | SEE ATTACHED   | SEE<br>ATTACHED      | SEE ATTACHED                     | 165,370.                 |
| BOTTE 250 TITTEBONGH, TA  | •  |                      |                                  |                          |
|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
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|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
| Total   |  |                      | <b>▶</b> 3a                      | 165,370.                 |
| b Approved for future payment   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
| NONE  |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
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|   |  |                      |                                  |                          |
|   |  |                      |                                  |                          |
| Total<br>923611 02-02-10  |  |                      | <u>▶ 3b</u>                      | orm <b>990-PF</b> (2009) |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated.                 | Unrelate                | d business income         |                               | d by section 512, 513, or 514         | (e)                                    |
|---|-------------------------|---------------------------|-------------------------------|---------------------------------------|--|
| Program service revenue:  | (a)<br>Business<br>code | (b)<br>Amount             | (c)<br>Exclu-<br>sion<br>code | (d)<br>Amount                         | Related or exempt function income      |
| · ·   | Code                    |                           | +                             |                                       |  |
| a   | _                       |                           | <del></del>                   | · · · · · · · · · · · · · · · · · · · |  |
| b   |                         |                           |                               |                                       | <del></del>                            |
| <u> </u>  | _                       |                           | -                             |                                       |  |
| d   | _                       |                           | -                             |                                       |  |
| e   | _                       |                           |                               |                                       |  |
| f   | _                       |                           |                               |                                       |  |
| g Fees and contracts from government agencies                   |                         |                           | 1 1                           |                                       |  |
| 2 Membership dues and assessments                               |                         |                           |                               |                                       |  |
| 3 Interest on savings and temporary cash                        |                         |                           |                               |                                       |  |
| investments   |                         |                           | 14                            | 4,539.                                |  |
| 4 Dividends and interest from securities                        |                         |                           | 14                            | 4,539.<br>136,279.                    |  |
| 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                            | 3,621.                                |  |
|   | <del></del>             |                           | +                             | 3,021.                                |  |
| 8 Gain or (loss) from sales of assets other                     |                         |                           | 18                            | -52,931.                              |  |
| than inventory  |                         | <del></del>               | 10                            | -34,331.                              |  |
| 9 Net income or (loss) from special events                      | <u> </u>                |                           | + +                           |                                       |  |
| 10 Gross profit or (loss) from sales of inventory               | <u> </u>                | ****                      | + +                           |                                       | <u> </u>                               |
| 11 Other revenue:   |                         |                           |                               |                                       |  |
| a   | _                       |                           |                               |                                       |  |
| b   | _                       |                           | $\bot$                        |                                       |  |
| c   | _                       |                           |                               |                                       |  |
| d   | _                       |                           |                               |                                       |  |
| e   |                         |                           |                               |                                       |  |
| 12 Subtotal. Add columns (b), (d), and (e)                      |                         | 0                         | <u>.ll</u>                    | 91,128.                               | 0.                                     |
| 13 Total. Add line 12, columns (b), (d), and (e)                |                         |                           |                               | 13                                    | 91,128.                                |
| (See worksheet in line 13 instructions to verify calculations.) | )                       |                           |                               |                                       |  |
| Part XVI-B Relationship of Activities                           | to the Acc              | omplishment of E          | Exempt                        | Purposes                              |  |
| Line No. Explain below how each activity for which in           | come is reported        | in column (e) of Part XVI | -A contribut                  | ted importantly to the accomm         | plishment of                           |
| the foundation's exempt purposes (other the                     |                         |                           | 7.00                          |                                       |  |
|   |                         | <del></del>               |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         | <u> </u>                  |                               |                                       |  |
|   |                         |                           |                               |                                       | ··· ·· · · · · · · · · · · · · · · · · |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               | · · · · · · · · · · · · · · · · · · · |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |
|   |                         |                           |                               |                                       |  |

| Forr      | n 990-F                        | PF (2009) THE B                       | URKE FAMILY FO                           | UNDATION                               | 31-15  | 83757           | Pa         | ge <b>13</b> |
|-----------|--------------------------------|---------------------------------------|--|--|--|-----------------|------------|--------------|
|           | art X                          |                                       |  |  | nd Relationships With Nonch                          |                 |            |              |
|           |                                | . Exempt Organ                        | izations                                 |  |  |                 |            |              |
| 1         | Did th                         | ne organization directly or indi      | rectly engage in any of the follow       | ring with any other organization       | n described in section 501(c) of                     |                 | Yes        | No           |
|           | the C                          | ode (other than section 501(c)        | )(3) organizations) or in section        | 527, relating to political organiz     | zations?   |                 |            |              |
| a         | Trans                          | fers from the reporting founda        | ation to a noncharitable exempt o        | organization of:                       |  |                 |            |              |
|           | (1) (                          | Cash                                  |  |  |  | 1a(1)           |            | X            |
|           | (2)                            | Other assets                          |  |  |  | 1a(2)           |            | X            |
| b         | Other                          | transactions:                         |  |  |  |                 |            |              |
|           | (1) 5                          | Sales of assets to a noncharital      | ble exempt organization                  |  |  | 16(1)           |            | X            |
|           | (2) F                          | Purchases of assets from a no         | ncharitable exempt organization          |  |  | 1b(2)           |            | X            |
|           | (3) F                          | Rental of facilities, equipment,      | or other assets                          |  |  | 1b(3)           |            | X            |
|           | (4) F                          | Reimbursement arrangements            |  |  |  | 1b(4)           |            | X            |
|           | (5) L                          | oans or loan guarantees               |  |  |  | 1b(5)           |            | X            |
|           | (6) F                          | Performance of services or me         | mbership or fundraising solicitat        | tions                                  |  | 1b(6)           |            | X            |
| C         | Sharı                          | ng of facilities, equipment, ma       | uling lists, other assets, or paid e     | employees                              |  | 1c              |            | X            |
| d         | If the                         | answer to any of the above is         | "Yes," complete the following sc         | hedule. Column (b) should alw          | rays show the fair market value of the goods         | s, other ass    | ets,       |              |
|           | or se                          | rvices given by the reporting fo      | oundation. If the foundation rece        | ived less than fair market value       | e in any transaction or sharing arrangement          | t, show in      |            |              |
|           | colun                          | nn (d) the value of the goods,        | other assets, or services receive        |  |  |                 |            |              |
| (a)       | Line no                        | (b) Amount involved                   | (c) Name of noncharital                  | ble exempt organization                | (d) Description of transfers, transactions, ar       | nd sharing arr  | angeme     | nts          |
|           |                                |                                       | N/A                                      | 2112811                                |  |                 |            |              |
|           |                                |                                       |  | -100-111                               |  |                 |            |              |
|           |                                |                                       |  | N = = N                                |  |                 |            |              |
|           |                                |                                       |  |  |  |                 |            |              |
|           |                                |                                       |  |  |  |                 |            |              |
|           |                                |                                       |  |  |  |                 |            |              |
|           |                                |                                       |  | ***                                    |  |                 |            |              |
|           |                                |                                       |  |  |  |                 |            |              |
|           |                                |                                       | ·  |  |  |                 |            |              |
| _         |                                |                                       |  |  |  |                 |            |              |
|           |                                |                                       |  | *******                                |  |                 |            |              |
| _         |                                |                                       |  |  |  |                 |            | -            |
|           |                                |                                       |  |  |  |                 |            |              |
|           |                                |                                       |  |  |  |                 |            |              |
|           |                                |                                       |  |  |  |                 |            |              |
| _         | مطاه جا                        | . Santadakan dirankhi na midiraa      | the officered with or related to on      | no or more toy everant organiz         | national described                                   |                 |            |              |
| 28        |                                | •                                     | tly affiliated with, or related to, or   | , ,                                    | ations described                                     | □ vaa           | Ī          | No           |
| _         |                                | s," complete the following sch        | r than section 501(c)(3)) or in se       | 5011011 327                            |  | Yes             |            | טאו ב        |
|           | 11 16                          | (a) Name of org                       |  | (b) Type of organization               | (c) Description of relation                          | nship           |            |              |
| _         |                                | N/A                                   | Junization                               | (b) t)po or organization               | (c) coorp.or or order                                |                 |            |              |
| _         |                                | M/A                                   |  |  |  |                 |            |              |
| _         |                                | <del></del>                           |  |  |  |                 |            |              |
| _         | •                              |                                       |  |  |  |                 |            |              |
|           |                                |                                       |  |  |  |                 |            | <del></del>  |
| П         |                                |                                       |  |  | ents, and to the best of my knowledge and belief, it | is true, corre  | ct,        |              |
|           | and cor                        | nplete Declaration of preparer (other | er tyfan taxtayer or fiduciary) is based | on all information of which preparer h |  |                 |            |              |
|           | 0                              | 1                                     |  | 11/2/2010                              | TEUSPEE  |                 |            |              |
| ere       | S                              | gnature of officer or trustee         |  | Date                                   | Title  |                 |            |              |
| 딉         |                                | Preparer's                            | ( ) Lot of Alle C                        | Da Da                                  | ate Check if Prep                                    | arer's identify | ring nun   | nber         |
| Sign Here | aid<br>arer's<br>Only          | signature ROBER                       | Y J. LALLY, C                            | PA 10                                  | 0/13/10 self-<br>employed ►                          |                 |            |              |
|           | Paid<br>spare                  | Firm's name (or yours LALL            |  |  | EIN ►  |                 |            |              |
|           | Paid<br>Preparer's<br>Use Only | if self-employed), 5700               | CORPORATE DRI                            |  |  |                 |            |              |
| $\Box$    |                                | address, and ZIP code PITT            | SBURGH, PA 152                           | 37                                     | Phone no. <b>(41</b>                                 | <u>2)367</u>    | <u>-81</u> | 90           |

Form **990-PF** (2009)

# Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

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

OMB No 1545-0047

2009

**Employer identification number** 

| T  | THE BURKE FAMILY FOUNDATION   | 31-1583757   |
|--|---|--|
| Organization type (check                                   | x 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 found  | ation  |
|  | 527 political organization  |  |
| Form 990-PF  | X 501(c)(3) exempt private foundation   |  |
|  | 4947(a)(1) nonexempt charitable trust treated as a private foundation   | n  |
|  | 501(c)(3) taxable private foundation  |  |
|  | on is covered by the <b>General Rule</b> or a <b>Special Rule</b> .<br>(c)(7), (8), or (10) organization can check boxes for both the General Rule and a  | a Special Rule See instructions  |
| General Rule   |   |  |
| <del>-</del>   | tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or mplete Parts I and II.   | r more (in money or property) from any one   |
| Special Rules  |   |  |
| 509(a)(1) and 17   | 01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support ter<br>70(b)(1)(A)(vi), and received from any one contributor, during the year, a contrib<br>on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and   | oution of the greater of (1) \$5,000 or (2) 2%                                       |
| aggregate contr  | 01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from an ributions of more than \$1,000 for use exclusively for religious, charitable, scient of cruelty to children or animals. Complete Parts I, II, and III   |  |
| contributions for<br>If this box is che<br>purpose. Do not | O1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from an or use exclusively for religious, charitable, etc., purposes, but these contribution ecked, enter here the total contributions that were received during the year for it complete any of the parts unless the <b>General Rule</b> applies to this organizatio able, etc., contributions of \$5,000 or more during the year. | ns did not aggregate to more than \$1,000 an exclusively religious, charitable, etc, |
| but it must answer "No"<br>that it does not meet the       | on that is not covered by the General Rule and/or the Special Rules does not file on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).  | Z, or on line 2 of its Form 990-PF, to certify                                       |
| LHA For Privacy Act an                                     | nd Paperwork Reduction Act Notice, see the Instructions   | Schedule B (Form 990, 990-EZ, or 990-PF) (2009)                                      |

for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

### THE BURKE FAMILY FOUNDATION

31-1583757

|                   | Ocatilists of  |                             | 1583/5/  |
|-------------------|--|-----------------------------|--|
| Part I            | Contributors (see instructions)                                      | -                           |  |
| (a)<br><u>No.</u> | (b)<br>Name, address, and ZIP + 4                                    | (c) Aggregate contributions | (d) Type of contribution   |
| 1                 | CHARLES R. BURKE CLAT00 650 SMITHFIELD STREET PITTSBURGH, PA 15222   | \$\$                        | Person X Payroll Noncash (Complete Part II if there is a noncash contribution)   |
| (a)<br>No.        | (b)<br>Name, address, and ZIP + 4                                    | (c) Aggregate contributions | (d)<br>Type of contribution  |
| 2                 | CHARLES R. BURKE CLAT02 650 SMITHFIELD STREET PITTSBURGH, PA 15222   | \$\$\$                      | Person X Payroll   |
| (a)<br>No.        | (b)<br>Name, address, and ZIP + 4                                    | (c) Aggregate contributions | (d)<br>Type of contribution  |
| 3                 | CHARLES R. BURKE CLAT03  650 SMITHFIELD STREET  PITTSBURGH, PA 15222 | \$\$                        | Person X Payroll   |
| (a)<br>No.        | (b)<br>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  Noncash  (Complete Part II if there is a noncash contribution) |
| (a)<br>No.        | (b)<br>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   |
| (a)<br>No.        | (b)<br>Name, address, and ZIP + 4                                    | (c) Aggregate contributions | (d) Type of contribution   |
| 6                 | CHARLES R. BURKE CLUT08 650 SMITHFIELD STREET                        | \$117,094.                  | Person X Payroll  Noncash  (Complete Part II if there                            |
| 923452 02-0       | PITTSBURGH, PA 15222   | Schedule R (Form            | is a noncash contribution.)<br>990, 990-EZ, or 990-PF) (2009)                    |

Name of organization

Employer identification number

31-1583757

| Part I     | Contributors (see instructions)                                      |                             |   |
|------------|--|-----------------------------|---|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                    | (c) Aggregate contributions | (d) Type of contribution  |
| 7          | CHARLES R. BURKE CLUT98  650 SMITHFIELD STREET  PITTSBURGH, PA 15222 | \$77,439.                   | Person X Payroll  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                    | (c) Aggregate contributions | (d)<br>Type of contribution   |
|            |  | \$                          | Person Payroll Noncash (Complete Part II if there is a noncash contribution)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                    | (c) Aggregate contributions | (d)<br>Type of contribution   |
|            |  | \$                          | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                    | (c) Aggregate contributions | (d) Type of contribution  |
|            |  | \$                          | Person Payroll Noncash (Complete Part II of there is a noncash contribution)  |
| (a)<br>No. | (b)<br>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)<br>No. | (b)<br>Name, address, and ZIP + 4                                    | (c) Aggregate contributions | (d) Type of contribution  |
|            |  | \$\$                        | Person Payroll Noncash (Complete Part II if there is a noncash contribution)  |

Burke Family Foundation Grants Paid

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| Date       | Name                                    | Name Address   | Name Address                        | Amount      |
|------------|---|--|-------------------------------------|-------------|
| 01/02/2009 | Unity Lutheran Community Mission        | 7825 1/2 Hamilton Avenue Pittsburgh, PA 15208          | General Operating Support           | \$500.00    |
| 01/06/2009 | Barrier Island Parks Society            | Boca Grande, FL 33921                                  | General Operating Support           | \$20.00     |
| 01/06/2009 | Boca Grande Art Alliance                | Boca Grande, FL 33921                                  | General Operating Support           | \$20 00     |
| 01/06/2009 | Boca Grande Child Care Center           | Boca Grande, FL 33921                                  | General Operating Support           | \$50.00     |
| 01/06/2009 | Boca Grande Health Clinic               | Boca Grande, FL 33921                                  | General Operating Support           | \$1,250 00  |
| 01/06/2009 | Boca Grande Historical Society & Museum | Boca Grande, FL 33921                                  | General Operating Support           | \$50.00     |
| 01/06/2009 | Friends of Boca Grande Community Center | Boca Grande, FL 33921                                  | General Operating Support           | \$1,000.00  |
| 01/06/2009 | G.I.C.I.A.                              | Boca Grande, FL 33921                                  | General Operating Support           | \$200 00    |
| 01/06/2009 | Greater Pittsburgh Community Food Bank  | 1 North Lindent Street Duquesne, PA 15110              | General Operating Support           | \$200 00    |
| 01/06/2009 | Johann Fust Community Library           | Boca Grande, FL 33921                                  | General Operating Support           | \$50.00     |
| 01/06/2009 | Lemon Bay Jr Golf Foundation            | Boca Grande, FL 33921                                  | General Operating Support           | \$1,000 00  |
| 01/06/2009 | Louise D. Crowinshield Community House  | Boca Grande, FL 33921                                  | General Operating Support           | \$50.00     |
| 01/06/2009 | Royal Palm Players                      | Boca Grande, FL 33921                                  | General Operating Support           | \$50 00     |
| 01/06/2009 | The Island School                       | Boca Grande, FL 33921                                  | General Operating Support           | \$20 00     |
| 01/06/2009 | United Methodist Church of Boca Grande  | Boca Grande, FL 33921                                  | General Operating Support           | \$3,750.00  |
| 01/30/2009 | Boca Grande Women's Club                | Boca Grande, FL 33921                                  | General Operating Support           | \$50.00     |
| 02/05/2009 | Boca Grande Health Clinic               | Boca Grande, FL 33921                                  | General Operating Support           | \$25 00     |
| 02/05/2009 | Hillman Cancer Center                   | 5115 Centre Avenue, Pittsburgh, PA 15232               | General Operating Support           | \$25.00     |
| 02/13/2009 | American Cancer Society                 | 320 Bılmar Drive; Pittsburgh, PA 15205                 | General Operating Support           | \$50.00     |
| 02/13/2009 | Boca Grande Health Clinic               | Boca Grande, FL 33921                                  | General Operating Support           | \$50 00     |
| 03/05/2009 | Boca Grande Women's Club                | Boca Grande, FL 33921                                  | General Operating Support           | \$12.50     |
| 03/08/2009 | Boca Grande Child Care Center           | Boca Grande, FL 33921                                  | General Operating Support           | \$50.00     |
| 04/01/2009 | The Lighthouse                          | Boca Grande, FL 33921                                  | General Operating Support           | \$50.00     |
| 04/08/2009 | Boyd Community Center                   | 1220 Powers Run Road Pittsburgh, PA 15238              | General Operating Support           | \$15,000.00 |
| 04/30/2009 | Mentoring Partnership of SWPA           | 2934 Smallman Street 2nd Floor Pittsburgh, PA 15201    | General Operating Support           | \$5,000.00  |
| 04/30/2009 | Planned Parenthood Of WPA               | 209 Ninth Street - Suite 400 Pittsburgh, PA 15222-3501 | General Operating Support           | \$250.00    |
| 05/01/2009 | Fox Chapel Presbyterian Church          | 384 Fox Chapel Road Pittsburgh, PA 15238               | General Operating Support           | \$3,750 00  |
| 05/29/2009 | 100 Miles for Elsie and ALS             | ALS Assoc 1201 E. Colfax Ave Denver CO 80218           | General Operating Support           | \$50.00     |
| 06/22/2009 | Presbyterian SeniorCare Foundation      | Longwood at Oakmont Verona, PA 15147                   | General Operating Support           | \$500.00    |
| 07/01/2009 | Royal Palm Players                      | Boca Grande, FL 33921                                  | General Operating Support           | \$50.00     |
| 07/17/2009 | National Multiple Sclerosis Society     | Pittsburgh, PA 15233                                   | General Operating Support           | \$50.00     |
| 08/14/2009 | Steeltown Entertainment Project         | 4802 Fifth Avenue, Pittsburgh, PA 5213                 | Support of Salk Vaccine Documentary | \$2,500.00  |
| 08/20/2009 | Greater Pittsburgh Council, BSA         | 1275 Bedford Avenue; Pittsburgh, PA 15219              | General Operating Support           | \$75.00     |
| 600/60/60  | American Red Cross                      | 225 Boulevard of the Allies, Pittsburgh, PA 15222      | General Operating Support           | \$1,500 00  |
| 09/14/2009 | The Pittsburgh Foundation               | Five PPG Place - Suite 250 Pittsburgh, PA 15222        | General Operating Support           | \$50 00     |

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| Amount       | \$50.00  | \$0 00   | \$125 00                                  | \$500 00                                  | \$15,000 00                               | \$947.50                                | \$25,000 00                               | \$125 00   | \$500.00                               | \$60 00                                  | \$500 00                  | \$10,000.00                               | \$500.00                                 | \$500 00                            | \$500.00                  | \$200 00                                  | \$200 00                                    | \$3,750.00                               | \$1,250 00                                | \$125 00                               | \$125.00                                     | \$500.00                                  | \$250.00   | \$500.00                  | \$500 00                              | \$375 00                                     | \$1,000 00                                 | \$1,000 00                                | \$125.00                                | \$5,000 00                                   | \$1,250 00                           | \$1,250.00                                | \$125.00                             | \$1,250 00   | \$500 00                                  |
|--------------|--|--|---|---|---|---|---|--|--|--|---------------------------|---|--|-------------------------------------|---------------------------|---|---|--|---|--|--|---|--|---------------------------|---------------------------------------|--|--|---|---|--|--------------------------------------|---|--------------------------------------|--|---|
| Name Address | General Operating Support                              | General Operating Support                              | General Operating Support                 | General Operating Support                 | Support of Construction Capital Campaign  | General Operating Support               | Support of Roboworld Exhibit              | General Operating Support                            | General Operating Support              | General Operating Support                | General Operating Support | General Operating Support                 | General Operating Support                | General Operating Support           | General Operating Support | General Operating Support                 | General Operating Support                   | General Operating Support                | General Operating Support                 | General Operating Support              | General Operating Support                    | General Operating Support                 | General Operating Support                            | General Operating Support | General Operating Support             | General Operating Support                    | General Operating Support                  | General Operating Support                 | General Operating Support               | General Operating Support                    | General Operating Support            | General Operating Support                 | General Operating Support            | General Operating Support                              | General Operating Support                 |
| Name Address | 209 Ninth Street - Suite 400 Pittsburgh, PA 15222-3501 | 209 Ninth Street - Suite 400 Pittsburgh, PA 15222-3501 | 614 Dorseyville Road Pittsburgh, PA 15238 | 5920 Kirkwood Street Pittsburgh, PA 15206 | 1220 Powers Run Road Pittsburgh, PA 15238 | 4400 Forbes Avenue Pittsburgh, PA 15213 | One Allegheny Avenue Pittsburgh, PA 15212 | 6301 Northumberland Street Pittsburgh, PA 15217-9924 | 19 Children's Way Pittsburgh, PA 15212 | 1300 Bingham Street Pittsburgh, PA 15203 | New London, CT 06320      | 2915 Webster Avenue Pittsburgh, PA 152129 | 250 N Highland Ave; Pittsburgh, PA 15206 | P.O. Box 8435 Boston, MA 02266-8435 | Pittsburgh, PA 15206      | 12 Stratmore Avenue, Pittsburgh, PA 15205 | 500 Chartiers Avenue McKees Rocks, PA 15136 | 384 Fox Chapel Road Pittsburgh, PA 15238 | 7227 Reynolds Street Pittsburgh, PA 15208 | P.O. Box 1212 Alıquıppa, PA 15001-6212 | 2600 East Carson Street Pittsburgh, PA 15203 | 1 North Lindent Street Duquesne, PA 15110 | 100 Sheridan Square - 4th Floor Pittsburgh, PA 15206 | Gambier, OH 43022         | 437 Grant Street Pittsburgh, PA 15219 | 1815 Metropolitan Street Pittsburgh PA 15233 | 280 N Charles Street, Pittsburgh, PA 15214 | 2432 Greensburg Pike Pittsburgh, PA 15221 | One Schenley Park Pittsburgh, PA 15213  | 803 Liberty Avenue Pittsburgh, PA 15222-3703 | 621 Penn Avenue Pittsburgh, PA 15222 | 600 Penn Avenue Pittsburgh, PA 15222-3259 | One Wild Place, Pittsburgh, PA 15206 | 209 Ninth Street - Suite 400 Pittsburgh, PA 15222-3501 | 5500 Corporate Drive Pittsburgh, PA 15237 |
| Name         | Planned Parenthood Of WPA                              | Planned Parenthood Of WPA                              | Audubon Society of WPA                    | Beginning with Books                      | Boyd Community Center                     | Carnegie Museums of Pittsburgh          | Carnegie Science Center                   | Children's Institute                                 | Children's Museum                      | City Theatre                             | Connecticut College       | Crossroad Foundation                      | East End Cooperative Ministry            | Elderhostel                         | Ellis School              | First United Pres Church Crafton Heights  | Focus On Renewal                            | Fox Chapel Presbyterian Church           | Frick Art & Historical Center             | Gateway Rehabilitation Center          | Goodwill Industries of Pittsburgh            | Greater Pittsburgh Community Food Bank    | Greater Pittsburgh Literacy Council                  | Kenyon College            | Kids' Voice                           | Manchester Bidwell Corporation               | Mosiac Community Church                    | PACE School                               | Phipps Conservatory & Botanical Gardens | Pittsburgh Cultural Trust                    | Pittsburgh Public Theater            | Pittsburgh Symphony                       | Pittsburgh Zoo & Aquarium            | Planned Parenthood Of WPA                              | Pressley Ridge Foundation                 |
| Date         | 12/02/2009   | 12/02/2009   | 12/21/2009                                | 12/21/2009                                | 12/21/2009                                | 12/21/2009                              | 12/21/2009                                | 12/21/2009   | 12/21/2009                             | 12/21/2009                               | 12/21/2009                | 12/21/2009                                | 12/21/2009                               | 12/21/2009                          | 12/21/2009                | 12/21/2009                                | 12/21/2009                                  | 12/21/2009                               | 12/21/2009                                | 12/21/2009                             | 12/21/2009                                   | 12/21/2009                                | 12/21/2009   | 12/21/2009                | 12/21/2009                            | 12/21/2009                                   | 12/21/2009                                 | 12/21/2009                                | 12/21/2009                              | 12/21/2009                                   | 12/21/2009                           | 12/21/2009                                | 12/21/2009                           | 12/21/2009   | 12/21/2009                                |

\$165,370.00

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| Mallic                                    | Name Address                                     | Name Address              | Amount      |
|---|--|---------------------------|-------------|
| Princeton University                      | Princeton, NJ 08540                              | General Operating Support | \$500.00    |
| Rails-to-Trails Conservancy               | 2121 Ward Ct NW; Washington DC 20037             | General Operating Support | \$50 00     |
| Salvation Army                            | P.O. Box 641106 Pittsburgh, PA 15264-1106        | General Operating Support | \$50.00     |
| Senator John Heinz History Center         | 1212 Smallman Street Pittsburgh, PA 15222-4200   | General Operating Support | \$0 00      |
| Senator John Heinz History Center         | 1212 Smallman Street Pittsburgh, PA 15222-4200   | General Operating Support | \$5,000.00  |
| Shady Side Academy                        | 423 Fox Chapel Road Pittsburgh, PA 15238-2296    | General Operating Support | \$125.00    |
| Shadyside Hospital Foundation             | Pittsburgh, PA 15232                             | General Operating Support | \$50.00     |
| Sojourner House                           | Pittsburgh, PA 15233                             | General Operating Support | \$250 00    |
| St. Margaret Memorial Hospital Foundation | 815 Freeport Road Pittsburgh, PA 15215           | General Operating Support | \$250.00    |
| The Pittsburgh Foundation                 | Five PPG Place - Suite 250 Pittsburgh, PA 15222  | General Operating Support | \$2,500.00  |
| The Pittsburgh Project                    | 2801 North Charles Street Pittsburgh, PA 15214   | General Operating Support | \$5,000.00  |
| United Way of Allegheny County            | 1250 Penn Avenue Pittsburgh, PA 15222            | General Operating Support | \$25,000.00 |
| Jnity Lutheran Community Mission          | 7825 1/2 Hamilton Avenue Pittsburgh, PA 15208    | General Operating Support | \$500.00    |
| University of Virginia Law School Foundat | 580 Massie Road Charlottesville, VA 22903-1789   | General Operating Support | \$500.00    |
| Western Pennsylvania Conservancy          | 209 Fourth Avenue Pittsburgh, PA 15222-2075      | General Operating Support | \$125.00    |
| Westminster College                       | New Wilmington, PA                               | General Operating Support | \$12,500.00 |
| Women's Center & Shelter                  | P.O. Box 9024 Pittsburgh, PA 15224               | General Operating Support | \$250.00    |
| World Affairs Council                     | 501 Grant Street Suite 1175 Pittsburgh, PA 15219 | General Operating Support | \$50.00     |
| WQED of Pittsburgh                        | 4802 Fifth Avenue Pittsburgh, PA 15213           | General Operating Support | \$500.00    |

| FORM 990-PF INTEREST ON SAVINGS A  | ND TEMPORARY CA      | ASH I | NVESTMENTS             | STATEMENT           | 1          |
|--|----------------------|-------|------------------------|---------------------|------------|
| SOURCE   |                      |       |                        | AMOUNT              |            |
| PNC BANK THE BURKE FOUNDATIONS   |                      |       | -                      | 4,4                 | 63.<br>76. |
| TOTAL TO FORM 990-PF, PART I, LINE   | 3, COLUMN A          |       | =                      | 4,5                 | 39.        |
| FORM 990-PF DIVIDENDS AND  | INTEREST FROM        | SECU  | RITIES                 | STATEMENT           | 2          |
| SOURCE   | GROSS AMOUNT         |       | ITAL GAINS<br>IVIDENDS | COLUMN (A<br>AMOUNT | )          |
| THE BURKE FOUNDATIONS  | 136,279.             |       | 0.                     | 136,2               | 79.        |
| TOTAL TO FM 990-PF, PART I, LN 4   | 136,279.             |       | 0.                     | 136,2               | 79.        |
| FORM 990-PF REN  | TAL INCOME           |       |                        | STATEMENT           | 3          |
| KIND AND LOCATION OF PROPERTY  |                      |       | ACTIVITY<br>NUMBER     | GROSS<br>RENTAL INC | OME        |
| THE BURKE FOUNDATION (K-1)   |                      |       | 1                      | -38                 | 80.        |
| TOTAL TO FORM 990-PF, PART I, LINE   | 5 <b>A</b>           |       | =                      | -38                 | 80.        |
| FORM 990-PF O  | THER INCOME          |       |                        | STATEMENT           | 4          |
|  | (A)                  | ,     | (B)<br>NET INVEST-     | (C)<br>ADJUSTEI     | D          |
| DESCRIPTION  | REVENUE<br>PER BOOKS |       | MENT INCOME            |                     | ME         |
| DESCRIPTION  THE BURKE FOUNDATIONS (K-1) THE BURKE FOUNDATIONS (K-1) THE BURKE FOUNDATIONS (K-1) THE BURKE FOUNDATIONS (K-1) | PER BOOKS            |       | -1,054<br>4,677<br>-5  | NET INCOM           | ME<br>——   |

| FORM 990-PF   | ACCOUNTI                            | NG FEES                             |                               | TATEMENT 5                    |
|---|-------------------------------------|-------------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS        | (B)<br>NET INVEST-<br>MENT INCOME   |                               |                               |
| ACCOUNTING FEES   | 1,300.                              | 0.                                  |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 16B  | 1,300.                              | 0.                                  |                               | 0.                            |
| FORM 990-PF (   | OTHER PROFES                        | SIONAL FEES                         | S                             | TATEMENT 6                    |
| DESCRIPTION   | EXPENSES                            | (B)<br>NET INVEST-<br>MENT INCOME   | ADJUSTED                      |                               |
| SERVICE CHARGES   | 100.                                | 0.                                  |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 16C  | 100.                                | 0.                                  |                               | 0.                            |
| FORM 990-PF   | TAX                                 | ES                                  | S                             | TATEMENT 7                    |
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS        | (B)<br>NET INVEST-<br>MENT INCOME   |                               | (D)<br>CHARITABLE<br>PURPOSES |
| PA TAX FOREIGN TAX  | 15.<br>2,440.                       | 0.<br>2,440.                        |                               | 0.                            |
| TO FORM 990-PF, PG 1, LN 18   | 2,455.                              | 2,440.                              |                               | 0.                            |
| FORM 990-PF   | OTHER E                             | XPENSES                             | S                             | TATEMENT 8                    |
| DESCRIPTION   | (A)<br>EXPENSES<br>PER BOOKS        | (B)<br>NET INVEST-<br>MENT INCOME   | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |
| THE BURKE FOUNDATIONS (K-1) THE BURKE FOUNDATIONS (K-1) THE BURKE FOUNDATIONS (K-1) THE BURKE FOUNDATIONS (K-1) | 47,303.<br>1,201.<br>22,715.<br>17. | 47,303.<br>1,201.<br>22,715.<br>17. |                               | 0.<br>0.<br>0.                |
| TO FORM 990-PF, PG 1, LN 23   | 71,236.                             | 71,236.                             |                               | 0.                            |
|   |                                     |                                     |                               |                               |

| FORM 990-PF OTHE                    | ER INVESTMENTS      |            | STATEMENT            |
|-------------------------------------|---------------------|------------|----------------------|
| DESCRIPTION                         | VALUATION<br>METHOD | BOOK VALUE | FAIR MARKET<br>VALUE |
| THE BURKE FOUNDATIONS               | COST                | 8,482,669. | 7,498,67             |
| TOTAL TO FORM 990-PF, PART II, LINE | 3 13                | 8,482,669. | 7,498,67             |

| Form 8868               | 3 (Rev. 4-2009)  |                        |                 |                  | Р            | age 2        |
|-------------------------|--|------------------------|-----------------|------------------|--------------|--------------|
| • If you                | are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II an   | d check this b         | ox              |                  | . ▶ [X       | ]            |
| Note. On                | ly complete Part II if you have already been granted an automatic 3-month extension on a   | previously filed       | 1 Form 8868     | i                |              |              |
| o If you                | are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)  |                        |                 |                  |              |              |
| Part II                 | Additional (Not Automatic) 3-Month Extension of Time. Only file th   | e onginal (no c        | opies need      | ed).             |              |              |
| Type or                 | Name of Exempt Organization  | ,                      | Employer        | identific        | ation num    | ıbег         |
| print<br>File by the    | THE BURKE FAMILY FOUNDATION  | ļ                      | 31-             | 15837            | 57           |              |
| extended                | Number, street, and room or suite no. If a P.O. box. see instructions  | ł                      | For IRS us      | e only           |              |              |
| due date for filing the | 650 SMITHFIELD STREET, NO. 250   |                        | <u> </u>        | <del></del>      | <del></del>  |              |
| return See              | City, town or post office, state, and ZIP code For a foreign address, see instructions PITTSBURGH, PA 15222  |                        | _               |                  |              | ,            |
| Check ty                | pe of return to be filed (File a separate application for each return).  | _                      |                 |                  |              |              |
| =                       |  | m 1041-A [<br>m 4720 [ | Form 5          | _                | Form 8       | 1870         |
| STOPI De                | o not complete Part II if you were not already granted an automatic 3-month extension  | on a previou           | sly filed Fo    | rm 8868.         |              |              |
|                         |  | <del></del>            |                 |                  |              |              |
|                         | CHARLES BURKE, JR.  10 oks are in the care of ► 650 SMITHFIELD STREET - PITTSBUE   | GH, PA                 | 15222           |                  | <del></del>  | <del></del>  |
|                         | one No ▶ <u>(412) 471-4550</u> FAX No. ▶   |                        |                 |                  |              | _            |
|                         | rganization does not have an office or place of business in the United States, check this b  | •                      |                 | -                | <b>▶</b> ∟   | i            |
|                         | s for a Group Return, enter the organization's four digit Group Exemption Number (GEN)   |                        | is is for the v | •                |              | this         |
| box ▶                   |  | and EINs of all        | members th      | <u>e extensi</u> | on is for.   |              |
|                         | quest an additional 3 month extension of time until NOVEMBER 15, 2010  |                        |                 |                  |              |              |
|                         |  | and ending _           | <del></del>     |                  |              |              |
|                         |  | al return              | Chan            | ge in acci       | ounting pe   | riod         |
|                         | te in detail why you need the extension  | MTON NY                |                 |                  |              |              |
|                         | DITIONAL TIME IS NEEDED TO GATHER THE INFORMA  | TITON NE               | CESSAR          | Y TO             | FILE         | <u>A</u> _   |
|                         | MPLETE AND ACCURATE RETURN.  |                        | <del></del>     | <del></del>      | ,            |              |
|                         | is application is for Form 990 BL, 990 PF, 990-T, 4720, or 6069, enter the tentative tax, less   | s any                  |                 |                  | 2 50         | ٠,           |
|                         | refundable credits. See instructions.<br>is application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and e   | timated                | 8a \$           |                  | 2,50         | 13.          |
| _                       | payments made. Include any prior year overpayment allowed as a credit and any amount p   |                        |                 |                  |              |              |
|                         | viously with Form 8868.  | alu                    | 8b \$           |                  | 5,93         |              |
|                         | ance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required   | denosit                | 8b \$           |                  | 3,33         | <u>. 4 -</u> |
|                         | FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See  | •                      | 8c \$           |                  |              | 0.           |
|                         | Signature and Verification   | 11,011,001,01,01       | 00 1 0          |                  |              | <u></u>      |
| Under pena              | lties of perjury, I declare that I have examined this form, including accompanying schedules and staten<br>rrect, and complete, and that I am authorized to prepare this form. | ents, and to the       | best of my kr   | owledge a        | ind belief,  |              |
| Signature )             | Ralph C May Title > CPA  |                        | Date >          | 3/12             | /10          |              |
|                         | 0  |                        |                 | Form 886         | 58 (Rev. 4-2 | 009)         |
|                         | COP  | Y                      |                 |                  |              |              |

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