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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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

For	calen	ndar year 2012 or tax year beginning MAY	7 1, 2012	, and ending	<u>APR 30, 2013</u>	
Na	me of	f foundation			A Employer identification	number
E	UR	T FAMILY FOUNDATION			36-7190233	
Nu	nber a	and street (or P O box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number	
4	12	FOX MEADOW DRIVE			843-837-42	35
		own, state, and ZIP code		, 	C If exemption application is p	
	-	THFIELD, IL 60093-4301			Trexemption application is p	ending, Check hare
		call that apply: Initial return	Initial return of a fo	rmer nublic charity	D 1. Foreign organizations	check here
u ·	JIICUN	Final return	Amended return	initial public charity	J. Toroigh organizations	s, check here
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
	······································				check here and attach co	mputation
# (_	type of organization: X Section 501(c)(3) e			E If private foundation sta	- 1
			Other taxable private founda		under section 507(b)(1)	(A), check here
		arket value of all assets at end of year J Account	-	Accrual	F If the foundation is in a (
		Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)	(B), check here $ ightharpoonup$ l
	· \$	2,814,108. (Part I, cold	ımn (a) must be on casn t	oasis.)	-	1 40
IP:	artill	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check X If the foundation is not required to attach Sch. 8				
	3	Interest on savings and temporary cash investments .				
	4	Dividends and interest from securities	79,777.	79,777.		SHANNINH I
	5a	Gross rents				
	ь	Net rental income or (loss)				
_	6a	Net gain or (loss) from sale of assets not on line 10	63,138.			
Revenue	Ь	Gross sales price for all assets on line 6a 869,816.				
ě	7			63,138.		
æ	8	Net short-term capital gain		007200		
		Income modifications				
	10a	Gross sales less returns				
		and allowances Less Cost of goods sold				
	l .	Gross profit or (loss)				
	11	Other income			,	31 XXXX
	12	• • • •	142,915.	142,915.		
		Total. Add lines 1 through 11	35,000.	17,500.		17,500
	13	Other employee calculations and wages	35,000.	17,500.	 RFCFI\	ED 11,300
	14	Other employee salaries and wages				12 13 ·
es	1	Pension plans, employee benefits			5 550 0 0	
nse	16a	Legal fees			DEC 2 6	2013
Expens	b	Accounting fees			+ 	<u> </u>
		Other professional fees			OGDEN	HT
Ë,	i	Interest				
tra	18	Taxes STMT 2	3,282.	1,198.		0
and Administrative	19	Depreciation and depletion				
Ē	20	Оссиралсу				
A	21	Travel, conferences, and meetings				
ñ	22	Printing and publications				
5	23	Other expenses STMT 3	11,961.	11,898.	,	63
atin	24	Total operating and administrative				
Operating		expenses. Add lines 13 through 23	50,243.	30,596.		17,563
ŏ	25	Contributions, gifts, grants paid	332,500.			332,500
	1	Total expenses and disbursements		··· - ·	1	
	-"	Add lines 24 and 25	382,743.	30,596.		350,063
		רוטט ווווטט ביז מווט בט	304,143.	30,330.	' 	330,003
	27	Subtract line 26 from line 12:	i i		t .	
	1	Subtract line 26 from line 12:	_220 020		İ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	a	Excess of revenue over expenses and disbursements	-239,828.	110 210	-	in to prove
	a b		-239,828.	112,319.	N/A	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

LHA For Paperwork Reduction Act Notice, see instructions.

Partille Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	End of year			
	(as.t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing	7,657.	25,697.	25,697.			
	2	Savings and temporary cash investments						
	3	Accounts receivable ▶	學是是自然學學	2011年1986年1986				
		Less: allowance for doubtful accounts	Jack School Programme at the same	The state of the s				
	4	Pledges receivable >	AND STATE OF THE PARTY OF THE P	B. WANTED TO STATE OF THE STATE				
	`	Less: allowance for doubtful accounts		Sattle Committee	The state of the s			
	5	Grants receivable						
	1 -	Receivables due from officers, directors, trustees, and other			-			
	"	disqualified persons						
	,		PARTICIPATION OF THE					
	7	Other notes and loans receivable			· · · · · · · · · · · · · · · · · · ·			
	١.	Less: allowance for doubtful accounts						
Assets	8	Inventories for sale or use						
SS	9	Prepaid expenses and deferred charges .						
1	L	Investments - U.S. and state government obligations						
	b	Investments - corporate stock STMT 4	1,795,449.	1,672,991.	1,968,953.			
	C	Investments - corporate bonds STMT 5	343,890.	209,516.	219,458.			
	11	Investments - land, buildings, and equipment basis						
		Less accumulated depreciation						
	12	Investments - mortgage loans						
	13	Investments - other STMT 6	770,844.	770,148.	600,000.			
	14	Land, buildings, and equipment; basis ▶			-			
		Less accumulated depreciation		1				
	15	Other assets (describe >						
	16	Total assets (to be completed by all filers)	2,917,840.	2,678,352.	2,814,108.			
_	17	Accounts payable and accrued expenses	744.	1,084.				
	18	Grants payable	/44.	1,004.				
		•						
Liabilities	19	Deferred revenue	<u> </u>					
Ē	20	Loans from officers, directors, trustees, and other disqualified persons						
<u>ia</u>	21	Mortgages and other notes payable						
_	22	Other liabilities (describe >)						
	ŀ							
	23	Total liabilities (add lines 17 through 22)	744.	1,084.				
		Foundations that follow SFAS 117, check here						
**	1	and complete lines 24 through 26 and lines 30 and 31.						
ces	24	Unrestricted	2,917,096.	2,677,268.				
Net Assets or Fund Balanc	25	Temporarily restricted						
Ba	26	Permanently restricted						
5		Foundations that do not follow SFAS 117, check here						
Ē		and complete lines 27 through 31.			11			
Ö	27	Capital stock, trust principal, or current funds						
ě	28	Paid-in or capital surplus, or land, bldg., and equipment fund						
Ass	29	Retained earnings, accumulated income, endowment, or other funds						
ë	30	Total net assets or fund balances	2,917,096.	2,677,268.				
Z	ا	Total net assets of fund balances	2,511,050.	2,011,200.				
		Total linking and and annual form discussion	2 017 040	2 670 252				
_		Total liabilities and net assets/fund balances	2,917,840.	2,678,352.				
P.	art	Analysis of Changes in Net Assets or Fund B	alances					
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30					
	(mus	st agree with end-of-year figure reported on prior year's return)		. 1	2,917,096.			
		amount from Part I, line 27a		2	-239,828.			
		r increases not included in line 2 (itemize)		3	0.			
		lines 1, 2, and 3		4	2,677,268.			
		eases not included in line 2 (itemize)		5	0.			
-		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	2,677,268.			
_			177,	<u></u>				

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Form 990-PF (2012)

BURT FAMILY FOUNDATION

ĽĘ	Capital Gains an	d Losses for Tax on In	vestment	t Income						
	(a) List and describe 2-story brick wareh	the kınd(s) of property sold (e.g. nouse; or common stock, 200 shs	., real estate, s. MLC Co.)], b	low ac - Purc - Dona			acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a	NORTHERN' TRUST	TRANSACTIONS					P	VARI	OUS	
Ь	NORTHERN TRUST	TRANSACTIONS					P	VARI	OUS	
_	CAPITAL GAINS D	IVIDENDS								
_d	1									
_ e			,		Щ,					
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					Sain or (loss) s (f) minus (
_a				204,26						<u>-6,833.</u>
_b				602,41	8.					56,553.
	13,418.			 						13,418.
d	<u></u>	• •								
<u>e</u>			<u></u>							
	Complete only for assets showing g								Col. (h) gain	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any		_		Losses	not less than (from col. (h))
_a										<u>-6,833.</u>
_b)									<u>56,553.</u>
	·									13,418.
d	<u> </u>									
_e	·		l				ſ			****
2	Capital gain net income or (net capital	al loss) { If gain, also enter if (loss), enter -0-			}	2				63,138.
3	Net short-term capital gain or (loss)	as defined in sections 1222(5) an	nd (6):							
	If gain, also enter in Part I, line 8, col		· /-] [
	If (loss), enter -0- in Part I, line 8				Ш	3	<u></u>		<u> N/A</u>	
L	Qualification Und	der Section 4940(e) for	Reduced	l lax on Net	Inv	estn	nent Inc	ome		
(F	or optional use by domestic private fo	undations subject to the section 4	4940(a) tax on	i net investment in	icome	e.)				
lf s	section 4940(d)(2) applies, leave this	part blank.								
	as the foundation liable for the section		, ,	•	riod?					Yes X No
<u> </u>	Yes," the foundation does not qualify Enter the appropriate amount in eac				ntrion	 .				
<u>'</u>	(a)	1	istructions be	Tore making any e						(d)
	Base periód years	(b) Adjusted qualifying dis	tributions	Net value of no	(c) nchar		-use assets	İ	Distrib	oùtion ratio
	Calendar year (or tax year beginning	11) 1 , , , ,		1101 14130 01 110					(COI. (D) GIV	ided by col. (c)) • 086296
_	2011 2010		0,049. $7,654.$				7,558 2,547		-	.160414
	2010	1	2,000.	-	2	, <u>04</u>	0,623			.125321
_	2008		7,639.				$\frac{0,023}{7,168}$.146104
	2007		8,991.				$\frac{7,100}{5,919}$.101799
_	2007		0, 221.	<u> </u>		, 44	<u> </u>	+		•101133
2	Total of line 1, column (d)							2		.619934
	Average distribution ratio for the 5-y	aar haca narind - divida tha total i	on line 2 hy 5	or by the number	of vo	arc.		-	 	.013334
J	the foundation has been in existence	•	on mic 2 by J,	or by the number	UI YE	ais		3		.123987
	the foundation has been in existence	in icas man a yeara						ا ا		.123307
4	Enter the net value of noncharitable-	use assets for 2012 from Part X,	line 5					4		2,329,853.
5	Multiply line 4 by line 3							5		288,871.
	· · · · ·									······································
6	Enter 1% of net investment income ((1% of Part I, line 27b)						6		1,123.
	·	,								
7	Add lines 5 and 6							7		289,994.
	Fotor qualifying distributions for S	ort VII. line d								
ď	Enter qualifying distributions from P	•						8	L	350,063.
	If line 8 is equal to or greater than lin See the Part VI instructions.	ne 7, check the box in Part VI, line	1b, and comp	olete that part usin	ig a 1	% tax	rate.			

			11902			'age 4	
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see in:	stru	ction	15)	
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcap \) and enter "N/A" on line 1.						
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 💹 and enter 1%	1			<u>1,1</u>	<u>23.</u>	
	of Part I, line 27b					1	
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.	
3	Add lines 1 and 2	3			1,1	<u>23.</u>	
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	_		1,1	23.	
6	Credits/Payments:						
a	2012 estimated tax payments and 2011 overpayment credited to 2012]					
	Exempt foreign organizations - tax withheld at source 6b						
	Tax paid with application for extension of time to file (Form 8868) 6c 2,000.					Ì	
	Backup withholding erroneously withheld 6d 6d						
	Total credits and payments. Add lines 6a through 6d	7			2.0	00.	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				26.	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			R	51.	
	Enter the amount of line 10 to be: Credited to 2013 estimated tax	11				0.	
	art VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		, .	Yes	No	
	any political campaign?			1a		Х	
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		-	1b		X	
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or	T		15		
	distributed by the foundation in connection with the activities.		İ	23.3		學項	
c	Did the foundation file Form 1120-POL for this year?		-	1c	بشنط	X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			, ,	° :	127	
_	(1) On the foundation. \blacktriangleright \$ 0 • (2) On foundation managers. \blacktriangleright \$ 0 •						
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		'				
٠	managers. ►\$ 0.				III.		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		-	2		X	
_	If "Yes," attach a detailed description of the activities			5.1	4.1°F	3	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	ır	į		٠٠,٠٠٠ خي د		
_	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		<u> </u>	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		-	4a		X	
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/a	4b			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	ſ	5		X	
	If "Yes," attach the statement required by General Instruction T.		F	7.52	. ونجواع	33	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			7.3	·②		
	By language in the governing instrument, or		i	A .	46.		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law	ŀ		(94)		
	remain in the governing instrument?		-	6		X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	Х		
	If "Yes," complete Part II, col. (c), and Part XV.		ļ		-		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			- 1			
	IL			- 1			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)						
	of each state as required by General Instruction G? If "No," attach explanation		[-	8b	Х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar	F				
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		1	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	

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

Form 990-PF (2012) BURT FAMILY FOUNDATION	4700 M		<u> 36-71902</u>	433 Pa	ge 6
Part VII-B Statements Regarding Activities for Which I	orm 4/20 May Be F	Required (contin	ued)	- · / · 12-	
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	` ''		es X No	1	į
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		<u></u>		
any voter registration drive?			s X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			- ,	į
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	for	ľ		
the prevention of cruelty to children or animals?		Ye	s X No		- 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i	in Regulations			1
section 53.4945 or in a current notice regarding disaster assistance (see instru	· · · · · · · · · · · · · · · · · · ·	J	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	•		▶	` ,	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined			·
expenditure responsibility for the grant?		//A	s No	\$1 " \$ \$2 " \$	[
	•	'/A	.5		-
If "Yes," attach the statement required by Regulations section 53.4945	, ,				.
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	Day premiums on		s X No		.
a personal benefit contract?		Ye	ا NO لحصا s:	~	 V
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b	X
If "Yes" to 6b, file Form 8870.		L1			
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No		<u> 1833</u>
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	magers, Highly	/		
					<u>.</u>
1 List all officers, directors, trustees, foundation managers and their		1	Take the second		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expen	ise ther
(a) Name and address	to position	enter -0-)	compensation	allowanc	es
SEE STATEMENT 7		35,000.	0.		0.
					
				1	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."			
	(b) Title, and average		(d) Contributions to	(e) Expen	nse
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expen account, of allowance	ther
NONE	devoted to position		compensation	allowalic	65
NONE					
		<u> </u>			
2022		 -			
Total number of other employees paid over \$50,000					0

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Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	on Managers, Highly	
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) Compensation
NONE	(2) 1) 10 01 01 01	(-)
NONE		
	-	
	j	
•		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		•
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1 N/A		
·		
2		
· · · · · · · · · · · · · · · · · · ·		
3		
- 1-100 ALCONO. 1		
4		
Part IX-B Summary of Program-Related Investments	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
		1
		1
Total, Add lines 1 through 3	. •	0.

0 . Form **990-PF** (2012)

P	Minimum Investment Return (All domestic foundations must complete this particle)	art Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			78 T
а	Average monthly fair market value of securities		1a	1,663,655.
b	Average of monthly cash balances		1b	16,678.
C	Fair market value of all other assets		1c	685,000.
đ	Total (add lines 1a, b, and c)		1d	2,365,333.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	2,365,333.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	• •	4	35,480.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		5	2,329,853.
6	Minimum investment return Enter 5% of line 5		6	116,493.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foreign organizations check here and do not complete this part.)	ng foundations ar	id certain	
1	Minimum investment return from Part X, line 6		1	116,493.
2a	Tax on investment income for 2012 from Part VI, line 5	1,123.		110/199
ь	Income tax for 2012. (This does not include the tax from Part VI.)	1,123.		
c	Add lines 2a and 2b		2c	1,123.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	115,370.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4	•	5	115,370.
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	115,370.
	Qualifying Distributions (see instructions)		• •	113,370.
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	350,063. 0.
þ	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		4	350,063.
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	1,123.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	348,940.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	r the foundation (qualifies fo	or the section

Form **990-PF** (2012)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,			•	
line 7			·	115,370.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:		_		
5		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007 127,771.				
b From 2008 196, 449.				
c From 2009 161,839.				
d From 2010 227, 205. e From 2011 107, 235.				
	820,499.			
f Total of lines 3a through e	040,433.			
4 Qualifying distributions for 2012 from Part XII, line 4: ► \$ 350,063.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior		· · · · · · · · · · · · · · · · · · ·	0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		0.		
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				115,370.
e Remaining amount distributed out of corpus	234,693.	1. 1.1		
5 Excess distributions carryover applied to 2012	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,055,192.	· · · · · · · · · · · · · · · · · · ·		
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.	, e4	
d Subtract line 6c from line 6b. Taxable			ع .	
amount - see instructions		0.	م ، د د د د د د د د د د د د د د د د د د د	-
e Undistributed income for 2011. Subtract line			_	
4a from line 2a. Taxable amount - see instr.	· · · · · · · · · · · · · · · · · · ·		0.	
f Undistributed income for 2012. Subtract			بة براية المؤلفة أن	
lines 4d and 5 from line 1. This amount must			્ તે કે	•
be distributed in 2013				0.
7 Amounts treated as distributions out of				· かい
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.	-		
8 Excess distributions carryover from 2007				• ;• (
not applied on line 5 or line 7	127,771.			,
9 Excess distributions carryover to 2013.	121,111.	·		
Subtract lines 7 and 8 from line 6a	927,421.			• ,
10 Analysis of line 9:	<i>JE1</i> , 121.		•	•
a Excess from 2008 196,449.		, , , , , , , , , , , , , , , , , , ,	•	
b Excess from 2009 161,839.				-
c Excess from 2010 227, 205.		•		
d Excess from 2011 107, 235.				
e Excess from 2012 234,693.				
· · · · · · · · · · · · · · · · · · ·				Corm 000-DE (2012)

Form 990-PF (2012) BURT FA Part XIV Private Operating F	MILY FOUNDA		A guestion Q	36-71	90233 Page 10
<u> </u>			A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo	•	•	. ▶ L	1 10 10 1 10	40(1)(5)
b Check box to indicate whether the found		ig foundation described i		4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2011	Prior 3 years (c) 2010	(d) 2009	(e) Total
income from Part I or the minimum	(a) 2012	(b) 2011	(6) 20 10	(4) 2003	(c) rotal
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed				-	
d Amounts included in line 2c not			•		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	ore in assets
at any time during t	the year-see insti	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh year (but only if they have contributed r			ributions received by the	e foundation before the clo	se of any tax
SEE STATEMENT 8					
b List any managers of the foundation who ther entity) of which the foundation ha			(or an equally large port	ion of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. Pr	rograms.		
Check here ► X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone num	•				
a The hame, address, and telephone ham	ioor or o mail or the perse	on to mon approacions			
b The form in which applications should	be submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kınds of institutions, or	other factors:	
223601 12-05-12					Form 990-PF (2012)

Recipient	i it recipient is an individual	i		
Name and address (home or husiness)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid dunng the year				
ART INSTITUTE OF CHICAGO	N/A	1	ALL CONTRIBUTIONS ARE	2,50
BOYS & GIRLS CLUB OF CHICAGO	N/A .		GOALS OF THE RECIPIENT	62,000
CARE INTERNATIONAL SAN FRANCISCO, CA	N/A	PUBLIC CHARITY		
SAN FRANCISCO, CA	0.4.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.			5,000
HOMEY	N/A	PUBLIC CHARITY		
SAN FRANCISCO, CA				18,500
MOVEMENT GENERATION	N/A	PUBLIC CHARITY		
DAKLAND CA				500
	CONTINUATION SHEE	ET(S)	. > 3a	332,50
b Approved for future payment				
NONE				
Total				

Part XVI-A **Analysis of Income-Producing Activities**

nter gross amounts unless otherwise indicated.	Unrelate	ed business income		ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
-	0000		 		
ab	_		 		
C	_				
d		· · · · · · · · · · · · · · · · · · ·		- ,	···
e		,		·····	
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	79,777.	•
5 Net rental income or (loss) from real estate:	4 1 14	ويشي ياء الإيا	, , -		and the second
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	<u> </u>				
property			1 1		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	63,138.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					_ .
1 Other revenue:					
a					
b					
C					
d					
е					
2 Subtotal. Add columns (b), (d), and (e)	种类型的	0.		142,915.	0.
3 Total. Add line 12, columns (b), (d), and (e)				. 13 <u> </u>	142,915.
See worksheet in line 13 instructions to verify calculations.)			· · · · · · · · · · · · · · · · · · ·	
Part XVI-B Relationship of Activities	s to the Acc	omplishment of Ex	cempt	Purposes	
Line No. Explain below how each activity for which in			contribu	ted importantly to the accom	plishment of
the foundation's exempt purposes (other th	an by providing tu	nas for such purposes).			
					
					
		 		<u> </u>	
23621					Form 990-PF (2012)

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

	e organization directly or indir					tion 501(c) of	Yes No	
the Co	de (other than section 501(c)	(3) organizations) (or in section 52	7, relating to political organ	izations?			
	fer s from the reporting founda	ation to a noncharita	able exempt org	ganization of:				
(1) C							1a(1) X	
• •	ther assets						1a(2) X	
	transactions:						337 57	
(1) S		1b(1) X						
	urchases of assets from a nor	•	organization				1b(2) X	
	ental of facilities, equipment, (1b(3) X	
	eimbursement arrangements						1b(4) X	
	oans or loan guarantees					• -	1b(5) X	
	erformance of services or me	•	-				1b(6) X 1c X	
	ig of facilities, equipment, mai				aba the fee	market value of the goods		
	answer to any of the above is			· ·				
	vices given by the reporting for			eu iess man ian market van	ie ili ariy transaciioi	TOF SHARING AFFAIRGEMENT	, 5110W III	
	n (d) the value of the goods, (b) Amount involved			exempt organization	(d) Description	n of transfers, transactions, ar	nd charing arrangements	
a) Line no	(b) Amount involved	(c) Name o		exempt organization	(u) Description	n of transfers, transactions, at		
			N/A	-	- 			
		-						
	· · · · · · · · · · · · · · · · · · ·				-			
··-				.				
								
				 				
						=		
								
		1						
	foundation directly or indirect				zations described		Yes X No	
	tion 501(c) of the Code (other	•	c)(3)) or in sect	ion 52/7			Yes X No	
b IT Yes	s," complete the following scho (a) Name of org			(b) Type of organization	1	(c) Description of relatio	nehin	
		anzauon		(b) Type of Organization		(c) Description of relatio	попір	
	N/A							
		· · · · · · · · · · · · · · · · · · ·				- 		
						····		
				,				
1		About being and all						
l _	inder penalties of perjury, I declare in and belief, it is true, correct, and con					v hac any knowledge	May the IRS discuss this eturn with the preparer	
Sign * Here		<i></i>		1 4/19/19		1:	shown below (see instr)?	
i le le	Thous	Burt		12/17/13	TRUST	EE	X Yes No	
	Signature of officer or trustee		16	Date	Title	Cheek Dit	···	
	Print/Type preparer's na	ıme	Preparer's s	ignature \ \	Date	Check if PTI	V	
Daid			10.1	1,2/,2/,2/	self- employed			
Paid		DAVID WEINBERG Stard Wellberg 15 Firm's name ► BROOKWEINER L.L.C.					00005505	
Prepar	1						3996792	
Use Or								
	Firm's address ► 12							
	CH	ICAGO, I	<u> 60606</u>				-629-0900	
							Form 990-PF (2012)	

BURT FAMILY FOUNDATION

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor CHICAGO BOTANICAL GARDENS PUBLIC CHARITY N/A 5,000. CHICAGO, IL CHICAGO CHILD CARE SOCIETY N/A PUBLIC CHARITY CHICAGO IL 12,000. COLEMAN ADVOCATES N/A PUBLIC CHARITY SAN FRANCISCO, CA 12,500. FAMILY INDEPENDENCE N/A PUBLIC CHARITY CHICAGO IL 22,000. PUBLIC CHARITY FIELD MUSEUM OF CHICAGO N/A 5,000. CHICAGO, IL PUBLIC CHARITY NCLR N/A WASHINGTON DC 500. LEAP TO LANGUAGE PUBLIC CHARITY N/A 25,000. CHICAGO, IL NENA N/A PUBLIC CHARITY 14,500. NEW ORLEANS, LA PEOPLE'S GROCERY N/A PUBLIC CHARITY 12,000. OAKLAND, CA PROJECT COMMOTION N/A PUBLIC CHARITY SAN FRANCISCO CA 57,500. Total from continuation sheets 244 000.

Part XV Supplementary Informati	AMILY FOUNDATION	<u>N</u>	36-71	90233
3 Grants and Contributions Paid During th				<u> </u>
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
, wattle and address (notile of obstitess)	or substantial contributor	recipient	· · · · · · · · · · · · · · · · · · ·	
RESOURCES GENERATION	N/A	PUBLIC CHARITY		2,500
TGI JUSTICE PROJECT SAN FRANCISCO, CA	N/A	PUBLIC CHARITY		1,000
THIRD WAVE FOUNDATION	N/A	PUBLIC CHARITY		
NEW YORK, NY	.,,,,	TOBBIC CHARTIT		500
USMC SCHOLARSHIP FUND ALEXANDRIA, VA	N/A	PUBLIC CHARITY		50,000
UNITED ROOTS	N/A	PUBLIC CHARITY		
OAKLAND, CA				12,000
YOUTH ACTION INTERNATIONAL TRAVERSE CITY, MI	N/A	PUBLIC CHARITY		12,000
Total from continuation sheets				

FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
MERRILL LYNCH NORTHERN TRUST COMPANY		56,467. 36,728. N 4 93,195.			13,383.	43,084. 36,693. 79,777.	
TOTAL TO FM 990-PF, PART I,	LN 4				13,418.		
FORM 990-PF		TAX	ES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
FEDERAL EXCISE TAX FOREIGN TAXES		2,084. 1,198.	1	0. ,198.			0.
TO FORM 990-PF, PG 1, LN 18		3,282.	1	,198.			0.
FORM 990-PF	0	THER E	XPENSES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
INVESTMENT MANAGEMENT FEES BANK FEES	1	1,836.	11	,836. 62.			0. 63.
TO FORM 990-PF, PG 1, LN 23	1	1,961.	11	,898.			63.
FORM 990-PF	CO	RPORAT	E STOCK			STATEMENT	4
DESCRIPTION				ВО	OK VALUE	FAIR MARKE VALUE	T
NORTHERN TRUST - SECURITIES MERRILL LYNCH - SECURITIES					1,137,883. 535,108.	1,321,4 647,5	
TOTAL TO FORM 990-PF, PART I	I, LIN	E 10B			1,672,991.	1,968,9	53.

FORM 990-PF	CORPO	RATE BONDS	STATEMENT		
DESCRIPTION			BOOK VALUE	FAIR MARKE' VALUE	т
NORTHERN TRUST - SECURITIES BOND - PEOPLE'S GROCERY		184,516 25,000		194,458. 25,000.	
TOTAL TO FORM 990-PF, PART II,	LINE 1	0C	209,516.	219,458.	
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT	6
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKE	т
INVESTMENTS IN PARTNERSHIPS		COST	770,148.	600,0	00.
TOTAL TO FORM 990-PF, PART II,	T TATE 1	-	770,148.	600,0	

FORM 990-PF PART VIII - LIS TRUSTEES AND	T OF OFFICERS, D FOUNDATION MANA		EMENT 7	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
ROBERT N BURT 91 OAK TREE ROAD BLUFFTON, SC 29910	TRUSTEE 1.00	0.	0.	0.
LYNN C BURT 91 OAK TREE ROAD BLUFFTON, SC 29910	TRUSTEE 1.00	0.	0.	0.
CHARLES R BURT VANDERBILT UNIVERSITY PO BOX 6485 STATION B NASHVILLE, TN 37325	TRUSTEE	0.	0.	0.
RANDOLPH N BURT 1301 S SCOTT STREET APT 326 ARLINGTON, VA 22204	TRUSTEE 1.00	0.	0.	0.
TRACY C BURT 467 ALVARADO ST SAN FRANCISCO, CA 94114	TRUSTEE 10.00	35,000.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	35,000.	0.	0.
	XV - LINE 1A OUNDATION MANAGE	RS	STAT	EMENT 8

NAME OF MANAGER

ROBERT N BURT LYNN C BURT CHARLES R BURT RANDOLPH N BURT TRACY C BURT

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box \triangleright X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print BURT FAMILY FOUNDATION 36-7190233 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your 412 FOX MEADOW DRIVE instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions NORTHFIELD, IL 60093-4301 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Application Application Return Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) Form 4720 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) Form 8870 06 12 ROBERT N. BURT The books are in the care of ▶ 91 OAK TREE ROAD - BLUFFTON, SC 29910 Telephone No \triangleright (843)837-4235 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until DECEMBER 15, 2013, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year ► X tax year beginning MAY 1, 2012 _ , and ending <u>APR 30 , 2013</u> If the tax year entered in line 1 is for less than 12 months, check reason Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453 EO and Form 8879-EO for payment instructions For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form 8868 (Rev 1-2013)

Form 886	8 (Rev. 1-2013)				Page 2			
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II and check thi	s box	► X			
Note. On	ly complete Part II if you have already been granted an a	automatic	3-month extension on a previously f	iled Form 8868				
If you :	are filing for an Automatic 3-Month Extension, comple							
Partill	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no copies nee	ded).			
			Enter filer's	identifying number,	see instructions			
Type or	Name of exempt organization or other filer, see instru	ctions		I	mployer identification number (EIN) or			
print		,,	. ,					
File by the	BURT FAMILY FOUNDATION	36-71	90233					
due date for	Number, street, and room or suite no. If a P.O box, s	Social security numb						
filing your return See	412 FOX MEADOW DRIVE	Cociai Sceamy Hamb	ci (00it)					
instructions								
	NORTHFIELD, IL 60093-4301	oroigir add	ress, see instructions.					
	MORTINI 1880, 18 00073 4501							
Cator the	Detrom and for the veture that the could be a 150							
cuter the	Return code for the return that this application is for (file	e a separa	ite application for each return)		0 4			
<u> </u>		Τ						
Applicati	on	Return	Application		Return			
Is For		Code	Is For		Code			
	or Form 990-EZ	01	Land Bridge Control					
Form 990		02	Form 1041-A		08			
	0 (ındıvıdual)	03	Form 4720	· · · · · · · · · · · · · · · · · · ·	09			
Form 990		04	Form 5227	·	10			
Form 990	-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11			
Form 990	-T (trust other than above)	06	Form 8870		12			
STOP! D	not complete Part II if you were not already granted	l an autor	natic 3-month extension on a prev	riously filed Form 886	8.			
	ROBERT N. BURT							
 The bo 	ooks are in the care of \triangleright 91 OAK TREE ROL	AD -	BLUFFTON, SC 29910					
Teleph	one No ► <u>(843)837-4235</u>		FAX No. ▶		-			
If the c	organization does not have an office or place of business	s in the Ur	nited States, check this box	_				
	s for a Group Return, enter the organization's four digit				group, check this			
box ▶ [. If it is for part of the group, check this box							
4 i re	quest an additional 3-month extension of time until		H 15, 2014					
5 For	calendar year, or other tax year beginning	MAY 1	, 2012 , and endin	g APR 30, 2	013			
	e tax year entered in line 5 is for less than 12 months, c			Final return				
	Change in accounting period							
7 Sta	te in detail why you need the extension							
	ARE WAITING FOR THE FINAL I	FINAN	CIAL INFORMATION N	EEDED TO CO	MPLETE			
	E TAX RETURN.	 -	,					
8a If th	us application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069. e	nter the tentative tax, less any					
	refundable credits. See instructions.	, .		8a \$	0.			
	is application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	J Ga U	<u> </u>			
	payments made. Include any prior year overpayment all	•		ľ				
	eviously with Form 8868	owed as a	a credit and any amount paid	8b \$	0.			
	ance due. Subtract line 8b from line 8a. Include your pa	vmont unt	th this form if required by using	8b \$	<u> </u>			
	PS (Electronic Federal Tax Payment System). See instru	-	in this form, it required, by using	0.5	^			
<u> </u>			st be completed for Part II o	8c \$	0.			
I Inder per			•	•	an and ballet			
onder peni It is true, c	alties of perjury, I declare that I have examined this form, includ orrect, and complete, and that I am authorized to prepare this fo	my accomp rm.	panying scriedules and statements, and to	o ine best of my knowled	ge and belief,			
Signature :	Title Title			Date >				