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## Form 990-PF

Department of the Treasury Internal Revenue Service Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

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

Open to Public Inspection

Fo	r cal	lendar year 2012 or tax year beginning	12/19/2012 , a	nd ending	9/	/30/2013		
Na	me o	foundation			A E	mployer identification nu	mber	<del></del>
Th	e Bu	rkland Foundation				46-1607	779	
		and street (or PO box number if mail is not delivered to street add	ress)	Room/suite	ВТ	elephone number (see instr		
PC	Box	x 467			ł	724-493-6	5161	
		own, state, and ZIP code			C 16	exemption application is pe		. ▶ □
	onie		PA	15658	"	exemption application is pe	nang, check here	, - 🗀
			al return of a former p			F	-l. b.s.s	. □
G	Cite		•	done charity	י טן.	Foreign organizations, che	ck nere	▶ [
			ended return		2.	Foreign organizations mee		
			ne change			check here and attach con	nputation	▶ [
Н		eck type of organization. X Section 501(c)(3) exe			E If	private foundation status wa	as terminated	
느	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private	foundation	u	nder section 507(b)(1)(A), c	heck here	▶ [
ı		r market value of all assets at end J Accounting		n Accrual		the foundation is in a 60-mo		
		rear (from Part II, col (c),			u	nder section 507(b)(1)(B), c	heck here	▶
		16) ▶ \$ 1,027,271 (Part I, column (	(d) must be on cash bas	sis )				
Pa	rt I		(a) Revenue and	(b) Net investme	ont	(c) Adjusted net	(d) Disburser for charital	
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	income	GIIL	income	purposes	s
		the amounts in column (a) (see instructions) )		<u> </u>			(cash basis	
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,000,000	7 37	,		Aller Jally Janes	N.
	2	Check ▶ ☐ if the foundation is <b>not</b> required to attach Sch. B					14.	'
	3	Interest on savings and temporary cash investments	5	<del> </del>	5		-	
	4	Dividends and interest from securities .	9,429	9	,298	131		
	5	a Gross rents					,	+ <sub>c,+</sub> , !
<u>a</u>		b Net rental income or (loss)			.,	, , ,		
Revenue	6	a Net gain or (loss) from sale of assets not on line 10	-16,821	١,			+ 1	
Š		<b>b</b> Gross sales price for all assets on line 6a 210,961		, ,			1,	
8	7	Capital gain net income (from Part IV, line 2)	* ' ' ' ' '					
	8	Net short-term capital gain	1-17 - 18 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	- 1	• * *		NAP PLE	· ;
	9	Income modifications	yyk ( "gyr – tar", " :	it jete			1, 2	
	10		in the state of the state of the	10 1 12		* ' ''	4-011 3 1	93 (4)
		<b>b</b> Less. Cost of goods sold	, '. , -	en to feet			7	
		<b>c</b> Gross profit or (loss) (attach schedule)		٠.			25 - 25 6 6	
	11	Other income (attach schedule)	9,141	9	<u>,141</u>		2 35	
	12	Total. Add lines 1 through 11	1,001,754	18	3,444	131		1,
Ş	13	Compensation of officers, directors, trustees, etc		<del> </del>			<u> </u>	
cpenses	14	Other employee salaries and wages			<u></u>			
Эег	15	Pension plans, employee benefits				DEGE		
X	16	a Legal fees (attach schedule)	8,375			LIVEUEIVE		
e		<b>b</b> Accounting fees (attach schedule)			59			
<u>چي</u>		<b>c</b> Other professional fees (attach schedule)	3,400	3	,400	FER 19 2014	100	
*Operating land Administrative Ex	17	Interest				-0 6014	0.5	
13	18	Taxes (attach schedule) (see instructions)	105		105	OGDEN	-J&	<del></del>
	19	Depreciation (attach schedule) and depletion .				TODEIA, UT	- 13 to	- 1 2
<b>3</b>	20	Occupancy						
7	21	Travel, conferences, and meetings						
<b>1</b>	22	Printing and publications						
3	23	Other expenses (attach schedule)						
돌	24	Total operating and administrative expenses.						
₩.		Add lines 13 through 23	11,880		,505			
鄭	25	Contributions, gifts, grants paid		,	-	1.0		
2	26	Total expenses and disbursements. Add lines 24 and 25.	11,880	3	,505			
	27	Subtract line 26 from line 12:		- 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	£ /150 14	Agran Grand		
	i	a Excess of revenue over expenses and disbursements	989,874		·		<u> </u>	
		b Net investment income (if negative, enter -0-).	1 , - 1 , - 7	14	,939		:	,
		C Adjusted net income (if negative, enter -0-)			í ·	424		

Dэ	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
_ G	441	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	١ <b>1</b>	Cash—non-interest-bearing		390,562	390,562
	2	Savings and temporary cash investments	·		
	3	Accounts receivable			
		Less: allowance for doubtful accounts			·
,	4	Pledges receivable			
		Less. allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	l	Less allowance for doubtful accounts			
ম	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10	a investments—U S and state government obligations (attach schedule)			
•		<b>b</b> Investments—corporate stock (attach schedule)		599,312	636,580
		c Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
		Less. accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment. basis ▶			*
	` `				
	15	Other assets (describe ACCRUED INTEREST )			129
	16	Total assets (to be completed by all filers—see the			120
	'	instructions. Also, see page 1, item I)		989,874	1,027,271
	17	Accounts payable and accrued expenses		000,011	1,027,271
	18	Grants payable			
es	19	Deferred revenue		<del></del>	
Liabilities	20				
ab	21	Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable (attach schedule)			
Ξ	22				
	23	`			
	23				
Ś		Foundations that follow SFAS 117, check here			4 6.3
ည္	۱	and complete lines 24 through 26 and lines 30 and 31.			
lances	24	Unrestricted			i
Ba	25	Temporarily restricted			٠.
2	26	Permanently restricted		.=	
Net Assets or Fund Ba	1	Foundations that do not follow SFAS 117, check here > X			
Ī	l	and complete lines 27 through 31.		!	
0	27	Capital stock, trust principal, or current funds		989,874	
ét	28	Paid-in or capital surplus, or land, bldg, and equipment fund		,	
SS	29	Retained earnings, accumulated income, endowment, or other funds.			
t A	30	Total net assets or fund balances (see instructions)		989,874	
Š	31	Total liabilities and net assets/fund balances (see			
		ınstructions)		989,874	
	t III	Analysis of Changes in Net Assets or Fund Balances			
1	Total	net assets or fund balances at beginning of year-Part II, column (a), line	30 (must agree with		
	end-	of-year figure reported on prior year's return)			
		r amount from Part I, line 27a		2	989,874
		r increases not included in line 2 (itemize) NET ASSET ADJUSTN		3	37,397
					1,027,271
		eases not included in line 2 (itemize)		5	
		net assets or fund balances at end of year (line 4 minus line 5)—Part II. co			1 027 271

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See

**7** Add lines 5 and 6 . . .

the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4 . . .

7

Page	

P	ar	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—	see	instruc	tions)		
1	а	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1	,	-AA , 3		·	
		Date of ruling or determination letter: 12/20/2012 (attach copy of letter if necessary—see instructions)					
	b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1_			299	
	_	here  and enter 1% of Part I, line 27b		•			
	٠	of Part I, line 12, col. (b).					
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				
3		Add lines 1 and 2	3			299	
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4		_		
5		Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5			299	
6		Credits/Payments		3	, ,, ,		
		2012 estimated tax payments and 2011 overpayment credited to 2012 . 6a 6a			•		
		Exempt foreign organizations—tax withheld at source		,	•		
		Tax paid with application for extension of time to file (Form 8868) 6c	,		. · ·		
	a	Backup withholding erroneously withheld	7	<del> </del>			
7 8		Total credits and payments. Add lines 6a through 6d	8		•		
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			299	
10	)	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11		Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ Refunded ▶	11				
Ρá	ar	t VII-A Statements Regarding Activities		L			
		During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			,, ,	Yes	No
		participate or intervene in any political campaign?			1a		Х
	b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see					
		Instructions for the definition)?			1b		X
		If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			<b> </b>		
	_	published or distributed by the foundation in connection with the activities			4-		
		Did the foundation file Form 1120-POL for this year?	•		1c		X
	ŭ	(1) On the foundation. ► \$(2) On foundation managers. ► \$				}	
	e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			î		
		on foundation managers. > \$					
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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		•	3		X
		Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•	• •	4a	NI/A	X
5	D	If "Yes," has it filed a tax return on Form 990-T for this year?	• •	• •	4b	N/A	X
J		Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	•	-	<del>                                     </del>	├^
6		Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				- ~	
-		By language in the governing instrument, or			` ,	_	
		By state legislation that effectively amends the governing instrument so that no mandatory directions					
		that conflict with the state law remain in the governing instrument?			6	Х	
7		Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and	Pan	tXV.	7	Х	
8	а	Enter the states to which the foundation reports or with which it is registered (see instructions)			l	,,,`L -	.
		PA			ľ	17.5	· `
	D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney					
		General (or designate) of each state as required by General Instruction G? If "No," attach explanation	•		8b	X	ļ
9		Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)					<u> </u>
		or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	х	
10	ļ	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	•		-	<del>  ^</del>	$\vdash$
. •		their names and addresses			10	x	
	_						

Did the foundation hold more than a 2% direct or indirect interest in any business	_	
enterprise at any time during the year?	Yes	X No
If "Yes," did it have excess business holdings in 2012 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		

If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

20 \_\_\_\_\_ , 20 \_\_\_\_ , 20 \_\_\_\_ , 20 \_\_\_\_

3a

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
 Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

X

Ġ

3b

4a

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Pa	rt VII-B Statements Regarding Activ	<u>ities for Which Fo</u>	rm 4720 May Be	Required (continued)	)	
5a	During the year did the foundation pay or incur at (1) Carry on propaganda, or otherwise attempt (2) Influence the outcome of any specific public	to influence legislation		Yes [2	X No	
	on, directly or indirectly, any voter registration (3) Provide a grant to an individual for travel, s			Yes 🗋	X No X No	
	(4) Provide a grant to an organization other that in section 509(a)(1), (2), or (3), or section 4	940(d)(2)? (see instruct	ions)	· · Yes	X No	
<b>h</b>	(5) Provide for any purpose other than religious educational purposes, or for the prevention	of cruelty to children or	animals?		X No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53 4945 or in a current notice Organizations relying on a current notice regarding	e regarding disaster ass	istance (see instructio	ns)?	5b N	I/A
С	If the answer is "Yes" to question 5a(4), does the tax because it maintained expenditure responsibility "Yes," attach the statement required by Regulation	foundation claim exemplity for the grant? .	otion from the	Yes	] No	
	Did the foundation, during the year, receive any formiums on a personal benefit contract?				K No	
_	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.				. 6b	X X
	At any time during the tax year, was the foundation				K No	
	If "Yes," did the foundation receive any proceeds					I/A
	Information About Officers and Contractors	<del></del>	<u> </u>		id Employee	es, ———
1	List all officers, directors, trustees, foundation			ı (see instructions).		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense a other allows	
See	Attached Statement					
2	Compensation of five highest-paid employ	yeas (other than thos	e included on line	1—easinstructions) If	none	
	enter "NONE."	- Cos (other than thos	- Included on line		——————————————————————————————————————	
(a	Name and address of each employee paid more than \$50	(b) Title, and avera hours per week devoted to position	(c) Compensation	on (d) Contributions to employee benefit plans and deferred compensation	(e) Expense a other allows	
NO	NE					
					<u> </u>	
					1	

Total number of other employees paid over \$50,000

▶

Form 990-PF (2012)	THE PERMANENT CONTRACTOR		46-1607779 Page 7
Part VIII	Information About Officers, Directors, Trustees, Fo	oundation Managers, Highly Pai	d Employees,
•	una Gentractors (continuea)		
	st-paid independent contractors for professional services (see		<del></del>
	Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		···-	<u> </u>
			:
-		· · · · · · · · · · · · · · · · · · ·	
Total number o	f others receiving over \$50,000 for professional services		<u> </u>
			L
Part IX-A	Summary of Direct Charitable Activities		
List the foundation	s four largest direct chantable activities during the tax year. Include relevant statis	tical information such as	_
	anizations and other beneficianes served, conferences convened, research papers		Expenses
1 N/A			
2			
3			
		••••••	
4			
D. AIV D	0 0		
Part IX-B	Summary of Program-Related Investments (see ins		
1	irgest program-related investments made by the foundation during the tax year on	lines I and 2	Amount
'			
2			
All other program-re	elated investments. See instructions	<del></del>	
3			
	•		
Total. Add lines	1 through 3		

Par	see instructions.)	toundati	ons,
1	Pair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	668,260
b	Average of monthly cash balances	1b	352,289
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,020,549
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	s,	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,020,549
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	15,308
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,005,241
6	Minimum investment return. Enter 5% of line 5 MIR Prorated - Short Year	6	39,383
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	39,383
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI )		
С	Add lines 2a and 2b	2c	299
3	Distributable amount before adjustments Subtract line 2c from line 1	3	39,084
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	39,084
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	39,084
Part			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	a .	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	13	
	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	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		<u></u>
	income. Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found		

qualifies for the section 4940(e) reduction of tax in those years

Part	XIII Undistributed Income (see instructions	s)			
	,	(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012
•	line 7				39,084
2	Undistributed income, if any, as of the end of 2012.				
- a	Enter amount for 2011 only	,			
	Total for prior years: 20 , 20 , 20	* .			-
3	Excess distributions carryover, if any, to 2012:	<del></del>	<del></del>		
а	From 2007				
b	From 2008	٠,			
C	From 2009	,			
d	From 2010				
_	From 2011				
e •	<del></del>	<del></del>	_		
<b>α</b> '	Total of lines 3a through e			<u> </u>	
4	Qualifying distributions for 2012 from Part				
_	XII, line 4  \$				
a b	Applied to 2011, but not more than line 2a Applied to undistributed income of prior years	<del></del>			
D	• •				
_	(Election required—see instructions)		· <del>  </del>		
С	Treated as distributions out of corpus (Election required—see instructions)			,	
4			<del> </del>		
d e	Applied to 2012 distributable amount				
5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2012				
3	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	****	_		
	Prior years' undistributed income. Subtract	<del></del>	1		
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable	,			
	amount—see instructions				
е	Undistributed income for 2011. Subtract line	·			
	4a from line 2a. Taxable amount—see				
	instructions				
f	Undistributed income for 2012. Subtract				· · · · · · · · · · · · · · · · · · ·
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2013	•			39,084
7	Amounts treated as distributions out of		-		30,00
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2007				
	not applied on line 5 or line 7 (see instructions) .		,		
9	Excess distributions carryover to 2013.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:		,		
а	Excess from 2008				
b	Excess from 2009				}
С	Excess from 2010		-	·	
d	Excess from 2011		1		
е	Excess from 2012 .				

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	t XIV Private Operating Foundations (			, question 9)		
1 a	If the foundation has received a ruling or determina foundation, and the ruling is effective for 2012, enter					
	Check box to indicate whether the foundation is a p	rivate operating four	idation described	in section	4942(j)(3) o	r
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(a) Total
	investment return from Part X for each	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	year listed	131				131
b	85% of line 2a	111				111
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		<del></del>	_		
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 "Assets" alternative test—enter.					
a	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
D	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	26,255				26,255
С	"Support" alternative test—enter:	20,200		· · · · · · · · · · · · · · · · · · ·		20,255
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income .					<u></u> .
Pa	t XV Supplementary Information (Con	nplete this part	only if the fo	undation had \$5	,000 or more in	
	assets at any time during the yea	ar—see instruct	ions.)			
	Information Regarding Foundation Manager List any managers of the foundation who have contibefore the close of any tax year (but only if they have	ributed more than 2% re contributed more t	han \$5,000) (Se	e section 507(d)(2).)		
	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which	the foundation has a	10% or greater i	nterest	ortion of the	
2	Information Regarding Contribution, Grant,		•	_		
	Check here   if the foundation only makes of unsolicited requests for funds. If the foundation makes other conditions, complete items 2a, b, c, and d.	contributions to presences gifts, grants, etc	elected charitable (see instructions)	e organizations and do ) to individuals or orga	pes not accept anizations under	
а	The name, address, and telephone number or e-ma	il of the person to wi	nom applications	should be addressed		
17/11	HAM BURKLAND BO BOY 427 LICONIED DA	15650				
	LIAM BURKLAND PO BOX 427 LIGONIER, PA The form in which applications should be submitted		materials they st	hould include	<del></del>	
N/A	The form in which approachers should be submitted	and information and	materials triey Si	nodia include.		
	Any submission deadlines.					, <u>, , , , , , , , , , , , , , , , , , ,</u>
NO	•					
d	Any restrictions or limitations on awards, such as by factors:	geographical areas	, charitable fields	, kinds of institutions,	or other	· · · · · · · · · · · · · · · · · · ·
NO	NE				_	

Total

Pa	t XV Supplementary Information (continu	ued)		· · · · · · · · · · · · · · · · · · ·	
3	Grants and Contributions Paid During th	ne Year or Approved	for Future I	Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
a	Paid during the year				
	Total	l	<u> </u>	. ► 3a	<u> </u>
b	Approved for future payment			Ja	

Business code Amount Exclusion code Amount General function income (See instructions)  Business code Amount Exclusion code Amount General function income (See instructions)  Business code Amount Exclusion code Amount General function income (See instructions)  Business code Amount Exclusion code Amount General function income (See instructions)  Business code Amount Exclusion code Amount General function income (See instructions)  Business code Amount Exclusion code Amount General function income (See instructions)  Business code Amount Exclusion code Amount General function income (See instructions)  Business code Amount Exclusion code Amount General function income (See instructions)  Business code Amount Exclusion code Amount General function income (See instructions)  Business code Amount Exclusion code Amount General function (See instructions)  Business code Amount Exclusion code Amount General functions (See instructions)  Business code Amount Exclusion code Amount General functions (See instructions)  Business code Amount Exclusion code Amount General functions (See instructions to code in turctions (See instructions to definition in turctions)  Business code Amount Exclusion code in turctions (See instructions to definition in turctions (See instructions to definition in turctions (See instructions to definition in turctions (See instructions to the Accomplishment of Exempt Purposes)	Part XVI-A Analysis of Income-Producing Activ	<del>7</del>	<del></del>	r=-:-	<del></del>	
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► R.D. HOAG AND ASSOCIATES, P.C.

Firm's address ► 555 NORTH BELL AVE., SUITE 100, CARNEGIE, PA 15106

Firm's name

**Preparer** 

**Use Only** 

Part		Information Reg Exempt Organiz		sfers To and Tra	nsactions a	nd Rel	lationships Wi	th Noncharit	able	<u></u> .	
ir	id the o	rganization directly on 501(c) of the Code	or indirectly er	ngage in any of the foection 501(c)(3) orga						Yes	No
() b () () () () () () c S	1) Cash 2) Othe 2) Othe 2) Purc 3) Rent 4) Reim 5) Loan 6) Perfo charing of the ans alue of t	r assets r assets nsactions s of assets to a nonce hases of assets from al of facilities, equipinatursement arranger s or loan guarantees ormance of services of facilities, equipme wer to any of the ab the goods, other ass	charitable exemalar a noncharital ment, or other ments sor membershort, mailing list pove is "Yes," cottes, or service the content of the cottes of the cott	mpt organization ble exempt organization assets ip or fundraising solid s, other assets, or pa	tion citations aid employees g schedule. C	Column (	( <b>b)</b> should always	show the fair n	ır marke	et	X X X X X X
(a) Lir		(b) Amount involved	<del></del>	of noncharitable exempt o		T	escription of transfers,	<del> </del>	<u>.</u>		nts
d	escribed	I in section 501(c) of complete the following	f the Code (ot ng schedule.	ed with, or related to ner than section 501	o, one or more (c)(3)) or in se	tax-exe	empt organizatior 27?	ns 	Yes [	] No	
(a) Name of organization			(b) Type of organization		(c) Description of relationship						
Sigr Here					n below						
Paid		Print/Type preparer's na		Preparer's signature	frag c	PX	12/24/13	Check if	PTIN P0065	1232	

P00651232

25-1365816

412-278-1600

self-employed

Firm's EIN

Phone no

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

OMB No 1545-0047

201**2** 

Employer identification number

The Burkland Foundation 46-1607779						
Organization type (check one):						
Filers of: S	rs of: Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundate	ation				
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ı				
	501(c)(3) taxable private foundation					
Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule</b> . <b>Note.</b> Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.						
General Rule						
X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.						
Special Rules						
sections 509(a)(1) and 17	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
the year, total contribution	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.						
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990; or check the box on line H of its Form 990-EZ or on						

Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organizationEmployer identification numberThe Burkland Foundation46-1607779

Part Î	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	Burkland Family Partners PO Box 467 Ligonier PA 15658 Foreign State or Province Foreign Country:	\$1,000,000	Person X Payroli Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province: Foreign Country:	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province. Foreign Country	\$	Person Payroll Oncash (Complete Part II if there is a noncash contribution )			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province. Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country:	\$	Person Payroll Oncash (Complete Part II if there is a noncash contribution.)			

Name of organization

Employer identification number

The Burkland Foundation 46-1607779 Part ÍI Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) FMV (or estimate) from Date received Description of noncash property given (see instructions) Part I (a) No. (c) (b) Description of noncash property given (d) FMV (or estimate) from Date received (see instructions) Part I (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) ------(a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

	rganization Ind`Foundation		46-1607779					
Part III								
	contributions of \$1,000 or less for the year (							
	Use duplicate copies of Part III if additional s							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, and ZIF		Relationship of transferor to transferee					
(a) No.	For Prov. Country							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
**								
	(e) Transfer of gift							
	Transferee's name, address, and ZIF	Relat	ionship of transferor to transferee					
	For Prov. Country							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, and ZIF	ionship of transferor to transferee						
	For Prov Country							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, and ZIP	+ 4 Relat	ionship of transferor to transferee					
	For Draw							