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Form 990-PF

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EXTENDED TO NOVEMBER 15, 2018

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public

Go to www.irs.gov/Form990PF for instructions and the latest information.

2017
Open to Public Inspection

For calendar year 2017 or tax year beginning , and ending A Employer identification number Name of foundation 25-1407410 THE BURKE FOUNDATION Number and street (or P O box number if mail is not delivered to street address) B Telephone number 412-471-4500 650 SMITHFIELD STREET, SUITE 250 City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here PITTSBURGH, PA 15222 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here X Cash I Fair market value of all assets at end of year | J Accounting method Accrual If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) ▶\$ 27, 617, 702. (Part I, column (d) must be on cash basis.) Part Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes expenses per books income income (cash basis only) N/A ,317,612. Contributions, gifts, grants, etc., received Check I I the foundation is not required to attach Sch B S. CARLOW MAN JUST **EXAMPLE** . PORTAGENIA Interest on savings and temporary cash investments 32,043. 32,043 STATEMENT: 1 STATEMENT 2 469,408. 469,408 Dividends and interest from securities 32,928 32,928. STATEMENT 3 5a Gross rents & 32,928. b Net rental income or (loss) 799,312. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Stockled Bern 1,799,312. WALLE AND A COLUMN TO THE REAL PROPERTY. **大型的19**45年6月 7 «Capital gain net incor Net Short territora pital dan **神教育于神经。於城** 8 然此理论。那个证据 SS H77% 1790 179 Income modifications STATE OF THE STATE ss sales less returns ANA MILATIAN ਹੀ 的物品和激素的 oss profit or (loss) 25,733 Ō. STATEMENT 4 3,677,036. 2.333.691. Ō. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 5 4,150. Ō. 0. b Accounting fees c Other professional fees 17 Interest 12,669. O. STMT 6 12,654. 18 7####17#95####### 19 Depreciation and depletion 20 Оссиралсу 21 Travel, conferences, and meetings 22 Printing and publications STMT 7 298,059. 265,327. 32,640. 23 Other expenses 24 Total operating and administrative 314,878. 277,981 32,640. expenses. Add lines 13 through 23 070,450. 1,070,450. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 1,385,328 277,/981 1,103,090. Add lines 24 and 25 Subtract line 26 from line 12: 2,291,708 8 Excess of revenue over expenses and disbursements 2,055,710 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (it negative, enter -0-)

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

1	1.64	Balance Sheets Attached schedules and amounts in the description	beginning or year	,		or year
Ž Iz	an	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing	6,592.	34,50	5.	34,505.
	2	Savings and temporary cash investments				
		Accounts receivable >		1004CT014P00ET15	- 130	12 (4 32 7 7 7 7 8 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	•	Less: allowance for doubtful accounts			202	1 22 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		Pledges receivable	**************************************		SX AND	
	"	Less; allowance for doubtful accounts		6.3 6.3 6.3 6.3 6.3 6.3 6.3 6.3 6.3 6.3	1968.A	
	١,		 			
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	_	disqualified persons	MAN TO MERCAN IN CONTRACT OF SAME AND ADDRESS	5. May 19.20.2° 8. 20.22.2° 3. 2. 20.42	* /*****	THE LINE OF STATE SHAPE & ARRANGE ARRA
	7	Other notes and loans receivable	15-12-20-13-16-16-16-16-16-16-16-16-16-16-16-16-16-		100	
		Less; allowance for doubtful accounts				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
ď	10a	Investments - U.S and state government obligations				
	b	Investments - corporate stock		/		
	C	Investments - corporate bonds		-		
	1	Investments - land, buildings and equipment basis	4000075.340000 ministra	STATE WATER	- j 1	
	}	Less accumulated deprecation	/	335 X 53 30 X X X X X X X X X X X X X X X X X X	4.34.4	-
	12	Investments - mortgage loans	 			
	13	Investments - other STMT 10	19,034,948.	21,354,38	3	27,583,197.
			(3/5/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/			The between
	14	Land, buildings, and equipment basis	7.32.3.2.4.34.34.34.34.34.34.34.34.34.34.34.34.3		36.5	10.07.05 750 450 3750000
		Less accumulated depreciation				
		Other assets (describe				
	16	Total assets (to be completed by all filers - see the	10 044 540		_	05 645 500
_		instructions. Also, see page 1, item I)	19,041,540.	21,388,88	<u>8.</u>	27,617,702.
		Accounts payable and accrued expenses	`			
	18	Grants payable			1	
S	19	Deferred revenue				
≝	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable				
3	22	Other liabilities (describe >	,			
					_	
	23	Total liabilities (add lines 17 through 22)	0.		0.	
_		Foundations that follow SFAS 117, check here		- -		
		and complete lines 24 through 26, and lines 30 and 31.		1	,	
S	0.4					
Balance	24	Unrestricted				
aa		Temporarily restricted				
	26	Permanently restricted				
Ē		Foundations that do not follow SFAS 117, check here				
Net Assets or Fund		and complete lines 27 through 31.	[_ [_	
S	27	Capital stock, trust principal, or current funds	, O.		0.	
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.		0.	
A	29	Retained earnings, accumulated income, endowment, or other funds	19,041,540.	21,388,88		
Ę l	30	Total net assets or fund balances	19,041,540.	21,388,88	8.	
_						
	31	Total liabilities and net assets/fund balances	19,041,540.	21,388,88	8.	
· ·						ex-214 comments straightform and the straightform
}P ∂	art i	Analysis of Changes in Net Assets or Fund B	alances			
1	[otal	net assets or fund balances at beginning of year - Part II, column (a), line	30			
		•	JU .			10 0/1 5/0
		t agree with end-of-year figure reported on prior year's return)		y	1	19,041,540.
		amount from Part I, line 27a	a== c=	. mm.	2	2,291,708.
		increases not included in line 2 (itemize)	SEE ST	ATEMENT, 9	3	55,640.
		ines 1, 2, and 3	·		4	21,388,888.
5 1	Decre	eases not included in line 2 (itemize)			5	0.
6 -	ntal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (h) line 30		6	21 388 888

(a) List and describe	the kind(s) of property sold (for exarehouse; or common stock, 200 s	kample, real esta		(b) How P - Pu D - Do	acquired rchase onation	c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a THE BURKE FOUN	DATIONS (K-1)							
b THE BURKE FOUN	DATIONS (K-1)							
С								
d			····					
e				<u> </u>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss) s (f) minus (g))
<u>a</u>		_						786.
b								1,798,526.
С								
<u>d</u>								
e Complete and if the control of the		the foundation	on 10/21/60				2-1 (1-)	
Complete only for assets snowl	ng gain in column (h) and owned b						Col (h) gain not less thar	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				(from col. (I	
	43 01 123 1103		001. (), 11 u.1.)					786.
<u>a</u>		+	· · · · · · · · · · · · · · · · · · ·	_				700. 1,798,526.
<u>b</u>		+						1,750,520.
<u>c</u>		_						
d								
e					1			
2 Capital gain net income or (net ca		ter in Part I, line -0- in Part I, line		} 2				1,799,312.
3 Net short-term capital gain or (lo		and (6) [.]		٦١	İ			
If gain, also enter in Part I, line 8,	column (c).)			N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Section 4940(e) fo	or Paducac	Tay on Nat	Invest	ment Inco	me	N/A	
If section 4940(d)(2) applies, leave to Was the foundation liable for the sec If "Yes," the foundation doesn't quality.	tion 4942 tax on the distributable a fy under section 4940(e). Do not co	omplete this par	<u>t</u>					Yes X No
	each column for each year, see the	instructions be	tore making any e	ntries.		,		(4)
(a) Base period years Calendar year (or tax year beginni			Net value of no				Distrib (col. (b) div	(d) ution ratio ded by col. (c))
2016		29,984.			26,285			.047626
2015		46,122.			66,704			.044911
2014		67,823.			25,299			.042908
2013		33,906.			80,423			.042226
2012	5	45,947.		14,5	24,230.	+		.037589
2 Total of line 1, column (d)						2		.215260
3 Average distribution ratio for the		al on line 2 by 5.0	0, or by the numb	er of years	3	_	ŀ	.043052
the foundation has been in existe	nce if less than 5 years					3		.043032
4 Enter the net value of noncharital	ole-use assets for 2017 from Part >	K, line 5				4	2	5,128,176.
5 Multiply line 4 by line 3						5		1,081,818.
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6		20,557.
7 Add lines 5 and 6						7		1,102,375.
8 Enter qualifying distributions from	n Part XII, line 4					8		1,103,090.
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI, lin	ne 1b, and comp	lete that part usin	g a 1% ta	x rate.			

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Form 990-PF (2017) THE BURKE FOUNDATION	40/5\ 404			1407410 Page 4
Part VII Excise Tax Based on Investment Income (Section 49			948 •	- see instructions)
1a Exempt operating foundations described in section 4940(d)(2), check here and				
Date of ruling or determination letter: (attach copy of letter if n				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► L and	enter 1%	1	20,557.
of Part I, line 27b		i i		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	•			
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	20,557.
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	20,557.
6 Credits/Payments:	1 1	0 560		
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	9,560.		
b Exempt foreign organizations - tax withheld at source	6b	0.		
c Tax paid with application for extension of time to file (Form 8868)	6c	27,000.		
d Backup withholding erroneously withheld	6d	0.		
7 Total credits and payments. Add lines 6a through 6d			_7	36,560.
8 Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is at	tached	ļ	_8	1.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	▶	_9	4.5.000
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		•	_10	16,002.
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	16,	002. Refunded►	_11	0.
Rant VII Statements Regarding Activities				2800 prode No.
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	islation or did	it participate or intervene i	ın	Yes No
any political campaign?	00 "			1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purp			tion	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	of any materia	als published or		
distributed by the foundation in connection with the activities.				
c Did the foundation file Form 1120-POL for this year?				1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	-	0.		
(1) On the foundation > \$ 0 • (2) On foundation manager				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenimanagers. > \$ 0.	ollure tax impo	oseo on touridation		
	IDCO			
2 Has the foundation engaged in any activities that have not previously been reported to the	inor			2 X
If "Yes," attach a detailed description of the activities.		rtiolog of incorporation or		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	i instrument, at	rucies of incorporation, of		3 X
	10.00			4a X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year.	idi r			4a X 4b X
 b if "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year 	'n	1		5 X
If "Yes," attach the statement required by General Instruction T				\$ \$ 7 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	erther			
By language in the governing instrument, or	cillici.			
By state legislation that effectively amends the governing instrument so that no mandato	on, directions ti	hat conflict with the ctate i	law	
remain in the governing instrument?	ny unconona n	Hat connict with the state	ICAN	6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	niata Part II. c	ol (c) and Part VV		$\frac{0}{7}$ X
Total the foundation have at least \$5,000 in assets at any time during the year. If Tos, com	ipicio i arcii, o	or (c), and rait Av		F . 12 KS 51 24/31
8a Enter the states to which the foundation reports or with which it is registered. See instructi	ons •			
PA				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney Gener	ral (or designate)	_	
of each state as required by General Instruction G? If "No," attach explanation	,	(5. 555.g.id.to)		8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of s	ection 4942(i)	(3) or 4942(j)(5) for calen	ıdar	
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," cor				9 X Z
10 Did any persons become substantial contributors during the tax year? H "Yes," attach a sched				10 X
and the same of th				Form 990-PF (2017)

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(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

5a During the year, did the foundation pay or incur any amount to

(2) Influence the outcome of any specific public election (see section 4955), of any voter registration drive?	or to carry on, directly or indi		es 🗶 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	37		es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization			,	
4945(d)(4)(A)? See instructions	m dodnos m cocion	Y	es 🗶 No 🖔	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or			
the prevention of cruelty to children or animals?			es 🗶 No 🚶	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in Regulations		
section 53 4945 or in a current notice regarding disaster assistance? See instr			N/A	5b
Organizations relying on a current notice regarding disaster assistance, check				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				
expenditure responsibility for the grant?	j	Y A\N	es 🔲 No 👔	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			3	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?	-	Y	es 🗓 No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> </u>	6b X
, If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b
Information About Officers, Directors, Trust Paid Employees, and Contractors		anagers, Highl	y 	
1 List all officers, directors, trustees, and foundation managers and				
(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 deterred compensation	(e) Expense account, other allowances
CHARLES R. BURKE, JR.	PRESIDENT		-	
650 SMITHFIELD STREET, SUITE 250	1			
PITTSBURGH, PA 15222	10.00	0.	0.	0.
PATRICIA G. BURKE	VICE PRESIDE	NT, TREASU	RER	
650 SMITHFIELD STREET, SUITE 250	1			
PITTSBURGH, PA 15222	5.00	0.	0.	0.
MERRILYNN YOUNG	TRUSTEE			
650 SMITHFIELD STREET, SUITE 250	1			
PITTSBURGH, PA 15222	1.00	0.	0.	0.
	1	anter IINONE II		
2 Compensation of five highest-paid employees (other than those inc	(b) Tritle, and average	, enter NONE.	(d) Contributions to	(a) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and delerred compensation	(e) Expense account, other allowances
NONE	-		<u> </u>	
	1	+		
	1			
	1			
	*:-	+		_
	†		1	
Total number of other employees paid over \$50,000			•	0
			Form	990-PF (2017)

▶

Total. Add lines 1 through 3

P	Part X Minimum Investment Return (All domestic foundations must complete this	s part Foreign four	ndations	, see instructions)
_		·		
·			1a	21,111,065.
	Average of monthly cash balances		1b	21,111,065. 432,938.
	Fair market value of all other assets		1c	3,966,836.
	d Total (add lines 1a, b, and c)		1d	25,510,839.
	Reduction claimed for blockage or other factors reported on lines 1a and			· · · · · · · · · · · · · · · · · · ·
Ī	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d	Ì	3	25,510,839.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	Ì	4	382,663.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4		5	25,128,176.
6	Minimum investment return Enter 5% of line 5		6	1,256,409.
_	Part.XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper foreign organizations, check here in and do not complete this part.)	rating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	1,256,409.
	Tax on investment income for 2017 from Part VI, line 5	20.557		
b		20,557. 3,710.		
_			2c	24.267.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	24,267. 1,232,142.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	1,232,142.
6	Deduction from distributable amount (see instructions)	1	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	1	7	1,232,142.
_	Part XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·		·
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	1,103,090.
Ь	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the			
а	Suntability test (prior IRS approval required)		3a	
þ	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	1,103,090.
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	20,557.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	Ţ	6	1,082,533.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe 4940(e) reduction of tax in those years	ther the foundation q	ualifies fo	or the section

	art XIII Undistributed Income (s	Can unstructions)		25 1	1407410 14gc 0
	art Aiii Ondistributed income (s	· · · · · · · · · · · · · · · · · · ·	(b)	(c)	(d)
		(a) Corpus	Years prior to 2016	2016	2017
1	Distributable amount for 2017 from Part XI, line 7				1,232,142.
2	Undistributed income, if any, as of the end of 2017				-
	a Enter amount for 2016 only			1,057,792.	·
1	b Total for prior years:				
			0.		
	Excess distributions carryover, if any, to 2017				
	a From 2012				
	bFrom 2013				
	c From 2014				
	dFrom 2015				
	e From 2016	0.			
	f Total of lines 3a through e Qualifying distributions for 2017 from	0.			
4	Part XII, line 4: ►\$ 1,103,090.				
	a Applied to 2016, but not more than line 2a			1,057,792.	
	b Applied to undistributed income of prior				· · · ·
	years (Election required - see instructions)		0.		
	c Treated as distributions out of corpus				
	(Election required - see instructions)	0.			
	d Applied to 2017 distributable amount				45,298.
	e Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2017 (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:				
	& Corpus Add lines 3f, 4c and 4e Subtract line 5	0.			
	b Prior years' undistributed income. Subtract				
	line 4b from line 2b		0.		
1	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 2016. Subtract line				
	4a from line 2a Taxable amount - see instr.			0.	
1	f Undistributed income for 2017 Subtract			1	
	lines 4d and 5 from line 1. This amount must				1,186,844.
_	be distributed in 2018				1,100,044.
1	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by	!			
	section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
Ω	Excess distributions carryover from 2012	0.			,
u	not applied on line 5 or line 7	0.	Ì		
9	Excess distributions carryover to 2018.				
·	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9:				
	a Excess from 2013				
	Excess from 2014	1		Ì	
	Excess from 2015				
	d Excess from 2016				

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e Excess from 2017

	RKE FOUNDAT				107410 Page 1
Part XIV Private Operating I			I-A, question 9)	N/A	
1 a If the foundation has received a ruling		. , .			
foundation, and the ruling is effective for		-	▶ └		
b Check box to indicate whether the foun		ng foundation described		4942(j)(3) or4	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Totál
investment return from Part X for					
each year listed			<u> </u>		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c		}			
3 Complete 3a, b, or c for the				 	
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets					
				 	
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)		}			
b "Endowment" alternative test - enter		 	y"	 	
2/3 of minimum investment return		/	1		
shown in Part X, line 6 for each year listed					
		/		 	
c "Support" alternative test - enter			ł		
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section				}	
512(a)(5)), or royalties)		/			<u> </u>
(2) Support from general public and 5 or more exempt		}	ł	ł	
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					_
(4) Gross investment income	<u> </u>	<u> </u>		<u> </u>	
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t		ructions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation wh			ributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed r	nore uian \$5,000). (See s	ection 507(a)(2).)			
IONE					
b List any managers of the foundation wh		•	or an equally large porte	ion of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater interes	SL.			
IONE					
2 Information Regarding Contribut					
Check here ► X if the foundation of					uests for funds If
the foundation makes gifts, grants, etc.,			<u> </u>		
a The name, address, and telephone num	ber or email address of th	ie person to whom applic	ations should be addres	ssed	
b The form in which applications should t	e submitted and informa	tion and materials they sh	onlq iucinge.		
c Any submission deadlines;	<u>-</u> ,				· · · ·
d Any restrictions or limitations on award	s, such as by geographics	l areas, charitable fields	kinds of institutions, or	other factors:	
and the second of minimum of artists	-, 20 2) goog.upinot				

Part XV. Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year THE BURKE FOUNDATIONS SEE ATTACHED SEE ATTACHED SEE ATTACHED 650 SMITHFIELD STREET, SUITE 250 PITTSBURGH, PA 15222 1,070,450. Total ➤ 3a 1,070,450. b Approved for future payment NONE . **▶** 3b 0. Total

Part XVI-	Α·	Analysis (of In	come-l	Producina	Activities
- Part Avi-	~ [MIIdIYSIS I	U1 11 1	COHIECT	rouucing	MCHAINES

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512 513, or 514	(e)	
	(a)	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue:	Business code	Amount	sion code	Amount	function income	
a						
h	_					
	_		1		**	
d	- 		 			
						
· · · · · · · · · · · · · · · · · · ·						
g Fees and contracts from government agencies	- 					
2 Membership dues and assessments	 					
3 Interest on savings and temporary cash	 					
investments			14	32.043.		
4 Dividends and interest from securities	-		14	32,043. 469,408.		
5 Net rental income or (loss) from real estate.	 		 	203/203		
·			\vdash			
a Debt-financed property b Not debt-financed property			14	32,928.		
6 Net rental income or (loss) from personal			1	32,320.		
, , ,						
property	 					
7 Other investment income			\vdash			
8 Gain or (loss) from sales of assets other	1		18	1,799,312.		
than inventory	 			1,100,012.		
9 Net income or (loss) from special events	<u> </u>		├			
10 Gross profit or (loss) from sales of inventory			\vdash	-		
11 Other revenue: a JUSTIFACTS (K-1)	900099	14,973.				
	_ 500033	14,3/3.				
	900099	10,760.				
c (K-1)	_ 500033	10,700.				
d	_		-		···	
e	- -	25,733.		2,333,691.	0.	
12 Subtotal. Add columns (b), (d), and (e)		43,133.	L		2,359,424.	
13 Total. Add line 12, columns (b), (d), and (e)	,			13	4,333,444.	
See worksheet in line 13 instructions to verify calculations.)	 				

Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B:

	the foundation's exempt pur	poses (other than by provi	ding funds for such purp	oses)		
					W.A.	
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Form 990-Pl		BURKE FOUNDATIO			1407410 Page 1
Part XV	II Information R Exempt Organ		and Transactions an	d Relationships With Nor	ncharitable
1 Did the		directly engage in any of the follow	ving with any other organization	described in section 501(c)	Yes No
	•	anizations) or in section 527, relat			
•	, ,, ,	dation to a noncharitable exempt	• •		
(1) Ca		·	·		1a(1) X
٠.	her assets				1a(2) X
	ransactions:				
(1) Sa	iles of assets to a noncharit	table exempt organization			1b(1) X
		oncharitable exempt organization			1b(2) X
(3) Re	ental of facilities, equipment	L or other assets			1b(3) X
(4) Re	eimbursement arrangement	is			1b(4) X
(5) Lo	oans or loan guarantees				1b(5) X
(6) Pe	erformance of services or m	nembership or fundraising solicita	tions		1b(6) X
c Sharin	g of facilities, equipment, m	nailing lists, other assets, or paid e	employees		1c X
d If the a	nswer to any of the above is	s "Yes," complete the following sc	hedule. Column (b) should alwa	ays show the fair market value of the g	joods, other assets,
		foundation. If the foundation rece , other assets, or services receive		in any transaction or sharing arrange	ment, show in
(a)Line no	(b) Amount involved		ble exempt organization	(d) Description of transfers, transaction	ins, and sharing arrangements
(-/	(0)	N/A			
		 			-
					·
		1			
		+			
	•••		*****		
					
$\overline{}$					
	 				
			· · · · · ·		
		†			
	18 / 3/-0				
		<u> </u>			
ın secti	on 501(c) (other than section	ctly affiliated with, or related to, or ion 501(c)(3)) or in section 527?	ne or more tax-exempt organiza	tions described	Yes X No
D IT Yes,	complete the following sch (a) Name of or		(b) Type of organization	(c) Description of re	lationshin
	N/A	yanization	(b) Type of organization	(0) 56361511611 61 16	it to
	N/A				.
Lun	der penalties of periury. I declare	e that I have examined this return, inclu-	ding accompanying schedules and st	atements and to the best of my knowledge	
Sign Here	MUVUUM	omplete Seciaration of preparer (other the	han taxpayer) is based on all informal	TRUSTEE	May the IRS discuss this return with the preparer shown below? See instr
	ignature of officer or truste	/ / /	Date*	Title Date Check if	PTIN
	Print/Type preparer's n		signature Ol A M	Date Check if self- employed	T I IIN
Paid	ROBERT J.		Tolding !	ı	D000000
	CPA	ROBER	т о. гаггу Т	0/31/18	P00088432 1-4474059
Prepare	Firm's name LAI	LLY & CO., LLC		Firm's EIN ► 8	44/40 09

Use Only

Firm's address ▶ 5700 CORPORATE DRIVE, SUITE 800 PITTSBURGH, PA 15237

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Name of the organization

Employer identification number

Organization type (check one) Filers of: Section:	
5 000 000 57	
Form 990 or 990-EZ 501(c)() (enter number) organization	
4947(a)(1) nonexempt charitable trust not treated as a private foundation	
527 political organization	
Form 990-PF X 501(c)(3) exempt private foundation	
4947(a)(1) nonexempt charitable trust treated as a private foundation	
501(c)(3) taxable private foundation	
Check if your organization is covered by the General Rule or a Special Rule . Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See insti	ructions
General Rule	
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributor.	
Special Rules	
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990-EZ, line 1 Complete Parts I and II	that received from
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one coryear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purp the prevention of cruelty to children or animals Complete Parts I, II, and III	
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one coryear, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1 is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, purpose Don't complete any of the parts unless the General Rule applies to this organization because it received not religious, charitable, etc., contributions totaling \$5,000 or more during the year	,000 If this box , etc ,
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 995) 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 its Form 990-PF, certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF).	

Name of organization

Employer identification number

THE BURKE FOUNDATION

25-1407410

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES R BURKE CLAT00 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$ 240,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHARLES R BURKE CLAT02 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CHARLES R BURKE CLAT03 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$120,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	CHARLES R BURKE CLAT99 650 SMITHFIELD STREET PITTSBURGH, PA 15222	s <u>120,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	CHARLES R BURKE CLUT03 650 SMITHFIELD STREET PITTSBURGH, PA 15222	s154,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	CHARLES R BURKE CLUT08 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$ <u>173,080</u> .	Person X Payroll

Name of organization

Employer identification number

THE	BURKE	FOUNDATION

25-1407410

THE B	URKE FOUNDATION	2	0-140/410		
Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
7	CHARLES R BURKE CLUT98 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$88,293.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
8	BURKE FAMILY 2017 NONGRANTOR CLUT #1 650 SMITHFIELD STREET PITTSBURGH, PA 15222	s149,041.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
9	BURKE FAMILY 2017 NONGRANTOR CLUT #2 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$ 58,266.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
10	BURKE FAMILY 2017 NONGRANTOR CLUT #3 650 SMITHFIELD STREET PITTSBURGH, PA 15222	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

Employer identification number

THE BURKE FOUNDATION

25-1407410

Part II	Noncash Property (see instructions) Use duplicate copies of Part I	I if additional space is needed	
(a) No. from Part I,	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) ' Date received
723453 11-01-		Schedule R (Form S	90. 990-EZ, ar 990-PF) (2017)

Name of org	ganization (2017)			Employer identification number
THE BU	JRKE FOUNDATION			25-1407410
Part III	Exclusively religious, charitable, etc., conti	columns (a) through (e) and the follo	WING line entry, For organization	(10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additional	s, charitable etc contributions of \$1 000 o	r less for the year (Enter this info onc	\$
(a) No. from			44/ 5	
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
}		(e) Transfer of gif	<u> </u>	
		,,		
-	Transferee's name, address, an	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
Part I	(a) i aipose oi giit	(0, 000 b. g.n.	(0,200	
		(e) Transfer of gif	t	
	Transferee's name, address, an	.d 71D + 4	Pelationship of tra	nsferor to transferee
	mansieree 3 manie, audiess, an		Trendrionismp or tra	naicroi to danaicree
				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
, , , ,				
		(e) Transfer of gif	t	
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
1				
-				
		(e) Transfer of gift	t.	
_	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee
	· · · · · · · · · · · · · · · · · · ·	<u></u>		

FORM 990-PF INTERE	ST ON SAVII	NGS AND I	EMPOR	ARY CASH	INVESTMENT	rs st	ATEMENT	1
SOURCE					(B) INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
JUSTIFACTS THE BURKE FOUNDATIO	ons		1° 31,8°	70. 73.	170. 31,873.			,
TOTAL TO PART I, LI	NE 3		32,0	43.	32,043.			
FORM 990-PF	DIVIDENDS	E AND INT	EREST	FROM SE	CURITIES	ST	ATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	rs	(A) REVENU PER BOO		EST-	(C) ADJUST NET INC	
THE BURKE FOUNDATIONS	469,408	•	0.	469,4	08. 469,	408.		
TO PART I, LINE 4	469,408	•	0.	469,4	08. 469,	408.		
FORM 990-PF		RENTAL	INCOM	 €		ST	ATEMENT	3
KIND AND LOCATION O	F PROPERTY				ACTIVIT NUMBER		GROSS NTAL INC	OME
THE BURKE FOUNDATIO	NS (K-1)				1		32,9	28.
TOTAL TO FORM 990-P	F, PART I,	LINE 5A					32,9	28.
FORM 990-PF		OTHER	INCO	ME	-	ST	ATEMENT	4
				(A) VENUE	(B) NET INVES		(C) ADJUSTE	
DESCRIPTION			PER	BOOKS	MENT INCC	ME .	NET INCO	ME
DESCRIPTION JUSTIFACTS (K-1) THE BURKE FOUNDATIO	NS (K-1)		PER	14,973 10,760	•	0. 0.	NET INCO	ME ——

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	4,150.	0.		0.	
TO FORM 990-PF, PG 1, LN 16B	4,150.	0.		0.	
FORM 990-PF	TAX	ES	S'	FATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PA TAX FOREIGN TAX	15. 12,654.	0. 12,65 4 .		0.	
TO FORM 990-PF, PG 1, LN 18	12,669.	12,654.		0.	
FORM 990-PF	OTHER E	XPENSES	S	ratement 7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
THE BURKE FOUNDATIONS (K-1) THE BURKE FOUNDATIONS (K-1) THE BURKE FOUNDATIONS (K-1) CHARITABLE EXPENSES JUSTIFACTS (K-1)	111,842. 150,530. 2,996. 32,640. 51.	111,801. 150,530. 2,996. 0.		0. 0. 0. 32,640.	
TO FORM 990-PF, PG 1, LN 23	298,059.	265,327.		32,640.	
	FOOTN	OTES	S'	гатемент 8	

FORM 990-PF	OTHER	INCREASES	IN NET	ASSETS OR F	UND BALANCES	STATEMENT	9
DESCRIPTION						AMOUNT	
UNREALIZED GA		INVESTMENTS	5			45,01 10,62	
TOTAL TO FORM	f 990-PI	F, PART III	, LINE	3		55,64	40.
FORM 990-PF			OTHER	INVESTMENTS		STATEMENT	10
DESCRIPTION				VALUATION METHOD	BOOK VALUE	FAIR MARKET	r
THE BURKE FOU	NDATION	ıs		COST	21,354,383.	27,583,19	97.
TOTAL TO FORM	1 990-PF	r. PART II.	LINE	13	21,354,383.	27,583,19	—— 97.