

Return of Private Foundation

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

OMB No. 1545-0052

 ▶ 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. Department of the Treasury internal Revenue Service

		dar year 2017 or tax year beginning	, 201	7, and			, 20
Nan	ne of fou	Indation			A Employe	r identification numb	8 [
		AHID JAVED & JAHANARA BURKI FAMILY FO	UNDATION, I	NC.		377368	
Nun	nber and	street (or P.O. box number if mail is not delivered to street address)	Roor	n/suite	B Telephon	e number (see instruct	tions)
		STACKHOUSE COURT			(301)	983-1941	
City	or town	, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pend	ling, check here▶[
PO'	TOMAC	MD 20854					
G	Check	all that apply: Initial return Initial return	of a former public	c charity	D 1. Foreign	n organizations, check	here ▶
		☐ Final return ☐ Amended	return		2. Foreign	organizations meetin	a the 85% test.
		Address change Name char	nge		check	here and attach comp	utation · · ▶[
		type of organization: Section 501(c)(3) exempt p				foundation status was 07(b)(1)(A), check here	
	Section	n 4947(a)(1) nonexempt charitable trust 🔲 Other tax		dation	300000	or (b)(1)(y, around	
		arket value of all assets at J Accounting method	: 🔀 Cash 🗌 A	Accrual		ndation is in a 60-mon	
		year (from Part II, col. (c), Other (specify)			under sec	ction 507(b)(1)(B), chec	xkhere▶[
	ine 16) ► \$ 424,821. (Part I, column (d) must be	on cash basis.)]		
Pa	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(h) Not	investment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		COME	income	purposes
		the amounts in column (a) (see instructions).)					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	43,995.	1			- 10
	2	Check ► ☑ if the foundation is not required to attach Sch. B		 	,		
i	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	14,308.	· 	14,308.		, S.
	5a	Gross rents		<u> </u>			7 7 7
	b	Net rental income or (loss)		ļ		· · · · · · · · · · · · · · · · · · ·	
9	6a	Net gain or (loss) from sale of assets not on line 10		1		<u> </u>	2 T () 3 L 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
evenue	b	Gross sales price for all assets on line 6a_CEMED			فيرد م		Mary St. San Jan
e	7	Capital gain net income (from Part IV, line 2)		_	15.		2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Œ	8	Net short-term capital gales . MAY. 2.2.2018.	8		. , , , ,		Sully 1 Aug
	9	income modifications -			· · · · · · · · · · · · · · · · · · ·		
	10a	Gross sales less returns and allowances			, ,		A STATE OF THE STA
	Ь	Less: Cost of goods sold OGDEN, UT		1		-	A POST A
	C	Gross profit or (loss) (attach schedule)		_	`		, , ,
	11	Other income (attach schedule)		-			
	12	Total. Add lines 1 through 11	58,303		14,323.		
ge l	13	Compensation of officers, directors, trustees, etc.					
Expenses	14	Other employee salaries and wages				<u> </u>	
ē	15	Pension plans, employee benefits		+			
8	16a	Legal fees (attach schedule)				<u> </u>	
_	Þ	Accounting fees (attach schedule)	700		4 006		-
Operating and Administrative	C	Other professional fees (attach schedule) L-16c Stmt	4,226	· 	4,226.	 	
Ę	17	Interest		 	****	<u> </u>	
Ę	18	Taxes (attach schedule) (see instructions) See . St.mt.	199	-			
Ē	19	Depreciation (attach schedule) and depletion		 		 	
\$	20	Occupancy		+			
ğ	21	Travel, conferences, and meetings	· · · · · · · · · · · · · · · · · · ·	 	 		
æ	22	Printing and publications					1
gu	23 24	Other expenses (attach schedule)	<u> </u>				
æ	24	Add lines 13 through 23	- 105		4 226]	
ğ	OF.		5,125	T	4,226.	 	
Ö	25	Contributions, gifts, grants paid	60,400		1 226		
	26	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12:	65,525	+	4,226.		
	27		7 000	-			
	a	Excess of revenue over expenses and disbursements	-7,222	' 	10,097.	 	+
	D	Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-)			10,097.		
		work Reduction Act Notice, see instructions.	4	_1		J	orm 990-PF (20

For Paperwork Reduction Act Notice, see Instructions.

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Pa	ırt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	<u> </u>
		and the first of the control of the	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	12,656.	19,453.	19,453.
1	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) ▶			
		Less: allowance for doubtful accounts ▶			
\$	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
A	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) L-10b Stmt	418,015.	403,996.	405,368.
	С	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 ▶		,	,
		Less: accumulated depreciation (attach schedule) ▶		· · · · · · · · · · · · · · · · · · ·	
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the		 	
		instructions. Also, see page 1, item l)	430,671.	423,449.	424,821.
	17	Accounts payable and accrued expenses	330)0721	123/1131	71 J.C. Vic. C. etc.
	18	Grants payable			is your to the second
Liabilities	19	Deferred revenue			
≣ .	20	Loans from officers, directors, trustees, and other disqualified persons			
a	21	Mortgages and other notes payable (attach schedule)			
	22				
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)			
_		Foundations that follow SFAS 117, check here >			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
8		and complete lines 24 through 26, and lines 30 and 31.			, , , ,
Ē	24	Unrestricted			
Balances	25	Temporarily restricted			
	26				,
B	20	Permanently restricted			
Net Assets or Fun		Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31.		ı	
7	27	Capital stock, trust principal, or current funds			
9	27 28	Paid-in or capital surplus, or land, bldg., and equipment fund	 		
<u>8</u>			430 671	403 440	
3	29	Retained earnings, accumulated income, endowment, or other funds	430,671.	423,449.	
末	30 31	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see	430,671.	423,449.	<u> </u>
ž	"	instructions)	430,671.	423,449.	- '
D۵	rt III	Analysis of Changes in Net Assets or Fund Balances	430,671.	423,443.	<u> </u>
		ai net assets or fund balances at beginning of year—Part II, colu	mp (a) line 30 (must	agree with	T
•		of-year figure reported on prior year's return)			430,671.
_					
_		er amount from Part I, line 27a		2	-7,222.
3	Oth	er increases not included in line 2 (Itemize)		3	402 440
4		lines 1, 2, and 3		4	423,449.
5	Dec	reases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—	Dort II ook /-\ !	5	400 440
	IOTE	in their asserts or runo paratices at end of year (line 4 minus line 5)—	rait II, column (b), lin	e 30 6	423,449.

Part	V Capital Gains and	d Losses for Tax on Investm	ent Income			
	(a) List and describe the k	ind(a) of property sold (for example, real ex use; or common stock, 200 shs. MLC Co.)	state,	(b) How acquired P—Purchase D—Donation	(c) Date acquire (mo., day, yr.)	
18	1001.001 SHS MAINS	TAY TAX FREE BOND FUNI	·	P	09/30/201	4 11/27/2017
		ANCOCK STRATEGIC INCOME		P _	03/22/201	
C	1550.388 SHS FEDERA	TED STRATEGIC VALUE DIV	TIDEND FUND	P	09/30/201	4 11/28/2017
		INCOME BUILDING FUND		P	11/16/201	
	234.082 JP MORGAN	INCOME BUILDING FUND	 	P	11/16/201	
	(e) Gross sales price	(f) Deprectation allowed (or allowable)		r other basis ense of sale) Gain or (loss) Dius (f) minus (g))
<u>a</u>	10,000.			10,010.		-10.
<u> </u>	<u>25,137.</u>			26,108.	 	<u>-971.</u>
<u> </u>	10,000.			9,520.	 	480.
<u>d</u> 8	2,500. 2,500.			2,243. 2,241.	 	257. 259.
		owing gain in column (h) and owned	by the foundation		M O-1-	
·	(I) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col. (i) l. (i), if any	col. (k), bu	(Col. (h) gein minus at not less than -0-) or ses (from col. (h))
a						-10.
b						<u>-971.</u>
<u>C</u>	· · · · · · · · · · · · · · · · · · ·				<u> </u>	480.
<u>d</u>			· · · · · · · · · · · · · · · · · · ·		ļ	257.
		(Marin	oloo ootoo in Da		 	259.
2	Capital gain net income of		also enter in Pa , enter -0- in Pa		2	15.
(For a	Part I, line 8	der Section 4940(e) for Reduivate foundations subject to the	ced Tax on N	· · · · · · · · · · · · · · · · · · ·		
Was t	s," the foundation doesn't	section 4942 tax on the distribu qualify under section 4940(e). Do	not complete t	this part.		☐ Yes 🗷 No
1	(a)	ount in each column for each yea	ar; see the instr		aking any entr	(d)
Cale	Base period years andar year (or tax year beginning in	(b) Adjusted qualifying distribution	s Net value o	(c) of noncharitable-use a	assets (col	Distribution ratio (b) divided by col. (c))
	2016		0.		0.	0.000000
	2015		0.		0.	0.00000
-	2014	20,8		341,0		0.061157
	2013	13,4		173,	683.	0.077354
	2012	6,0	00.	277,2	294.	0.021638
2	Total of line 1, column (d	•			. 2	0.160149
3)				0.100149
		oundation has been in existence				0.032030
4	Enter the net value of nor	ncharitable-use assets for 2017 for	rom Part X, line	5	. 4	0.
5	Multiply line 4 by line 3				. 5	0.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		. 6	101.
7	Add lines 5 and 6				. 7	101.
8		ons from Part XII, line 4			. 8	0.
	If line 8 is equal to or gre Part VI instructions.	ater than line 7, check the box in	n Part VI, line 1k	o, and complete	that part using	a 1% tax rate. See the

Part \		-500	Instru	cuor	1S)		
	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		N/				
	Date of ruling or determination letter: (attach copy of letter if necessary – see instructions)						
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check						
_	here I and enter 1% of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of J Part I, line 12, col. (b).	1-					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.			
3	Add lines 1 and 2	\rightarrow	2	02.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5		2	02.			
6	Credits/Payments:	1					
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a	,-	. , .				
b	Exempt foreign organizations—tax withheld at source 6b	**.*			′		
C	Tax paid with application for extension of time to file (Form 8868) . 6c 202.	1	1				
d	Backup withholding erroneously withheld						
7	Total credits and payments. Add lines 6a through 6d	-	2	02.			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	-					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	_		0.			
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10	_		0.			
1	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11						
	VII-A Statements Regarding Activities			N	N		
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or	aia it		Yes	No		
_	participate or intervene in any political campaign?	•	18		×		
р	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? Se instructions for the definition		1b		×		
	if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	terials					
	published or distributed by the foundation in connection with the activities.		,				
C	Did the foundation file Form 1120-POL for this year?		1c	8450	×		
d							
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$						
8	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important on foundation managers. ▶ \$	sed		۰ «			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		×		
	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 incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	cles of	3		×		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		48	†	×		
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	 			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		5		×		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			77.			
	By language in the governing instrument, or	- 4L-4	-		ļ		
	By state legislation that effectively amends the governing instrument so that no mandatory direction conflict with the state law remain in the governing instrument?	s wat			l		
-	conflict with the state law remain in the governing instrument?	 ,	6	×	 		
7 8a	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and P Enter the states to which the foundation reports or with which it is registered. See instructions.	an XV	7	×			
b	if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Go	eneral		11	, č		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	×			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If 'complete Part XIV	"Yes," · ·	9		×		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing names and addresses	g their 			×		

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ► N/A			
14	The books are in care of ► SHAHID BURKI Located at ► 11112 STACKHOUSE COURT POTOMAC MD ZIP+4 ► 20854	83-	1941	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		•	D
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	40	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16	 ,	×
	the foreign country ▶			,
Part	VILE Statements Regarding Activities for Which Form 4720 May Be Required	,	1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(1) Engage in the sale of exchange, or leasing of property with a disqualified person?	-1.5%	17.5	
	disqualified person?		-	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	15-		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 🗵 No		3	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	/ c	ر -رجونا	
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1 mg 15		,
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			-
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	£ (,*.	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1c	<u> </u>	×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10	F	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	-/2/	2,4	
8	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		↓ -	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	منگفر ا	134	
	all years listed, answer "No" and attach statement—see instructions.)	2b		×
C	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, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20	3 /		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	- 19		, ,
	at any time during the year?	,	kii "	
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	1.	,	
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	- Care		· · · ·
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2017.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		×
Þ	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 2017?	4b	 	×
			0-PF	(2017)

Page	6
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Part	VII-B Statements Regarding Activities	for W	hich Form	4720 N	lay Be R	equire	d (contii	nued)			
5a	During the year, did the foundation pay or incur a	any amo	ount to:	_						Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes 🖾 No										
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes?										
	(4) Provide a grant to an organization other than a charitable, etc., organization described in										-
	section 4945(d)(4)(A)? See instructions										
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?										
ь											
_	Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions										
	Organizations relying on a current notice regardi	ng disas	ster assistan	ce, ched	ck here .			▶□	-,	55. 1	
C	If the answer is "Yes" to question 5a(4), does t			exemp	tion from	the tax		_	· 1	1	
	because it maintained expenditure responsibility		_				☐ Yes	☐ No	279-7	7	-
.	If "Yes," attach the statement required by Regula					miuma			5× .	1: "	
6 a	Did the foundation, during the year, receive any on a personal benefit contract?	iunus, (unecuy or inc	arecuy,			Yes	⊠ No) - T	
b	Did the foundation, during the year, pay premium	ns. dire	ctly or indired	tly, on	a personal	benefit			6b	 	×
_	If "Yes" to 6b, file Form 8870.	,	,	,,	p			-			
	At any time during the tax year, was the foundation						Yes	⊠ No			
	If "Yes," did the foundation receive any proceed								7b	<u></u>	<u> </u>
Par	VIII Information About Officers, Direc	tors, T	rustees, Fo	oundat	ion Mana	igers,	Highly !	Paid E	mpio	/ees,	
	and Contractors List all officers, directors, trustees, and found	lation n	nanagaga an	d their	compone	ation S	oe instr	uctions	· · · · · · · · · · · · · · · · · · ·		
<u> </u>			and average		npensation	(d) (ontribution	ıs to		ense ac	count
	(a) Name and address		rs per week ed to position		ot pald, er -0-)	emplo	yee benefit rred comp	plans ensation		allowa	
			ou to position	ent	M 777	and done			1		
JAH	ANARA BURKI	+	IDENT	ent	BI -V-)	and dele					
	ANARA BURKI 2 STACKHOUSE COURT POTOMAC MD 20854	PRESI	IDENT 1.00	खार	0.	and dole		0.			0.
1111 SAI	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI	PRESI	IDENT 1.00 ETARY	ent	0.	and dole		0.			
1111 SAI 9 S	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854	PRESI	IDENT 1.00 ETARY 1.00	ent	<u>-</u>						0.
1111 SAI 9 SI SAI	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI	PRESI	1.00 ETARY 1.00 SURER	ent	0.	and desire		0.			0.
1111 SAI 9 S SAI 1111	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854	PRESI	IDENT 1.00 ETARY 1.00	ent	0.			0.			
1111 SAI 9 S SAI 1111	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI	PRESI	1.00 ETARY 1.00 SURER	ent	0.	and desire		0.			0.
1111 SAI 9 S SAI 1111	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854	PRESI SECRE	1.00 ETARY 1.00 SURER 1.00 2.00		0. 0. 0.			0. 0. 0.	s). If r	none,	0.
1111 SAI 9 S SAI 1111 See	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854 Statement	PRESI SECRE	1.00 ETARY 1.00 SURER 1.00 2.00		0. 0. 0.		see inst	0. 0. 0.		none,	0.
1111 SAI 9 Si SAI 1111 See	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854 Statement Compensation of five highest-paid employed	PRESI SECRE TREAS	1.00 ETARY 1.00 SURER 1.00 2.00	se inclu	0. 0. 0.	ne 1—:		0. 0. 0. ruction	(e) Exp		0. 0. enter
1111 SAI 9 Si SAI 1111 See	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854 Statement Compensation of five highest-paid employed "NONE."	PRESI SECRE TREAS	I DENT 1.00 ETARY 1.00 SURER 1.00 2.00 er than those hours per visite and a hours per v	se inclu	0. 0. 0. 0. uded on li	ne 1—:	d) Contrib employee	0. 0. 0. ruction	(e) Exp	ense ac	0. 0. enter
1111 SAI 9 S SAI 1111 See	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854 Statement Compensation of five highest-paid employed "NONE."	PRESI SECRE TREAS	I DENT 1.00 ETARY 1.00 SURER 1.00 2.00 er than those hours per visite and a hours per v	se inclu	0. 0. 0. 0. uded on li	ne 1—:	d) Contrib employee	0. 0. 0. ruction	(e) Exp	ense ac	0. 0. enter
1111 SAI 9 S SAI 1111 See	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854 Statement Compensation of five highest-paid employed "NONE."	PRESI SECRE TREAS	I DENT 1.00 ETARY 1.00 SURER 1.00 2.00 er than those hours per visite and a hours per v	se inclu	0. 0. 0. 0. uded on li	ne 1—:	d) Contrib employee	0. 0. 0. ruction	(e) Exp	ense ac	0. 0. enter
1111 SAI 9 S SAI 1111 See	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854 Statement Compensation of five highest-paid employed "NONE."	PRESI SECRE TREAS	I DENT 1.00 ETARY 1.00 SURER 1.00 2.00 er than those hours per visite and a hours per v	se inclu	0. 0. 0. 0. uded on li	ne 1—:	d) Contrib employee	0. 0. 0. ruction	(e) Exp	ense ac	0. 0. enter
1111 SAI 9 S SAI 1111 See	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854 Statement Compensation of five highest-paid employed "NONE."	PRESI SECRE TREAS	I DENT 1.00 ETARY 1.00 SURER 1.00 2.00 er than those hours per visite and a hours per v	se inclu	0. 0. 0. 0. uded on li	ne 1—:	d) Contrib employee	0. 0. 0. ruction	(e) Exp	ense ac	0. 0. enter
1111 SAI 9 S SAI 1111 See	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854 Statement Compensation of five highest-paid employed "NONE."	PRESI SECRE TREAS	I DENT 1.00 ETARY 1.00 SURER 1.00 2.00 er than those hours per visite and a hours per v	se inclu	0. 0. 0. 0. uded on li	ne 1—:	d) Contrib employee	0. 0. 0. ruction	(e) Exp	ense ac	0. 0. enter
11111 SAII 9 SI SAII 11111 See	2 STACKHOUSE COURT POTOMAC MD 20854 RA A BURKI PRINKLEWOOD COURT POTOMAC MD 20854 RAH BURKI 3 STACKHOUSE COURT POTOMAC MD 20854 Statement Compensation of five highest-paid employed "NONE."	PRESI SECRE TREAS	I DENT 1.00 ETARY 1.00 SURER 1.00 2.00 er than those hours per visite and a hours per v	se inclusiverage week osition	0. 0. 0. Ided on li	ne 1—s	d) Contrib employee	0. 0. 0. ruction utilons to benefit deferred seation	(e) Exp other	ense ac	0. 0. enter

Par	Information About Officers, Directors, Tra and Contractors (continued)	ustees, Foundation Managers, Highly Pai	d Employees,
3	Five highest-paid independent contractors for profess	lonal services. See instructions. If none, enter "	NONE."
	(a) Name and address of each person paid more than \$50,0		(c) Compensation
NON	IE.		
Taka	i mumber of others modified over \$50,000 for moderate and		
1014	Il number of others receiving over \$50,000 for professional	services	. ▶ 0
	Summary of Direct Charitable Activities st the foundation's four largest direct charitable activities during the tax y		
org	ganizations and other beneficiaries served, conferences convened, research	h papers produced, etc.	Expenses
1	NONE		
2			
3			
	d		
4			
4			
	t IX-B Summary of Program-Related Investme	:nts (see instructions)	
Par	rt IX-B Summary of Program-Related Investme	·	Amount
Par		·	Amount
Par De	escribe the two largest program-related investments made by the foundation	·	Amount
Par De	escribe the two largest program-related investments made by the foundation	·	

All other program-related Investments. See instructions.

0.

Form **990-PF** (2017)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)	gn found	Page & ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	
ь	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
8	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
•	instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
art			
<u> </u>	and certain foreign organizations, check here ▶ □ and do not complete this part.)	Janua	
1	Minimum investment return from Part X, line 6	1	0.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)	1 1	
c	Add lines 2a and 2b	2c	202
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
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	0
Part	Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etctotal from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
2	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	0
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. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
_	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.		
RAA	DEV MANA PRO	Fo	m 990-PF (201

1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1	line 7				
2	Undistributed income, if any, as of the end of 2017:				
a	Enter amount for 2016 only		-1	0.	
b	Total for prior years: 20,20,20	a Commercial Contraction			
3	Excess distributions carryover, if any, to 2017:				*
a	From 2012		,		-
b	From 2013	,		,	
C	From 2014			, m	
đ	From 2015	·			
9		1,253.			
4	Total of lines 3a through e	1,255.		2	14 1 1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1
~	line 4: ► \$ 0.		, ,		950
_	Applied to 2016, but not more than line 2a .				
	Applied to undistributed income of prior years				de Section
-	(Election required—see instructions)			1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
c	Treated as distributions out of corpus (Election		- ,		er de la
v	required—see instructions)			作了意思的意	Carrier Contract
d	Applied to 2017 distributable amount			10000000000000000000000000000000000000	
4	Remaining amount distributed out of corpus	0.		13 10 10 to the 18 18 18 18 18 18 18 18 18 18 18 18 18	
5	Excess distributions carryover applied to 2017				<u> </u>
•	(If an amount appears in column (d), the same	· · · · · · · · · · · · · · · · · · ·		17035461145	135-20-5
	amount must be shown in column (a).)			To Address of the	
6	Enter the net total of each column as			March Contract	market with a first
•	indicated below:			《梅奇· 斯斯·斯尔·斯	不可能
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,253.			W. F. S.
b	Prior years' undistributed income. Subtract			A This	在中国外国立
	line 4b from line 2b		0.	M. Baraka B.	Egologia Sanara
C	Enter the amount of prior years' undistributed	112 1 1 125			
•	income for which a notice of deficiency has	, ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° °			
	been issued, or on which the section 4942(a)	15 - 5 6 25 C			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	tax has been previously assessed	1. 1. 1. 5. 8		Control of the state of the state of	
d	Subtract line 6c from line 6b. Taxable	,			ا معالم الما الما الما الما الما الما ال
	amount-see instructions		0.		1 1 1 1 1 1 1 1
8	Undistributed income for 2016. Subtract line	1- 1- 1 · ·	","		The state of the s
	4a from line 2a. Taxable amount-see	1			
	instructions		-	0.	ļ
f	Undistributed income for 2017. Subtract lines		انه این سده از این		
	4d and 5 from line 1. This amount must be	1 - 10 - 40 1808	一大ないというない		
	distributed in 2018	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	<u> </u>	
7	Amounts treated as distributions out of corpus		4	+ 27, 1 ,	
	to satisfy requirements imposed by section			心情知道可以是	The same
	170(b)(1)(F) or 4942(g)(3) (Election may be		100 July 100	B 0.5 " " " " " " " " " " " " " " " " " " "	
•	required—see instructions)		1 1 1 1 1	2 th	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	The state of the s	
^	Excess distributions carryover to 2018.	0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 12 23 15 1	**************************************
9	Subtract lines 7 and 8 from line 6a	1 050		Sec. 2. 1	1.30
40	Analysis of line 9:	1,253.			
10_	•			1	1 2 2
8	Excess from 2013	4			1 " " "
b	Excess from 2014	Ⅎ ຸ	1		1 -
C	Excess from 2015 0.	many a management of the second secon	المنافعة المنافعة المنافعة المنافعة	والمراكبة والمنافية والمنافية المراكبة	THE TREE
d	Excess from 2016 0.		1	15 - 1	中。 我想说的

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200		u

Part	XIV Private Operating Foundation	tions (see instru	ctions and Part	VII-A. question 9		N/A
	If the foundation has received a ruling					/
	foundation, and the ruling is effective for	2017, enter the da	te of the ruling .	•		
b	Check box to indicate whether the four	ndation is a private	operating foundat	tion described in se	ction 🗌 4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum Investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	each year listed					
Ь	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				/	
8	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:					
а	"Assets" alternative test-enter:		,			
	(1) Value of all assets				· · · · · · · · · · · · · · · · · · ·	
	(2) Value of assets qualifying under					
ь	section 4942(j)(3)(B)(i)					
D	of minimum investment return shown in	•		i		
_	Part X, line 6 for each year listed					-
C						
	(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 organization as provided in					
	section 4942(j)(3)(B)(lii)					
	(4) Gross investment income					
Part	XV Supplementary Information	on (Complete th	is part only if t	he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	-see instruction	ns.)			
1	Information Regarding Foundation					
a	List any managers of the foundation of the close of any tax year (but of	who have contributionly if they have co	ted more than 25 ontributed more th	% of the total cont nan \$5,000). (See s	ributions received ection 507(d)(2).)	by the foundation
	SHAHID JAVED AND JAHANARA					
b	List any managers of the foundation ownership of a partnership or other expenses the control of					rge portion of the
•	N/A	•		_		
2	Information Regarding Contribution Check here ► ☑ If the foundation unsolicited requests for funds. If the f complete items 2a, b, c, and d. See in	only makes controundation makes	ributions to prese	elected charitable		
8	The name, address, and telephone nu	imber or email ad	dress of the perso	on to whom applice	itions should be a	ddressed:
b	The form in which applications should	d be submitted an	d information and	materials they sho	uld Include:	
C	Any submission deadlines:					
d	Any restrictions or limitations on av factors:	vards, such as b	y geographical a	reas, charitable fi	elds, kinds of ins	titutions, or other

Form 990-PF (2017) Page 11 Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment if recipient is an individual, Recipient **Foundation** show any relationship to any foundation manager Purpose of grant or status of Amount contribution Name and address (home or business) recipient or substantial contributor a Paid during the year THE CITIZENS FOUNDATION USA 2425 TOUHY AVE ELK GROVE VILLAGE IL 60007 NC GENERAL SUPPORT OF PROGRAM 6,400. DEVELOPMENTS IN LITERACY 17320 RED HILL AVE NC GENERAL SUPPORT OF PROGRAM 5,000. IRVINE CA 92614 SPORTS PLUS P.O. BOX 83274 NC GAITHERSBURG MD 20878 GENERAL SUPPORT OF PROGRAM 1,000. IMRAN KHAN CANCER APPEAL 8950 W OLYMPIC BLVD NC 2,500. BEVERLY HILLS CA 90211 GENERAL SUPPORT OF PROGRAM SOS CHILDREN'S VILLAGES FEREOZEPOUR ROAD NC GENERAL SUPPORT OF PROGRAM 500. LAHORE, PAKISTAN 54600 BURKI INSTITUTE OF PUBLIC POLICY AT NETSOL 126B BLOCK NEW GARDEN TOWN LAHORE, PAKISTAN NC GENERAL SUPPORT OF PROGRAM 45,000. **3a** 60,400. **b** Approved for future payment

Total

BAA

Par	t XVI-	A Analysis of Income-Producing Ac	tivities				
		s amounts unless otherwise indicated.		usiness income	Excluded by secti	on 512, 513, or 514	(e)
1	Progr	am service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
	a						
	ь [—]						
	c						
	d ¯			<u> </u>			
	e				<u> </u>		
	f					 	
	g Fe	ees and contracts from government agencies					
2		pership dues and assessments					
		st on savings and temporary cash investments					
4	Divide	ends and interest from securities	900001	14,308.			
5	Net re	ental income or (loss) from real estate:					
	a De	ebt-financed property					
		ot debt-financed property					
		ental income or (loss) from personal property					
		Investment income					
		or (loss) from sales of assets other than inventory				1	
		ncome or (loss) from special events					
		profit or (loss) from sales of inventory			1		
		revenue: a			-		
	b			<u> </u>			
	_						
	d				1		† -
	8		·		 		
12	Subto	otal. Add columns (b), (d), and (e)		14,308.			
		. Add line 12, columns (b), (d), and (e)				13	14,308.
		theet in line 13 instructions to verify calculation					
Par	t XVI	B Relationship of Activities to the A	Accomplishm	ent of Exemp	t Purposes		
	No.	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is repo	orted in column	(e) of Part XVI	-A contributed	importantly to the
		accomplishment of the foundation's exempt put	rposes (other tha	n by providing tun	ids for such purp	oses). (See instru	cuons.)
N/A							
					<u> </u>		
							
		·					
							
						 	
			·	·		· · · · · · · · · · · · · · · · · · ·	····
]						
-						F	orm 990-PF (2017)

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Part	XVII	Information Organization	n Regarding Tran	sfers to and T	ransaction	s and F	Relationship	s With N	oncharit	able Ex	empt
1	in se	ne organization of	lirectly or indirectly ther than section							Yes	No
a	(1) C	ash	corting foundation to	o a noncharitable	exempt org	anization	of:			la(1)	×
b	Other	ther assets . transactions:								1a(2)	×
	(2) P	urchases of asse	a noncharitable exe ts from a noncharit	able exempt orga	anization .				[1b(1) 1b(2)	×
	(4) R		equipment, or other rangements						[1b(3) 1b(4) 1b(5)	×
c	(6) Po	erformance of se	rvices or membersl quipment, mailing li		solicitations	3		· · · ·	[1b(6)	×
d	If the value	answer to any of the goods, of	of the above is "Ye ther assets, or servi	s," complete the ices given by the	following so reporting fo	chedule. undation	Column (b) s	should alw lation rece	ays show ived less t	the fair r	narket narket
(a) Line		b) Amount involved	on or sharing arrang (c) Name of nonc	haritable exempt orga			ription of transfe				
											
	-					. ,					
	-										
				· · · · · · · · · · · · · · · · · · ·	~ ~						
	-		: 								
			· · · · · · · · · · · · · · · · · · ·								
		<u></u>									···
	descr	ribed in section 5	ectly or indirectly af 501(c) (other than se following schedule	ction 501(c)(3)) o	r in section (🗆		No
		(a) Name of organ	ization	(b) Type	of organization			(c) Description	n of relations	ship	
								 			
Sign	Unde	r penalties of perjury, i ct. and complete. Decl	declare that I have examinaration of preparer (other th	ed this return, including an taxpayer) is based o	accompanying a n all information	chedules an of which pre	d statements, and parer has any knor	to the best of wledge.			
Here	,	Talo A ature of officer or trus	e Bull	ے. ر غ Date	3 , 18 PR Title	ESIDEN	T		with the pre	discuss this parer shown lons. TYe	below?
Paid		Print/Type preparer		Prepared signatu	· Mu		Date 05 /1 4 /2	Chec	k 🔀 If		40
Prep Use		CHUN YEUNG	CHUN K. YEUN	G, CPA	<u> </u>		05/14/2		► 54-195		<u> </u>
		Firm's address ▶	1561 WESTMOR		T VA	22101	L-4443	Phone no.	(703) 79	0-0468 m 990-P	
BAA			LICTIE:WIA		VA	22101	-4443		r-on	22 0-1	(2017)

THE SHAHID JAVED & JAHANARA BURKI FAMILY FOUNDATION, INC.

Form 990-PF: Return of Private Foundation

Continuation Statement Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

other allowances Expense account, employee benefit plans and deferred Contributions to compensation 。 Compensation hours per week devoted to position Title, and average DIRECTOR 1.00 DIRECTOR 1.00 Name and address 11112 STACKHOUSE COURT 9 SPRINKLEWOOD COURT SHAHID JAVED BURKI POTOMAC, MD 20854 POTOMAC, MD 20854 EMAAD BURKI

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THE SHAHID JAVED & JAHANARA BURKI FAMILY FOUNDATION, INC.

Continuation Statement Form 990-PF: Return of Private Foundation Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

Name and address	Title, and average hours per week devoted to position	Compensation	Contributions to employee benefit plans and deferred compensation	Expense account, other allowances
SHAHID JAVED BURKI	DIRECTOR	0	.0	0
11112 STACKHOUSE COURT	1.00			
POTOMAC, MD 20854				
EMAAD BURKI	DIRECTOR	0	•0	0
9 SPRINKLEWOOD COURT	1.00			
POTOMAC, MD 20854				
		.0	0.	0

Legal and Professional Fees

2017

Name
THE SHAHID JAVED & JAHANARA BURKI FAMILY FOUNDATION, INC. 52-2377368

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
.,,, 	_				
					-
otal to Form 99	D-PF, Part I, Line 16a				

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	-				
otal to Form 990	-PF, Part I, Line 16b				

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Pald Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CAYMOND JAMES	INVESTMENT ADV	4,226.			
					-
					-
otal to Form 990	PF, Part I, Line 16c	4,226.			

karme HE SHAHID JAVED & JAHAI		oyer Identification No.			
Line 10a - Investments - US and State Government Obligations:	and State Government Obligations Obligations			f Year US Government Obligations FMV	
Tot to Fm 990-PF, Pt II, Ln 10a					
Line 10b - Investm	ents - Corporate	Stock:	End Book Value	of Year Fair Market Value	
NETSOL TECHNOLOGIES INC MUTUAL FUNDS	C		138,916 265,080		
Totals to Form 990-PF, Part II, I	Line 10b	• • • • • • • • • • • • • • • • • • • •	403,996	405,368.	
Line 10c - Investme	ents - Corporate	Bonds:	End Book Value	of Year Fair Market Value	
Totals to Form 990-PF, Part II, I	Line 10c				
Line 12 - investme	ents - Mortgage I	oans:	End Book Value	of Year Fair Market Value	
Totals to Form 990-PF, Part II, I	Line 12				
Line 13 - inve	estments - Other	:	End Book Value	of Year Fair Market Value	
Totals to Form 990-PF, Part II, I	Line 13				