Form, 990-PF

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.

BURKE FAMILY FOUNDATION Successful and service for Description and an ordination of address fits services (Control and Expenses) 1 W	1	For o	alen	dar year 2018 or tax year beginning			, and ending		
Temporal content Temporal co	Name of foundation A Employer identification number								
1. W. 64/TH STRRET 11A 212-664-7000 0 1 1 1 1 1 1 1 1		В	UR.	KE FAMILY FOUNDAT:	ION		The Administration of the Personal States are noticed under	25-6699573	and the second s
City or town, state or province, country, and 2/10 or foreign postal code NEW YORK, NY 1 0.0.23 6. Check all that apply: Initial return					vered to street a	address)	Room/suite		•
NEW YORK, NY 1023 6 Check all that apply:	-						11A	212-664-70	00
India return Indi					P or foreign p	ostal code	,	C If exemption application is pe	anding, check here
Final return Amended return Amende	-					Initial return of a f	ormer public charity	D 1 Foreign organizations	chack bara
Address cleange	,	a c	HEUK	=======================================		·	officer public charity	i. Foreign organizations	, check here
H Check type of organization: Section 4947(a)(1) innexempt charactable must Other transfer or must formulation Farl market value of all assess at end of year 1 Accounting method. Section 507(b)(1)(b), check here If the foundation is a size of the following of the						:		Foreign organizations me check here and attach cor	eting the 85% test,
Section 4947(a)11 nonexempt charatable ruse Other taxable private foundation Oth	ī	1 0	heck	type of organization: X Section	n 501(c)(3) ex		CI)	1	
Trimm Part II, cot. (c), line 16) \$393, 674. [Part I, column (d) must be on cash basis.] Part II] Analysis of Revenue and Expenses Interest of Analysis of Re	-						ation 0 V		
Part	1			•	I —	- —	Accrual		[_
Parti: Analysis of Revenue and Expenses (a) Revenue and expenses (b) Adjusted net (c) Adjusted net (d) Devolutions (to) to the did of mounts on column (b) (c) (column (b))		-					ic)	under section 507(b)(1)	(B), check here
The total of amounts in columns (b), (d), and (d) may not indications. 1 Contributions, grits, grants, etc., received 752, 500. 2 Check	Γ		<u> </u>	-	[(1 4111, 00101	T -	T .	(a) Adjusted not	(d) Disbursements
2 Check Section Interestinate on dispursery to stack Sch 8 Section S	Ľ			(The total of amounts in columns (b), (c), and	i (d) may not)				for charitable purposes
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b Net remail income or (loss) 6a Not gain or locks of the assets and deside not on line 10 6b Not greated (loss) 6a Not gain or locks after sease of all 6a Capital gain not income (of mer Part IV, line 2) 8 Net Short-term capital gain 9 Income modifications 9 Income modifications 10a mod allowinesse 10 Less Cost of goods sold c Gross print or (loss) 11 Other inperior 12 Total. Add lines Pure (loss) 13 Companior of the companior of			4			34,332.	31,503.		STATEMENTS
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b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A					ements	<1,229,664.>			
							31,503.		
	_		C					N/A	- 000 05

BURKE FAMILY FOUNDATION

2-story brick wa		of property sold (for exa common stock, 200 sh		te,	(0) 1	low acc - Purch - Donat	ase ion	c) Date acc (mo., day,	quired yr.)	(d) Date sold (mo., day, yr.)
la					_			_		
b NO	NE				 				<u></u>	
<u>C</u>					├		_			 -
<u>d</u> e					 					
(e) Gross sales price		preciation allowed or allowable)		st or other basis expense of sale			((h) Gain (e) plus (f	or (loss)) minus (g))
<u>a</u>	<u> </u>		ļ		_					
<u>b</u>	ļ <u>.</u>		ļ							
<u> </u>			 		-					
d e	···		<u> </u>							
Complete only for assets showing	l na asın ın col	jumn (h) and owned by	the foundation	on 12/31/69.			m e	Gains (Col.	(h) naın ı	minus
		Adjusted basis		cess of col. (i)	\neg		col. (I	k), but not	less than	-0-) or
(i) FMV as of 12/31/69		s of 12/31/69		col. (j), if any			١	Losses (fro	om col. (h))
a			1							
b										
C										
d										<u>.</u>
e	<u> </u>		ļ.,	<u></u>						
		∫ If gain, also ente	r in Part I, line	7	ĴΙ					
Capital gain net income or (net ca	ipital loss)	f (loss), enter -0)- ın Part I, line	7	<i>기</i>	2				
Net short-term capital gain or (los	•	d in sections 1222(5) ar	nd (6):		٦١					
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8					- }	,				
Part Val Qualification U	nder Sec	tion 4940(e) for	Reduced	Tax on Net	Inve	stme	nt Incon	ne		
section 4940(d)(2) applies, leave th as the foundation liable for the sec 'Yes," the foundation doesn't qualif	tion 4942 tax fy under secti	on the distributable amon 4940(e). Do not con	nplete this part.	•						Yes X N
Enter the appropriate amount in	each column	for each year; see the i	nstructions bef	ore making any en	ntries.					(4)
(a) Base period years Calendar year (or tax year beginni	ng in)	(b) Adjusted qualifying dis		Net value of no				(co	Distribi I. (b) divi	(d) ition ratio ded by col. (c))
2017			2,448.		2,		<u>,567.</u>		_	1.05840
2016	-+		5,094.	 -			,081.			1.59311
2015			0,736.			427	,834.			3.19864 1.80423
0044		4.10								1.00423
2014	1					541	,337.			
2014 2013			0,657.			541				
2013						541	,337.	2		2.21613
2013 Total of line 1, column (d)	5-year base p	1,84	0,657.), or by the numbe	1,	541 830	,337.	2		2.21613
2013 Total of line 1, column (d)		1,84	0,657.), or by the numbe	1,	541 830	,337.	2 3		2.21613 9.87052
2013 Total of line 1, column (d) Average distribution ratio for the		1,84	0,657.), or by the numbe	1,	541 830	,337.			2.21613 9.87052
2013 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existent	nce if less tha	1,84 period - divide the total o an 5 years	0 , 657 . on line 2 by 5.0), or by the numbe	1,	541 830	,337.			2.21613 9.87052 1.97410
2013 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existent	nce if less tha	1,84 period - divide the total o an 5 years	0 , 657 . on line 2 by 5.0), or by the numbe	1,	541 830	,337.	3		2.21613 9.87052 1.97410
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2013 Total of line 1, column (d) Average distribution ratio for the the foundation has been in exister. Enter the net value of noncharitab Multiply line 4 by line 3	nce if less tha	1,84 period - divide the total of an 5 years s for 2018 from Part X,	0 , 657 . on line 2 by 5.0), or by the numbe	1,	541 830	,337.	3 4 5		2.21613 9.87052 1.97410 .,502,857
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<u>Form</u>	990-PF (2018) BURKE FAMILY FOUNDATION					66995			ge 4
	TOWN Excise Tax Based on Investment Income (Section 494	0(a), 49	940(b), 4940(e), o	r 49	48 -	see inst	ructi	ions)	
` 1a	Exempt operating foundations described in section 4940(d)(2), check here and	enter "N/A	" on line 1.				36,000	2	M
	Date of ruling or determination letter: (attach copy of letter if ne	cessary-	see instructions)		14 (15 %)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			L	1			63	0.
	of Part I, line 27b								23 -
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4	% of Part	l, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; or	thers, ent	er -0-)	Į	2				0.
3	Add lines 1 and 2				3			63	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	thers, en	ter -0-)	[4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			[5			63	0.
6	Credits/Payments:				344		N. W		Zą –
а	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	1,04	0.					
b	Exempt foreign organizations - tax withheld at source	6b		0.				ζ, « <mark>ζζ</mark> ές»	
C	Tax paid with application for extension of time to file (Form 8868)	6с		0.					334
đ	Backup withholding erroneously withheld	6d		0.			SA.		
	Total credits and payments. Add lines 6a through 6d				7		1	,04	0.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is att	ached		Ī	8				0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			▶ [9				
10	Overpayment, if line 7 is more than the total of lines 5 and 8, enter the amount overpaid			▶ [10			41	0.
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax		410 . Refunded	▶	11				0.
Pa	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state, or local legi-	slation or	did it participate or inter	vene i	n	2	₹. Y	'es N	No
	any political campaign?						1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses? See	the instructions for the	definit	ion	Γ.	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies					14	1 "	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	* 3
	distributed by the foundation in connection with the activities.	•	•			ļ. <u>.</u>	3		
C	Did the foundation file Form 1120-POL for this year?					[7	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during thi	e year:				\$3	:::33 ×3	(4) (4) (4) (4) (4) (4) (4) (4) (4) (4)	SÀ
	(1) On the foundation. > \$ 0 . (2) On foundation manager	s. > \$		0.		Į.	A 3		%, 4
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend	iture tax i	mposed on foundation			•,^`	` .5.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	managers. ▶ \$ 0 .					شا	. **	14 - 12 14 - 14	
2	Has the foundation engaged in any activities that have not previously been reported to the I	RS?					2		X
	If "Yes," attach a detailed description of the activities.					75.	200 E	X 88	
3	Has the foundation made any changes; not previously reported to the IRS, in its governing	ınstrumei	nt, articles of incorporation	on, or		3			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes						3		X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ις				_4	ła		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?				N	/A [4	₽b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	>					5		X
	If "Yes," attach the statement required by General Instruction T					1			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither:							
	By language in the governing instrument, or						ŽĦ		
	By state legislation that effectively amends the governing instrument so that no mandator	y directio	ns that conflict with the	state l	aw		َ ساسفُ		
	remain in the governing instrument?						6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	olete Part	II, col. (c), and Part XV				7 .	X	
	,					Š	100 Sept.		
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ons. 🕨					<u> </u>		
	PA								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney G	ieneral (or designate)			7.50	ر د دد است		
-	of each state as required by General Instruction G? If "No," attach explanation	•				1 8	3b 3	X	an
9	Is the foundation claiming status as a private operating foundation within the meaning of se	ction 494	12(j)(3) or 4942(j)(5) for	calen	dar	*			S
-	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," con					1424	9		X (
						<u></u>			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a sched					1	10	\Box :	X

Form 990-PF (2018) 25-6699573 BURKE FAMILY FOUNDATION Page 5 Part:VII-A; Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions X 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 212-664-7000 14 The books are in care of ▶ BURKE FAMILY FOUNDATION Telephone no. **▶**10023 Located at ▶ 1 W. 64TH STREET, APT 11A, NEW YORK, 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A and enter the amount of tax-exempt interest received or accrued during the year Yes No 16 At any time during calendar year 2018, 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? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VIIBB Statements Regarding Activities for Which Form 4720 May Be Required Yes File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly); Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) res X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A 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 c 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 2018? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning Yes X No before 2018? If "Yes," list the years 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 all years listed, answer "No" and attach N/A statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose

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36

4a

N/A

of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

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

Form 4720, to determine if the foundation had excess business holdings in 2018.)

had not been removed from jeopardy before the first day of the tax year beginning in 2018?

Rart VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equirea _{(contin}	ued)	
5a During the year, did the foundation pay or incur any amount to:			8	Yes No
` (1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗶 No 💈	
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire		^	
any voter registration drive?			es 🔀 No 🧵	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es. 🗓 . No 🎉	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? See instructions		Y	es 🗶 No 🗔	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			
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 und		n Regulations	27/2	النشة أتأثث حي
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance, check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			🗀 🎉	
expenditure responsibility for the grant?	14	/A Y	es 🔛 No 🏻	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to paragraph benefit contract?	Jay premiums on	[] v	es 🗶 No	
a personal benefit contract?b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	erconal henefit contract?		S A NU	6b X
If "Yes" to 6b, file Form 8870.	ersonar benefit contract?		<u> </u>	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No [
b If "Yes," did the foundation receive any proceeds or have any net income attribu			/-	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$				
excess parachute payment(s) during the year?	, , , , , , , , , , , , , , , , , , , ,	Ye	es X No	s 1931 . 1
Part VIII Information About Officers, Directors, Truste	es, Foundation Man	agers, Highly		
Paid Employees, and Contractors				
1 List all officers, directors, trustees, and foundation managers and the	····		(4) 0	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
<u> </u>	to position	`enter'-0-)'	compensation	allowances
	TRUSTEE			-
1 W. 64TH STREET, APT. 11A	2.00	_	_	
NEW YORK, NY 10023 GRETCHEN H. BURKE	TRUSTEE	0.	0.	0.
1 W. 64TH STREET, APT. 11A	IKOJIEB			
NEW YORK, NY 10023	2.00	0.	0.	0.
HEW TORK, NI 10025	2.00	· ·		
			•	
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(d) Contribution	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(0) 00	compensation	allowances
NONE				
<u> </u>				
Total number of other employees paid over \$50,000			•	0
			Form	990-PF (2018)

F	art X Minimum Investment Return (All domestic foundations mu	ust complete this part. Foreign four	idations, s	ee instructions)
1	Fair 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	1,403,068.
b	Average of monthly cash balances		1b	122,675.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	1,525,743.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
		1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	-	2	0.
3	Subtract line 2 from line 1d		3	1,525,743.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, si	ee instructions)	4	22,886.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on F	Part V, line 4	5	1,502,857.
6	Minimum investment return. Enter 5% of line 5		6	75,143.
[P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations, check here and do not complete this part.)	(j)(5) private operating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	75,143.
2a	Tax on investment income for 2018 from Part VI, line 5	2a 630.		
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b		
C	Add lines 2a and 2b		2c	630.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	74,513.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	74,513.
6	Deduction from distributable amount (see instructions)		6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XI	III, line 1	7	74,513.
P 1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	coc.		
·a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	363.	 1a	2,010,904.
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 nurnoses	2	
3	Amounts set aside for specific charitable projects that satisfy the:	, 5.5., parposos		
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	2,010,904.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investing	'		
	income. Enter 1% of Part I, line 27b	•	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	ľ	6	2,010,904.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years whe 4940(e) reduction of tax in those years.	en calculating whether the foundation qu	ualifies for t	

Part XIII Undistributed Income (see instructions)

BURKE FAMILY FOUNDATION

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,		······································		74 512
line 7				74,513.
2 Undistributed income, if any, as of the end of 2018			0.	ĺ
a Enter amount for 2017 only			<u> </u>	<u> </u>
ь Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:		U •		
		1.1	1 11	
a From 2013 1,799,128. b From 2014 2,736,932.				
c From 2015 4,492,510.				
d From 2016 775, 225.				
e From 2017 2,898,477.	}			
f Total of lines 3a through e	12,702,272.			
4 Qualifying distributions for 2018 from		 		<u> </u>
Part XII, line 4. ►\$ 2,010,904.				
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior		-		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		<u> </u>		
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				74,513.
e Remaining amount distributed out of corpus	1,936,391.			
5 Excess distributions carryover applied to 2018	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f 4c, and 4e Subtract line 5	14,638,663.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line]		_	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				•
be distributed in 2019				0.
7 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.			
8 Excess distributions carryover from 2013	1 700 100			
not applied on line 5 or line 7	1,799,128.			
9 Excess distributions carryover to 2019.	12 920 525	п пития		
Subtract lines 7 and 8 from line 6a	12,839,535.			
10 Analysis of line 9.				
a Excess from 2014 b Excess from 2015 2,736,932. 4,492,510.	a caraci	1 71 4 1	POTATIONET POTATION CONTINUES	ւ անդնու
0.000 488				
4 006 004				
e Excess from 2018 1,936,391.				5 000 DE (0040)

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, are xee				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment	·	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Paid during the year				
SEE ATTACHED STATEMENT	NONE	501(C)(3)	TO HELP FUND THE	
SEE RIIACHED SIRIEMENI	NONE	501(6)(3)	OPERATING BUDGETS OF	
			THE VARIOUS 501 (C)(3)	
			CHARITABLE	
			ORGANIZATIONS	2,010,904.
				•
			ļ	
		1		
Total		<u> </u>	► 3a	2,010,904.
b Approved for future payment		T		
- Approved for fature payment				
NONE				
	}			
		ļ		
			•	
			1	
			1	
·			-	
	<u></u>		<u> </u>	
Total			▶ 3b	0.

Part XVI-A	Analysis	of Income-Producing	Activities

nter gross amounts unless otherwise indicated.	Unrelated business income			by section 512, 513, or 514	(e)	
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt	
Program service revenue;	code	Amount	sion	Amount	function income	
a						
b						
с						
d				· · · · ·	_	
e						
f					-	
g Fees and contracts from government agencies						
Membership dues and assessments						
Interest on savings and temporary cash		<u></u>		T	•	
investments						
Dividends and interest from securities			14	32,332.		
Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
Net rental income or (loss) from personal						
property						
Other investment income						
Gain or (loss) from sales of assets other						
than inventory						
Net income or (loss) from special events						
Gross profit or (loss) from sales of inventory						
Other revenue:						
a						
b						
c						
d′						
e						
Subtotal. Add columns (b), (d), and (e)		().	32,332.		
Total. Add line 12, columns (b), (d), and (e)				13	32,332	
ee worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities	to the Accom	olishment of E	Exempt Pu	rposes		
ine No. Explain below how each activity for which inci						

▼	the foundation's exempt purposes (other than by providing funds for such purposes).	_
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21 12-11-	-18 Form 990-P	F

Part XVII			rAMILI FO			nd Relation	shine With Nonchari		Pa	ige 13
1 Did the organization directly or indirectly angigen asky of the offlowing with any other organization described in section 501(c) organizations) or in section 527; relating to political organizations? 1 Transfers from the rejourning foundation to a montharitable exempt organization of: (1) Cash (2) Other series 1 Didn't rensections: (1) Sales of assets to a montharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Perchases of assets from a noncharitable exempt organization (4) Reimbursement arrangements (4) Reimbursement arrangements (5) Loans of loan guarantees (5) Loans of loan guarantees (6) Loans of loan guarantees (6) Loans of loan guarantees (7) Loans of loan guarantees (8) Loans of loan guarantees (9) Loans of loan guarantees (10) Loans of loan guarantees (10) Loans of loan guarantees (10) Loans only the reporting injuries, other assets, or paid employees (10) Loans of loans of loans guarantees (10) Loans of loans of loans guarantees (10) Loans of loans guarantees (10) Loa	(ait >		•	icis to ai	ilu Transactions ai	ia riciation	isinps with Nonchan	abic		
(other than section 501(c)(3) erganizations) or in section 527, relating to polinical organizations? 1 Transfers from the signuting foundation to a montharitable exempt organization of: 11) Cash 11(1) Cash	1 Did			of the followin	n with any other organizati	on described in s	section 501(c)	Т	Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of: 13										
(1) Sales of assets to a noncharitable exempt organization (2) Perchases of assets from a noncharitable exempt organization (3) Siteral of facilities, equipment, or other assets (4) Remotivement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundration (1) the fundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services given by the reporting foundation. If the foundation derectly or indirectly arrangement, show in column (g) the value of the goods, other assets, or services received. (a) Limitation (g) the value of the goods, other assets, or services received. (b) Amount movived (c) Name of noncharitable exempt organizations (d) Decemption of valuations, remandered, end sharing arrangement, show in section 501(c)(3)) or in section 521?2 3 Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c)(4) in this section 501(c)(3)) or in section 521?2 3 It 'Yes, complete the following schedules (a) Name of noncharitable exempt organization (b) Decemption of valuations, remandered, end sharing arrangement, show in section 501(c) (4) the than section 501(c)(3)) or in section 521?2 3 It 'Yes, complete the following schedules and statements, and to the board of my tronsfolge in a section 501(c) (4) the first and the section of proper (into the text) in the section of the section of proper (into the text) in the section of the board of my tronsfolge in the section of the section of proper										
(i) Other assets b Other transactores: (ii) Sales of assets to a noncharitable exempt organization (iii) III					, <u>.</u>			1a(1)		X
Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Remburgament arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (8) It is answer to any of the above is "key, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services precived. (8) Line rise (9) Amount involved (1) Name of organization (1) Description of relationships (1) Description of relationships (2) Name of organization (3) Type of organization (4) Description of relationships (5) Loans or loanships and complete the following schedule. (8) It is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described (9) Amount involved (1) Description of relationships (1) Description of relationships (1) Description of relationships (2) Description of relationships (3) It is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described (4) Description of relationships (5) Loans or loans guarantees (6) Description of relationships (7) Performance in the section of organization (8) Description of relationships (9) Description of relationships (9) Performance in the section of organization of propose (other the tax-payer) is beautiful and distincts. And is the based of my transletion of sectionships (9) Performance in the section of propose (other the tax-payer) is beautiful and distincts. And is the based of my transletion of proposed (other the tax-payer) is beautiful and distincts. And is the based of my transletion of proposed (other the tax-payer) is beautiful and distincts. And is the payer of t	, ,									
(1) Sales of assets to a noncharrhable exempt organization (2) Purchases of assets from a noncharrhable exempt organization (3) Rental of facilities, equipment, of other assets (4) Remburement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Sharing of facilities, equipment, minaling lests, other assets, or paid employes (8) If the answer to any of the above is "res," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services growing schedule. Column (b) should always show the fair market value of the goods, other assets, or services provided in section of the value of the goods, other assets, or services received. (6) Line rei (7) Amount involved (8) Line rei (9) Amount involved (9) Name of organization (9) Type of organization (9) Description of relationship N/A Sign involves the following schedule. (9) If Yes," complete the following schedule. (9) If Yes, "complete the following schedule. (1) If Yes, "complete the following schedule. (1) If Yes, "If Yes, "I										
(2) Perchases of assets from a noncharlable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Exemplained programments (8) Performance of services or membership or fundraising solicitations (8) Reimbursement or services or membership or fundraising solicitations (8) It the assets or services organize the following schedule. Column (9) should always show the fair market value of the goods, other assets, or services received. (8) Limit no (9) Amount involved (9) Amount involved (1) Name of inochharitable exempt organization (1) Description of relationship arrangements. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? No If Yes, complete the following schedule.			ble exempt organizati	on				1b(1)		X
(4) Reminusement arrangements (4) Reminusement arrangements (5) Leave to long pursames (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) Leave to long pursames (8) Performance of services or membership or fundraising solicitations (8) Leave to charge solicitations (9) Leave to charge solicitations (10) Leave to charge solicitations (10) Leave to any of the above is "Yes", complete the following schedule. Column (8) should always show the fair market value of the goods, other assets, or services received. (1) Leave no long the value of the goods, other assets, or services received. (1) Leave no long the value of the goods, other assets, or services received. (1) Leave no long the value of the goods, other assets, or services received. (2) Leave no long the value of the goods, other assets, or services received. (3) Leave no long the value of the goods, other assets, or services received. (4) Leave no long the value of the goods, other assets, or services received. (4) Leave no long the value of the goods, other assets, or services received. (4) Leave no long the value of the goods, other assets, or services received. (4) Leave no long the value of the goods, other assets, or services received. (4) Leave no long the value of the goods, other assets, or services received. (4) Leave no long the goods, other assets, or services received. (4) Leave no long the value of the goods, other assets, or services received. (4) Leave no long the value of the goods, other assets, or services received. (5) Leave no long the value of the goods, other assets, or services received. (6) Leave no long the value of the goods, other assets, or services received. (6) Leave no long the value of the goods, other assets, or services received. (6) Leave no long the value of the goods, other assets, or services received. (6) Leave no long the goods, other assets, or services received. (6) Leave no long the value of the goods of the goods of the										
(4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations 2 c Sharming of facilities, equipment, mailing lists, other assets, or paid employees 4 if the answer to any of the above is "Yes," complied the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Livie no (b) Amount involved (c) Name of noncharitable exempt organization (d) cascription of value with a service and a sharing arrangements. Ni/A 2a is the foundation directly or indirectly difficiated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? 3. If Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A (a) Name of organization (c) Type of organization (c) Description of relationship N/A (b) Type of organization (c) Description of relationship N/A (c) Description of relationship N/A Sign and based, it is purply short, and complete Declaration of progene (which this hoppying is based on all infiguration of which program has any knowledge for the position of the form the first discuss the relation short of the position of progene (which this hoppying is based on all infiguration of which program has any knowledge for the position of the	• •									
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In section 501(c) (other than section 501(c)(3)) or in section 527? Yes				N/A						
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In section 501(c) (other than section 501(c)(3)) or in section 527? Yes			l	-1-4-44-						
Sign Under penalties of permy, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is busy for jet, and complete Declaration of preparer (other than taxpsyer) is based on all information of which preparer shown below? See instruction with the preparer shown below? See instruction of preparer is name. Preparer's signature Date Title		•	•	· ·	or more tax-exempt organ	izations describe	10 	¬ _v	T	7
(a) Name of organization N/A N/A N/A		, , ,		tion 52/7			L.	Yes	LA] NO
N/A Sign Here Under penalties of person, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is truer formed, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge setum with the preparer setum below? See instruction of filter or trustee Signature of officer or trustee Date Title	<u> </u>				(h) Type of organization		(c) Description of relations	hin		
Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is busy for oct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below? See instruction of officer or trustee Print/Type preparer's name			Janization		(b) Type of organization		(c) Description of relations	шр		
Sign Here Signature of officer or trustee Date Title		N/A								
Sign Here Signature of officer or trustee Date Title			_			†				
Sign Here Signature of officer or trustee Date Title										
Sign Here Signature of officer or trustee Date Title										
Sign and belief, it is busy-portect, and complete Declaration of preparer (other than taxpayer) is based on all information or which preparer as any knowledge Signature of officer or trustee		Under penalties of perjury, I declare t	that I have examined this r	eturn, including	accompanying schedules and s	tatements, and to th	ne best of my knowledge	45 - IDC		
Here Signature of officer or trustee Print/Type preparer's name Preparer's afgnature Date Title Print/Type preparer's name Preparer's afgnature Date Check if self- employed PO 08 50 5 2 7 Preparer's name Prim's name ► MAZARS USA LZP Firm's name ► MAZARS USA LZP Firm's address ► 135 WEST 50TH STREET	Sian						rer has any knowledge reto	irn with th	e prepare	er e
Signature of officer or trustee Date Title		MA			13/4/19	TRUS				~ I
Paid Preparer Use Only Print/Type preparer's name Preparer's name Preparer'		Signature of officer or trustee	<u> </u>		7 Date					
Paid Preparer Use Only Discription Property Prim's name Paid				Preparer's	anature		Check If PTIN			
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Preparer Use Only Firm's name ► MAZARS USA LZP Firm's EIN ► 13-1459550 Firm's address ► 135 WEST 50TH STREET	Paid	JONAH GRIID	a	Lens X	dech.	2.19.19	· ·	0850	527	
Use Only Firm's address ▶ 135 WEST 50TH STREET				ZP X	TIMANA	141				
Firm's address ▶ 135 WEST 50TH STREET	•									
			5 WEST 50	TH STR	EET					
							Phone no. (212)	812	-70	00

Phone no. (212) 812-7000 Form **990-PF** (2018)

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

2018

Employer identification number Name of the organization BURKE FAMILY FOUNDATION 25-6699573 Organization type (check one) Filers of: Section: Form 990 or 990-EZ ____ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private 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 instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors **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 regulations under 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 that received from 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, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), 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 contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

BURKE	FAMILY FOUNDATION		25-6699573
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
1	STEPHEN B & GRETCHEN H BURKE 41 CENTRAL PARK WEST, APT. 11A NEW YORK, NY 10023	\$ 752,50	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
	<u> </u>	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

FAMILY FOUNDATION		25-66995/3		
Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(b) Description of noncash property given -	(c) FMV (or estimate) (See instructions)	(d) Date received		
	\$			
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
	\$			
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
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(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
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(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
	\$			
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
	\$			
	Noncash Property (see instructions) Use duplicate copies of Part II if a (b) Description of noncash property given (b) Description of noncash property given	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given (c) FMV (or estimate) (See instructions) (See instructions) (b) Description of noncash property given (c) FMV (or estimate) (See instructions) (See instructions) (b) Description of noncash property given (c) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions) (d) FMV (or estimate) (See instructions) (e) FMV (or estimate) (See instructions) (f) FMV (or estimate) (See instructions) (g) FMV (or estimate) (See instructions) (h) Description of noncash property given (c) FMV (or estimate) (See instructions) (c) FMV (or estimate) (See instructions)		

823454 11-08-18

FORM 990-PF D	IVIDENDS	AND INTER	EST	FROM SECUR	ITIES S'	PATEMENT 1
	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
JPMORGAN	32,332.		0.	32,332.	31,503.	
TO PART I, LINE 4	32,332.		0.	32,332.	31,503.	
FORM 990-PF		TAX	ES		S	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) F INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PRIOR YEAR EXCISE TAX		2,079.		0.		0.
TO FORM 990-PF, PG 1,	LN 18	2,079.		0.		0.
FORM 990-PF		OTHER E	XPEI	ISES	Sī	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NE?	(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
NONDEDUCTIBLE CHARITAB CONTRIBUTIONS	LE	1,513.		0.		0.
TO FORM 990-PF, PG 1,	LN 23	1,513.		0.		0.

FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 4
DESCRIPTION	AMOUNT
UNREALIZED APPRECIATION OF DONATED SECURITIES	93,886.
TOTAL TO FORM 990-PF, PART III, LINE 3	93,886.

Dolling Trailed Tooling		
FORM 990-PF	CORPORATE STOCK	STATEMENT 5
		FAIR MARKET

BOOK VALUE	FAIR MARKET VALUE	
383,850.	373,324.	
383,850.	373,324.	
	383,850.	

FORM 990-PF	PART XV - LINE 1A	STATEMENT 6
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

STEPHEN B. BURKE GRETCHEN H. BURKE