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

	Fort	alen	dar year 2019 or tax year	beginning				, a	nd end	ling		
•	Nar	ne of	foundation								A Employer identification	number
	В	URI	KE FAMILY FO	UNDATION							25-6699573	·
			nd street (or P.O. box number if i		addres	s)			1	ediue/moo	B Telephone number	
			. 64TH STREE				-		<u> </u>	1 <u>A</u>	212-664-70	00/
			own, state or province, cou	untry, and ZIP or foreign	postal	cod	e 				C If exemption application is p	anding check here
	G C	heck	all that apply	Initia l ret urn			Initial return of a f	ormer pu	blic ch	anty	D 1 Foreign organization	s, check here
				Final return	بِ	==	Amended return				2 Foreign organizations mi	eeting the 85% test
3				Address change		_	Name change				2 Foreign organizations me check here and attach co	imputation
3	<u>ዘ</u> [_		X Section 501(c)(3)	_					04	E if private foundation sta	
+	L		ction 4947(a)(1) nonexemp arket value of all assets at e				cable private founda		Accrua	<u>.</u>	under section 507(b)(1	
•			Part II, col. (c), line 16)	·	Othe r (ACCI DO	gi.	F If the foundation is in a under section 507(b)(1	
	\.			., 466 . (Part I, col				rs)	_		diabi socion con (c)(Kolt and an india
		rt I	Analysis of Revenue and		\top	(a)	Revenue and	(b) h	let inve	estment	(c) Adjusted net	(d) Disbursements
			(The total of amounts in colun necessarily equal the amount	nns(b) (c) and (d) may not ls in column (a))	Щ.	expe	enses per books		Incon		income	for charitable purposes (cash basis only)
		1	Contributions, gifts, grant				427,980.			<u> </u>	N/A	
	1	2	Check if the foundation interest on savings and temporary	n is not required to attach Sch. B	\vdash							
		3	cash investments		-		4,844.			,386.		STATEMENT 1
		4	Dividends and interest fro	om securines	-		4,044.			, 300.		STATEMENT I
3			Gross rents Net rental moome or (loss)		-						 	
7.		_	Net gain or (loss) from sale of a	assets not on line 10	+	_	2.					†
AUG 3 1 202 0	Ĕ		Gross sales price for all assets on line 6a	2.		Г	DECEN	(F-D	==)		
9	Revenue	7	Capital gain net income (from f	Part IV line 2)			NECE	/ED		2.		
⋖.	č	8	Net short-term capital gai	ın	<u> </u>	چا			S			
=		9	Income modifications Gross sales less returns	1		18	MAY & 9	2020	0			<u> </u>
		10a	and allowances		-	Н			꼾			
\$ CP			Less Cost of goods sold	L	-}		OGDEN	, UT			 	
蠶		l	Gross profit or (loss) Other income		\vdash	=			===	<u> </u>		
Description open		11 12	Total Add lines 1 throug	h 11			432,826.		4	,388.		
75	; —	13	Compensation of officers dire		1	_	0.			0.		0.
		14	Other employee salaries a									
		15	Pension plans, employee	-								
	Š	16a	Legal fees									
	Expense	b	Accounting fees		<u> </u>			<u> </u>			<u></u>	
	Exc		Other professional fees					}				
	<u>\$</u>	17	Interest	amum o	-		230.	 -		0.		
2070	Administrative	18	Taxes	STMT 2			230.	 			 	
	Sid	19 20	Depreciation and depletio)(1				}			 	
ා		21	Occupancy Travel, conferences, and t	20nitaam	\ <u> </u>			 				
, <u></u>	and 4	22	Printing and publications									
NO.	ē	23	Other expenses	STMT 3			1,719.			0.		0.
_	Onerating	24	Total operating and adm	iinistrative					_			T
닙	ē		expenses Add lines 13 t	through 23	L		1,949.	<u> </u>		0.		0.
Z		25	Contributions, gifts, grant	ts paid	<u> </u>		890,103.	<u> </u>			\ <u> </u>	890,103.
Z	; -	26	Total expenses and disb	ursements			000 050					000 103
SCANNED	<u>}</u>	-	Add lines 24 and 25	- 10	+		892,052.	 		0.		890,103.
ŭ.	•	l	Subtract line 26 from line			1	159,226.>					
			t Excess of revenue over expen- Net investment income (- ·		 		1,388.	 	+
		1	: Adjusted net income (# o							<u>-, </u>	N/A	
				work Reduction Act No	hee e		etructions				c 70	Form 990-PF (2019)

P	Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-warr amounts only		Beginning of year	End	of year
<u>:</u>	uit	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing			
	2	Savings and temporary cash investments	20,350.	14,466.	14,466.
	3	Accounts receivable -			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts			
•		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
sts		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges	·		
⋖		Investments - U.S. and state government obligations			
		Investments - corporate stock	383,850.	0.	0.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis		· · · · · · · · · · · · · · · · · · ·	
		Less accumulated depreciation			
		Investments - mortgage loans	-		
	13	Investments - other	-		
	14	Land, buildings, and equipment: basis			
	45	Less accumulated depreciation		 	
		Other assets (describe)	· · · · · · · · · · · · · · · · · · ·	 -	
	16	Total assets (to be completed by all filers - see the	404 200	14 466	14 466
	17	Instructions. Also, see page 1, item I)	404,200.	14,466.	14,466.
		Accounts payable and accrued expenses			
	19	Grants payable Deferred revenue			
Liabilities					
ΞĘ	21	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			
Ŀ		Other liabilities (describe)			<u> </u>
				·	
	23	Total liabilities (add lines 17 through 22)	0.	0.	1
		Foundations that follow FASB ASC 958, check here	.,.		<u></u>
ű		and complete lines 24, 25, 29, and 30.			
ĕ	24	Net assets without donor restrictions			
alar	25	Net assets with donor restrictions			
B		Foundations that do not follow FASB ASC 958, check here ▶ 🗶			
Net Assets or Fund Balance		and complete lines 26 through 30.			
히	26	Capital stock, trust principal, or current funds	0.	0.]
sts	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SS	28	Retained earnings, accumulated income, endowment, or other funds	404,200.	14,466.	
7	29	Total net assets or fund balances	404,200.	14,466.	
Ž					
	30	Total liabilities and net assets/fund balances	404,200.	14,466.	
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
	T - 4 - 1				
		net assets or fund balances at beginning of year - Part II, column (a), line	29		404 000
		t agree with end-of-year figure reported on prior year's return)		1	404,200.
		amount from Part I, line 27a	CER CE	A DEMENTER 4	<459,226.>
		Increases not included in line 2 (itemize)	SEE STA	ATEMENT 4 3	69,492.
		ines 1, 2, and 3		4	14,466.
		passes not included in line 2 (itemize)	lump (h) lung 20		14,466.
<u>. </u>	VIAI	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numii (D), iiile 29		Form 990-PF (2019)

	Part IV. Capital Gains	and Lo	sses for Tax on In	vestment	Income						
•	(a) List and describe 2-story brick wa	the kind(s irehouse;	s) of property sold (for exar or common stock, 200 shs	nple, real esta . MLC Co.)	ite,	(b)	How ac - Purc - Don	cquired hase ation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
<u>1</u> a	CAPITAL GAINS I	IIVI	DENDS								
_ <u>b</u>	<u> </u>					<u> </u>					
	<u> </u>					-					
_6	<u> </u>				-	├					
5		(f)	Depreciation allowed	(n) Co	st or other basis	┶┪			(h) G	iain or (loss)
	(e) Gross sales price		(or allowable)		expense of sale					s (f) minus	
a	2.										2.
		_		ļ							
_											
_0		_									
_e	Complete only for assets showin	o gain in	column (h) and owned by t	he foundation	on 12/31/69.				N Gains ((Col. (h) gaın	minus
_			(j) Adjusted basis		cess of col. (i)				l. (k), but i	not less tha	n -0-) or
_	(i) FMV as of 12/31/69		as of 12/31/69		col. (j), if any				Losses	(from col. (<u> </u>
_a	1						_				2.
_ <u>b</u>											
_											
_ <u>d</u>						_					
_	·		∫ If gain, also enter	ın Part I line	7	7					
2	Capital gain net income or (net ca	pital loss)				 	2				2.
3	Net short-term capital gain or (los	s) as defi									
	If gain, also enter in Part I, line 8,			,		}				/-	
	If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder S	ection 4940(e) for	Reduced	Tay on Net	Inve	3 estm	ent Inco	nme	N/A	
_	or optional use by domestic private						_				
				o lo(u) tax on	not investment in	001110	•,				
If s	section 4940(d)(2) applies, leave th	us part bla	ank.								
	as the foundation liable for the sect				•	ıod?					Yes X No
_	Yes," the foundation doesn't qualify										
	Enter the appropriate amount in e	ach colur		structions ber	ore making any er		_				(d)
	Base periód years Calendar year (or tax year beginnir	na in)	(b) Adjusted qualifying dist	ributions	Net value of no	(c) nchar		use assets		Distrit	(d) pution ratio rided by col. (c))
_	2018	·9 ···/	2,01	0,904.		1	,50	2,857		(0011 (0) 011	1.338054
_	2017		3,04	2,448.			,87	4,567	•		1.058402
_	2016			5,094.				9,081			1.593116
_	2015			0,736.				5,834			3.198644
_	2014		2,78	0,926.		<u></u>	, 54	1,337	+-	Γ''	1.804230
2	Total of line 1, column (d)								2		8.992446
	Average distribution ratio for the 5	5-vear bas	se period - divide the total o	on line 2 by 5.0	O, or by the numbe	er of v	ears		-		0.332110
	the foundation has been in exister				-,,				3		1.798489
4	Enter the net value of noncharitab	le-use ass	sets for 2019 from Part X, I	ine 5					4		<u> 188,966.</u>
											220 052
5	Multiply line 4 by line 3								_5_		339,853.
c	Enter 1% of net investment incom	o (1% of	Part I line 27h)						6		44.
U	FUEL 1/0 OF HER HIACSTHIGHT HICOHI	U (1 /0 UI	ι ωτι, 11116 <i>ΣΤΟ)</i>								
7	Add lines 5 and 6								7		339,897.
8	Enter qualifying distributions from	Part XII,	line 4						8	L	890,103.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, ch	neck the box in Part VI, line	1b, and comp	lete that part usin	g a 1º	% tax r	ate.			

923521 12-17-19

	m 990-PF (2019) BURKE FAMILY FOUNDATION 25-669	9573 Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	instructions)
` 1	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	
ı	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	44.
	of Part I, line 27b	
(c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0.
3	Add lines 1 and 2	44.
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-	44.
6	Credits/Payments:	1
	a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 640.	
t	b Exempt foreign organizations - tax withheld at source 6b 0.	
	c Tax paid with application for extension of time to file (Form 8868) 6c 0.	
	Backup withholding erroneously withheld 6d 0.	
_	Total credits and payments. Add lines 6a through 6d	640.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	596.
	Enter the amount of line 10 to be: Credited to 2020 estimated tax ► 596 Refunded ► 11	0.
		Yes No
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	
	any political campaign?	1a X
u	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1b X
	distributed by the foundation in connection with the activities.	
c	Did the foundation file Form 1120-POL for this year?	1c X
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	10
	(1) On the foundation. \$\bigs\tau_{\text{on pointed exponential by (section 4505) imposed during this year.}}\$	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	
	managers. > \$ 0.	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
	If "Yes," attach a detailed description of the activities.	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b	olf "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?	5 X
	If "Yes," attach the statement required by General Instruction T.	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	
	By language in the governing instrument, or]
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	
_	remain in the governing instrument?	6 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 X
٥.	Fator the states to usball the foundation would be a supplied to the state of the s	
Вa	Enter the states to which the foundation reports or with which it is registered. See instructions.	
L	If the appropriate line 7, has the foundation furnished a copy of Form 000 DE to the Attender Copyril (or do year)	
Đ	of each state as required by Connect to severate and Op. If "No." attach exploration.	8b X
9	of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	8b X
3	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	
10	bit of the personal decernite adulting the land year. If "Yes," attach a schedule listing their names and addresses	10 X

	Part VII-A Statements Regarding Activities (continued)			
•			Yes	No
1	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	11	ļ	х
1	12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		Ì	
•	If "Yes," attach statement. See instructions	12		х
	13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
٠	Website address ► N/A	10	1	ш
1	14 The books are in care of ► BURKE FAMILY FOUNDATION Telephone no. ►212-	664-7	000	
•		10023		
4	15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	10023		$\overline{\Box}$
'	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	·Ш
4	16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,			No
'	securities, or other financial account in a foreign country?	16	1.03	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10		
			<u> </u> ' -	1
П	foreign country ► Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required		L	<u> </u>
Ŀ			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	1 62	140
	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?	0		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	.		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			l
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X N	0		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			i
	for the benefit or use of a disqualified person)?	0		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		1	
	if the 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.)	0		1 1
	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 N/A	<u> 1b</u>	ļ	<u> </u>
	Organizations relying on a current notice regarding disaster assistance, check here	_ _	ì	
	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	ļ		
	before the first day of the tax year beginning in 2019?	1c		X
	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 2019, did the foundation have any undistributed income (Part XIII, lines		ĺ '	
	6d and 6e) for tax year(s) beginning before 2019?	0		{
	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			1 1
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	· 10 · 0	1 Hz -1	81 mil - 8
	statement - see instructions.)	2b		L
	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		l	l t
	during the year?	o		ļ, <u> </u>
	b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after		Ì	
	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		٠.	,, , ,
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b		
	4a Old the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b 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 2019?	4b		X
		Form 99 0	0-PF	(2019)

Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)			
5a During the year, did the foundation pay or incur any amount to:					Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗓 No			1 1
· (2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire					
any voter registration drive?		_	es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	ľ		1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section					
4945(d)(4)(A)? See instructions		· · · · · · · · · · · · · · · · · · ·	es 🗓 No	i		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f					
the prevention of cruelty to children or animals?			es X No	\ \ \		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	·	in Regulations				
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b		<u> </u>
Organizations relying on a current notice regarding disaster assistance, check h						1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				-		
expenditure responsibility for the grant?	Ŋ	I/A Y	es L 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 p	pay premiums on					
a personal benefit contract?	_	Y	es 🗶 No 📙			لــــا
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	<u>6b</u>		X
If "Yes" to 6b, file Form 8870.		—	[37] a.			i I
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es X No			 '
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		, ,
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or		. [♥]	Ì		
excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Truste	oo Foundation Mor		es X No			<u> </u>
Paid Employees, and Contractors	es, roundation Mai	agers, riigiliy				
1 List all officers, directors, trustees, and foundation managers and the	eir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	al	allowa	nces
STEPHEN B. BURKE	TRUSTEE				•	
1 W. 64TH STREET, APT. 11A						
NEW YORK, NY 10023	2.00	0.	0.	<u> </u>		0.
	TRUSTEE		1			
1 W. 64TH STREET, APT. 11A						
NEW YORK, NY 10023	2.00	0.	0.	_		<u>0.</u>
		ļ		ļ		
		1		1		
2 Compensation of five highest-paid employees (other than those incl	uded on line 1) If none	enter "NONE "		1		
	(b) Title, and average		(d) Contributions to	T (e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	aè	e) Exp count, allowar	other
NONE	devoted to position	}	compensation	 	allowal	1003
210272				Ì		
		 		╁		
		ļ — — —		T^-		
		1				٠
		1				
		<u> </u>	<u> </u>	<u> </u>		
Total number of other employees paid over \$50,000		_ -		. 000	-DF	(2019)
			FORM	27.71		: /IIIUl

Form 990-PF (2019)

	Artix Minimum Investment Return (All domestic foundations	s must complete this par	t. Foreign four	ndations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charit	able, etc., purposes:	-		
	Average monthly fair market value of securities	, ,, ,		1a	138,663.
b	Average of monthly cash balances			1b	138,663. 53,181.
C	Fair market value of all other assets			1c	
ď	Total (add lines 1a, b, and c)			1d	191,844.
0	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	191,844.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amou	int, see instructions)		4	2,878.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and	l on Part V, line 4		5	188,966.
6	Minimum investment return. Enter 5% of line 5			6	9,448.
ΙŖ	artiXII Distributable Amount (see instructions) (Section 4942(j)(3)	and (j)(5) private operating	foundations an	d certain	
_	foreign organizations, check here 🕨 🔃 and do not complete this pa	art.)			
1	Minimum investment return from Part X, line 6			1	9,448.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	44.		
þ	Income tax for 2019. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	44.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	9,404.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	9,404.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa	art XIII, line 1		7	9,404.
IP.	arttXIII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, ctc., pr	urposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	890,103.
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 charr	table, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
а	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	890,103.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net in	vestment			
	income. Enter 1% of Part I, line 27b			5	44.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	890,059.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years	when calculating whether t	he foundation q	ualifies for the	section
	4940(e) reduction of tax in those years.				

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				0.404
line 7				9,404.
2 Undistributed income, if any, as of the end of 2019			0.	
a Enter amount for 2018 only		·	<u></u>	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019:				<u></u>
a From 2014 2,736,932.		i		
b From 2015 4,492,510.				
c From 2016 775, 225.	ľ			
d From 2017 2,898,477.				
e From 2018 1,936,391.		ļ	į	
f Total of lines 3a through e	12,839,535.			
4 Qualifying distributions for 2019 from	12,035,3331			
Part XII, line 4: ►\$ 890,103.		}		
a Applied to 2018, but not more than line 2a		ĺ	0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount	_			9,404.
e Remaining amount distributed out of corpus	880,699.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount	0.			0.
6 Enter the net total of each column as				
indicated below:	13,720,234.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	13,720,234.	· · · · · · · · · · · · · · · · · · ·		
b Prior years' undistributed income. Subtract		0.		
line 4b from line 2b				
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 2018. Subtract line			_	•
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				•
be distributed in 2020				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 2014	2 726 022		l	
not applied on line 5 or line 7	2,736,932.			
9 Excess distributions carryover to 2020.	10 002 202			
Subtract lines 7 and 8 from line 6a	10,983,302.			•
10 Analysis of line 9: a Excess from 2015 4,492,510.				
a Excess from 2015 4,492,510. b Excess from 2016 775,225.				
c Excess from 2017 2,898,477.	ì			•
d Excess from 2018 1,936,391.				
e Excess from 2019 880,699.		ļ		

923581 12-17-19

Tare At Oupplementary Informat				
` 3 Grants and Contributions Paid During th	e Year or Approved for Future	Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient	-	
SEE ATTACHED STATEMENT	NONE	501(C)(3)	TO HELP FUND THE	
			OPERATING BUDGETS OF	
			THE VARIOUS 501 (C)(3)	
			CHARITABLE ORGANIZATIONS	890,103.
			DRGANTZATIONS	030,103.
	ĺ			
		<u> </u>		
·		1	İ	
-			 	
] .		
		1		
Total		<u> </u>		890,103.
		T	<u>▶ 3a</u>	890,103.
b Approved for future payment				
			1	
NONE				
			İ	
			4	
			1	
•				
			1	
			4	
			1	
	Ì		'	
Total		-	▶ 3b	0.

Page 11

Part XVI-A	Analysis of Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	711104111	code	Amount	
a	 				
b	 			-	<u>-</u>
d	 				 -
					, <u>, , , , , , , , , , , , , , , , , , </u>
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	4,844.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	ļ	·			
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			14	2.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					· · · · · · · · · · · · · · · · · · ·
1 Other revenue:					
a			- -		
b			-		
c					
e					
2 Subtotal. Add columns (b), (d), and (e)		().	4,846.	0
3 Total. Add line 12, columns (b), (d), and (e)				13	4,846
See worksheet in line 13 instructions to verify calculations.)					

		-		
-			 	
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	 	

Part XVII	Information Regarding Transfers to a Exempt Organizations	and Transactions a	nd Relationshi	os With Nonchari	table
1 . Did the oi	ganization directly or indirectly engage in any of the follow	ing with any other organization	on described in section	n 501(c)	Yes No
	n section 501(c)(3) organizations) or in section 527, relatir	· · ·		11 30 1(6)	1 100 100
		- ·			
	from the reporting foundation to a noncharitable exempt o	i yamzanon oi.			1a(1) X
(1) Cash					
(2) Other b Other tran	•				1a(2) X
					1b(1) X
	of assets to a noncharitable exempt organization				
	nases of assets from a noncharitable exempt organization				
. ,	al of facilities, equipment, or other assets				
	bursement arrangements				
	s or loan guarantees				
	rmance of services or membership or fundraising solicitati				
-	f facilities, equipment, mailing lists, other assets, or paid er				
	wer to any of the above is "Yes," complete the following sch s given by the reporting foundation. If the foundation receiv				
	s given by the reporting foundation. If the foundation received I) the value of the goods, other assets, or services received		ie in any transaction c	ir Sharing arrangement, Si	IOW III
(a) Line no	(b) Amount involved (c) Name of noncharitab	 	(d) Description	of transfers, transactions, and s	have a arrangements
(a) Cilie iii	N/A	to exempt organization	(u) Description	or transfers, transactions, and s	namy arangements
	N/A	·			
			- 		
					
					
			_ 		
			- 		
					
		-			
					
	 			 	
			- 		
			l		
	ndation directly or indirectly affiliated with, or related to, on	e or more tax-exempt organi	izations described	_	
	501(c) (other than section 501(c)(3)) or in section 527?			L_	Yes X No
<u>b</u> !f "Yes," co	emplete the following schedule.	Table 1	T		
	(a) Name of organization	(b) Type of organization	(0) Description of relations	nip
	N/A		ļ		
		<u> </u>	Ļ		
		 			
					
بالمحمأ	penalties of perjury, I declare that I have examined this return, includin filef, it is true, correct, and complete Declaration of preparer (other that			May knowledge	y the IRS discuss this
Sign L	Cott Bull	1 /		sho	irn with the preparer win below? See instr
Here	ofen your	5/12/20	TRUSTE	<u> </u>	X Yes No
Sigr	ature of officer or trustee	Date	Title		
	Print/Type preparer's name Preparer's	signature	1	Check if PTIN	
D :-			1 - 1	self- employed	
Paid	JONAH GRUDA	Caldy	2.26.2020		0850527
Preparer	Firm's name MAZARS USA ZIP	1		Firm's EIN ► 13-14	159550
Use Only	<u> </u>				
	Firm's address ▶ 135 WEST 50TH STR			- 	
	NEW YORK, NY 1002	0-0002			812-7000
				F(orm 990-PF (2019)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

BURKE	FAMILY FOUNDATION	25-6699573
Organization type (check one).		
Filers of: Sec	tion:	
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	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
• •	red by the General Rule or a Special Rule. , or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.
	Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling ontributor. Complete Parts I and II. See instructions for determining a contributor's	
Special Rules		
sections 509(a)(1) and 17 any one contributor, duri	ribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to (0(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, ong the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amound a Complete Parts I and II.	or 16b, and that received from
year, total contributions of	ribed in section 501(c)(7), (8), or (10) filing Form 990 or 990·EZ that received from a of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educabilities or animals. Complete Parts I, II, and III.	•
year, contributions exclusions exclusions is checked, enter here the purpose. Don't complete	ribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a sively for religious, charitable, etc., purposes, but no such contributions totaled more total contributions that were received during the year for an exclusively religious any of the parts unless the General Rule applies to this organization because it recontributions totaling \$5,000 or more during the year	ore than \$1,000. If this box , charitable, etc.,
but it must answer "No" on Part I	t covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo V, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo g requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) 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) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 STEPHEN B & GRETCHEN H BURKE Person **Payroll** 41 CENTRAL PARK WEST, APT. 11A 306,000. Noncash (Complete Part II for NEW YORK, NY 10023 noncash contributions.) (a) (d) (c) No. Name, address, and ZIP + 4 Total contributions Type of contribution 2 STEPHEN B & GRETCHEN H BURKE XPerson Payroll 41 CENTRAL PARK WEST, APT. 11A 121,980. Noncash (Complete Part II for NEW YORK, NY 10023 noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person

Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

BURKE FAMILY FOUNDATION

25-6699573

BURKE	FAMILY FOUNDATION		<u>-6699573</u>
Part II	Noncash Property (see instructions). Use duplicate copies of Par	rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	COMCAST CL A - 2,883 SHS		
2		—	
		\$ 121,980.	06/14/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
—			
3453 11-06-1	10	\$	90, 990-EZ, or 990-PF) (2019

Name of cr	rganization			Employer identification number		
BURKE	FAMILY FOUNDATION			25-6699573		
Part III	Exclusively religious, charitable, etc., contributing from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	 a) through (e) and the following line entry charitable, etc., contributions of \$1,000 or lest 	For organizations	hat total more than \$1,000 for the year		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
——						
-		(e) Transfer of gift				
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held		
-	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4		Relationship of tra	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held		
-	(e) Transfer of gift					
-	Transferee's name, address, and ZIP + 4 Relations			nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held		
			_			
-		(e) Transfer of gift				
_	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
			· · · · · · · · · · · · · · · · · · ·			
1						

FORM 990-PF	DIVIDENDS	AND INTE	REST	FROM SECUR	ITIES	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOMI	
JPMORGAN	4,846.		2.	4,844.	4,386	•
TO PART I, LINE 4	4,846.		2.	4,844.	4,386	•
			:			=
FORM 990-PF		TA	KES			STATEMENT 2
DESCRIPTION		- (A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ESTIMATED TAXES		230		0.		0.
TO FORM 990-PF, PG 1,	LN 18	230		0.		0.
FORM 990-PF		OTHER :	EXPE	NSES	· · · · · · · · · · · · · · · · · · ·	STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) I INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
NONDEDUCTIBLE CHARITA	BLE	1,719		0.		0.
TO FORM 990-PF, PG 1,	LN 23	1,719		, 0.		0.
					-	
FORM 990-PF OTHER I	NCREASES	IN NET AS	SETS	OR FUND BA	LANCES	STATEMENT 4 AMOUNT

69,492.

TOTAL TO FORM 990-PF, PART III, LINE 3

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 5

NAME OF MANAGER

STEPHEN B. BURKE GRETCHEN H. BURKE