BAA

Department of the Treasury Internal Revenue Service

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. 912

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

OMB No. 1545-0047

For	calen	dar year 2019 or tax year beginning	, 2019, and ending , 20						
	ne of fou					r identification numb			
TB	E SH	AHID JAVED & JAHANARA BURKI FAMILY FO	OUNDATION, I	NC.	52-23	377368			
		street (or P.O. box number if mail is not delivered to street address)		m/surte	B Telephon	e number (see instruct	ions)		
11	112	STACKHOUSE COURT			(301)	983-1941			
		state or province, country, and ZIP or foreign postal code			C If exemption application is pending, check here)				
PC	TOMA	C MD 20854					3,		
			n of a former publi	c charity	D 1. Foreig	n organizations, check	here >		
_	0.1001	☐ Final return ☐ Amended			1				
		☐ Address change ☐ Name cha	nge			n organizations meetin here and attach compi			
H	Check	type of organization: 🗵 Section 501(c)(3) exempt p		FILE	1	foundation status was			
\Box		n 4947(a)(1) nonexempt charitable trust		\ / - \		07(b)(1)(A), check here			
一	_	arket value of all assets at J Accounting method							
•		f year (from Part II, col. (c), Other (specify)			under sec	ndation is in a 60-mon ction 507(b)(1)(B), chec	n termination k here ▶ 🗍		
	line 16		e on cash basis.)						
Р	art I			T.	<u> </u>		(d) Disbursements		
\		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment ncome	(c) Adjusted net income	for chantable purposes		
•		the amounts in column (a) (see instructions).)	books	"			(cash basis only)		
	1	Contributions, giffs, grants, clc., received (attach schedule)	66,955	.	١				
	2	Check ► 🗵 if the foundation is not required to attach Sch. B	}	1					
	3	Interest on savings and temporary cash investments			· · · · ·				
Ų	4	Dividends and interest from securities			4,593.				
	5a	Gross rents					i		
Ą	b	Not rental income or (loss)		<u> </u>					
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10					<u> </u>		
Š	Ь	Gross sales price for all assets on line 6a					1		
Revenue	7	Capital gain net income (from Part IV, line 2)			0.				
æ	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances			<u>.</u>				
	b	Less: Cost of goods sold		T					
	С	Gross profit or (loss) (attach schedule)					i		
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	66,955		4,593.				
	13	Compensation of officers, directors, trustees, etc.							
penses	14	Other employee salaries and wages							
ē	15	Pension plans, employee benefits							
×	16a	Legal fees (attach schedule)							
E H	b	Accounting fees (attach schedule)	700.						
Ĭ.	C	Other professional fees (attach schedule) L-16c Stat	1,050						
Ē	17	Interest							
iš	18	Taxes (attach schedule) (see instructions) (see \$坎庇[<u></u>					
Ξ	19	Depreciation (attach schedule and depletion		.					
Þ	20	Travel, conferences, and meetings MAY 1 1 202			····				
þ	21	Travel, conferences, and meetings MAY 1 1 202	10-8 88-0-1				ļ		
ā	22	Printing and publications		-			ļ		
ρ	23	Other expenses (attach schedule) OGDEN: U	<u> </u>						
atir	24	Total operating and administrative expenses:	7						
Operating and Administrative Ex		Add lines 13 through 23	1,936						
g	25	Contributions, gifts, grants paid	31,000						
_	26	Total expenses and disbursements. Add lines 24 and 25	32,936	·			ļ		
	27	Subtract line 26 from line 12:		1					
	a	Excess of revenue over expenses and disbursements	34,019		· · ·				
	b	Net investment income (if negative, enter -0-)		- -	4,593.		 		
	C	Adjusted net income (if negative, enter -0-)	l			l	1		

For Paperwork Reduction Act Notice, see instructions.

-Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	Er	nd of	year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash—non-interest-bearing	7,297.	29,30	6.	29,306.
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4					
		Pledges receivable ►				
	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 ▶				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments-U.S. and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule) L-10b Stmt	261,240.	273,25	0.	218,625.
	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)	268,537.	302,55	6.	247,931.
	17	Accounts payable and accrued expenses				
Ś	18	Grants payable				
Liabilities	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons		<u> </u>		
<u>a</u>	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				<u> </u>
	23	Total liabilities (add lines 17 through 22)				
alances		Foundations that follow FASB ASC 958, check here				
2		and complete lines 24, 25, 29, and 30.				
	24	Net assets without donor restrictions				
<u>m</u>	25	Net assets with donor restrictions				
2	{	Foundations that do not follow FASB ASC 958, check here ► 🗵			- 1	
Ţ		and complete lines 26 through 30.			ı	
5	26	Capital stock, trust principal, or current funds				<u> </u>
ts	27	Paid-in or capital surplus, or land, bldg., and equipment fund	060 505	200 55	_	
SSE	28	Retained earnings, accumulated income, endowment, or other funds	268,537.	302,55		
Ä	29	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see	268,537.	302,55	<u> </u>	
Net Assets or Fund	30	· · · · · · · · · · · · · · · · · · ·	302,55	اء		
	rt III	Analysis of Changes in Net Assets or Fund Balances	268,537.	302,33	0.1	
		al net assets or fund balances at beginning of year—Part II, colu	mn (a) line 20 (must	agree with		
1		in net assets or fund balances at beginning of year—Part fi, colu- -of-year figure reported on prior year's return)			1	268,537.
•		er amount from Part I, line 27a		_	2	34,019.
3		er increases not included in line 2 (itemize)			3	
	hhA	lines 1, 2, and 3			4	302,556.
_		the head of the Proce Of the control by			5	
6	Tota	reases not included in line 2 (itemize) ► all net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lin	e 29	6	302,556.

4

	W Conital Coins and	Lacas for Toy on Investm	ont Inco					
Part	•	Losses for Tax on Investm		me	(b) How acquired	Γ		T
		(s) of property sold (for example, real es s; or common stock, 200 shs. MLC Co.)			P—Purchase D—Donation		ate acquired o., day, yr.)	(d) Date sold (mo., day, yr.)
12		ASSET MGMT MUNI FUND			P	ļ	16/2012	07/26/2019
b	734.30 BID WEDIERN	ADDDI MONI MONI TOND			*	1/	10,2012	0772072015
						1	· · · · · · · · · · · · · · · · · · ·	
d								
е								
(a) (Free ealer price					other basis		in or (loss) (f) minus (g))	
a	12,357.				13,210.			-853.
<u>b</u>						ļ		
C								
<u>d</u>						 		
ее	Complete only for accepts show	ing gain in column (h) and owned I	ov the found	dation	on 12/31/60	-		
	Complete only for assets show					1		el. (h) gain minus et less than -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69) Excess of col. (i) over col. (i), if any				from col. (h))
a						ļ	····	
<u>b</u>						ļ		
<u>c</u> d					· · · · · · · · · · · · · · · · · · ·	 		
<u>u</u>				-		 		
		(If gain :	also enter	in Pa	rt I line 7)			
2	Capital gain net income or	mercaonaciossi ?	enter -0- i		•	2		-853.
3	If gain, also enter in Part I,	or (loss) as defined in sections, line 8, column (c). See instruc	ctions. If	(loss)		•		
	Part I, line 8	r Section 4940(e) for Redu	· · · · ·	N		3		
Part		ate foundations subject to the						
•	tion 4940(d)(2) applies, leave	·		.,			·	
		-						
		ection 4942 tax on the distribut alify under section 4940(e). Do				base p	period?	☐ Yes ⊠ No
1	·	int in each column for each yea				aking	any entries	
<u>'</u>	(a)		1, 300 010	mouc	(clions before in	anig		(d)
Cale	Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	. Net v	alue of	(c) f nonchantable-use a		tribution ratio divided by col. (c))	
	2018		0.		· · · · · · · · · · · · · · · · · · ·	0.	(, (-)	0.00000
	2017		0.			0.		0.000000
	2016		0.			0.		0.00000
	2015		0.			0.		0.000000
	2014	20,8	58.		341,0	054.		0.061157
2	Total of line 1, column (d)			•		•	2	0.061157
3		or the 5-year base period—div undation has been in existence				r by	3	0.012231
4	Enter the net value of nonc	haritable-use assets for 2019 fi	rom Part X	. line	5	_	4	0.
			S Full A	,		•		
5	Multiply line 4 by line 3 .			•		•	5	0.
6	Enter 1% of net investment	t income (1% of Part I, line 27b))				6	46.
7	Add lines 5 and 6						7	46.
8		ns from Part XII, line 4					8	
	If line 8 is equal to or great Part VI instructions.	er than line 7, check the box in	Part VI, li	ne 1b	, and complete	that p	art using a	1% tax rate. See the

Part \		nstru	ction	s)				
1a	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)							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			92.				
	here ▶ ☐ and enter 1% 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)			0.				
				92.				
4	- ma may , (, , , , , , , , , , , , , , , , ,			0.				
5		÷		72.				
6	Credits/Payments:							
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			- 1				
b	Exempt foreign organizations—tax withheld at source			- {				
C.	Tax paid with application for extension of time to file (Form 8868) 6c							
_d	Backup withholding erroneously withheld							
7	Total credits and payments. Add lines 6a through 6d							
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			92.				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			0.				
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11							
Part \			VaaT	No				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No X				
	participate or intervene in any political campaign?	1a						
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the 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							
	published or distributed by the foundation in connection with the activities.							
C	Did the foundation file Form 1120-POL for this year?	1c		×				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			-1				
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$							
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed]	- 1	l				
	on foundation managers. ► \$							
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.			ĺ				
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	į	×				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>×</u>				
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?	5		×				
	If "Yes," attach the statement required by General Instruction T.		- 1	1				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:							
	By language in the governing instrument, or		ļ	- 1				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			1				
	conflict with the state law remain in the governing instrument?	6	×					
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	×					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			1				
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	×					
_				$\overline{}$				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"							
	complete Part XIV	9	1	×				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			 -				
IU	names and addresses	10	ŀ	×				

Form **990-PF** (2019)

Part	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	11		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
40	person had advisory privileges? If "Yes," attach statement. See instructions	12	×	×
13	Woheita address N/A	13		L
14	The books are in care of ► SHAHID BURKI Telephone no. ► (301)	83-	1941	
	Located at ▶ 11112 STACKHOUSE COURT POTOMAC MD ZIP+4 ▶ 20854			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		. 1	▶ □
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2019, 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	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	j		
D - 4	the foreign country	L		l
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1a	During the year, did the foundation (either directly or indirectly):		105	140
···	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No			
	(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?			,
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 🗵 No			
	(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)?			
	(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 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 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	were not corrected before the first day of the tax year beginning in 2019?	1c		×
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)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
h	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 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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			ļ
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 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			1 '
	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		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		×

Part	VII-B Statements Regarding Activities	for W	hich Form	4720	Мау Ве В	equire	d (contii	nuea)				
5a	During the year, did the foundation pay or incur	any amo	ount to:			-				Yes	No	
	(1) Carry on propaganda, or otherwise attempt t	o influe	nce legislatio	n (sect	ion 4945(e))? .	☐ Yes	⊠ No				
	(2) Influence the outcome of any specific public		on (see secti	on 495	5); or to ca	arry on,						
	directly or indirectly, any voter registration dr						☐ Yes	X No			,	
	(3) Provide a grant to an individual for travel, stu						☐ Yes	⊠ No		1		
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions						☐ Yes	⊠ No				
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to o						∐Yes	⊠ No				
ь	If any answer is "Yes" to 5a(1)-(5), did any of the	e trans	actions fail to	o qualif	y under the	е ехсер	tions des	scribed		l		
	in Regulations section 53.4945 or in a current no	tice reg	arding disas	ter assi	stance? Se	e instr	uctions		5b			
	Organizations relying on a current notice regardi	ng disa	ster assistan	ce, che	ck here .			ightharpoons				
С	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	he four	dation claim	exemp			☐ Yes	☐ 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 pay premiums												
	on a personal benefit contract?											
b	Did the foundation, during the year, pay premiur	a personal	benefil	contract	? .	6b		×				
	If "Yes" to 6b, file Form 8870.											
7a												
b	If "Yes," did the foundation receive any proceed		-					n? .	7b			
8	Is the foundation subject to the section 4960 ta									1	il	
	remuneration or excess parachute payment(s) de							No		لــــا		
Par	VIII Information About Officers, Direct	tors, I	rustees, F	ounga	tion Mana	agers,	Hignly i	Paid Ei	mpioy	ees,		
	and Contractors	-A:		ما الله		-4: (an innte	tiono				
	1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (b) Title, and average (c) Compensation (d) Contributions to (a) Expense account											
	(a) Name and address hou devot			(If not paid,		emple	employee benefit plans and deferred compensation		(e) Expense according to their allowance			
	NARA BURKI	PRESI	IDENT				0				•	
	2 STACKHOUSE COURT POTOMAC MD 20854		1.00		0.	0.					<u>0.</u>	
	RA A BURKI	SECRE	ETARY		^						0	
	PRINKLEWOOD COURT POTOMAC MD 20854	mp 70 8 C	1.00		0.	<u></u>	0.				0.	
	RAH BURKI	TREAS	SURER 1.00		0.	0.					ο.	
	3 STACKHOUSE COURT POTOMAC MD 20854	 	1.00		<u> </u>	-						
See	Statement		2.00		0.	1		0.			0.	
2	Compensation of five highest-paid employed	es (oth		e indi		ne 1 —	see instr		s) If n	one.		
	"NONE."		ei diair dio				· · · · · · · · · · · · · · · · · · ·		<i></i>			
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to pe	veek -	(c) Compe	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	nse acc allowan		
NONE			·····									
								. ,,				
							<u></u>					
			<u> </u>		<u> </u>		L		<u> </u>			
Tatal	number of other employees paid over \$50,000 .							. ▶	0			
otai	namber of other employees para ever telepter.								Form 99			

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly P and Contractors (continued)	aid Em	ployees,	
And Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services Depart IX-A Summary of Direct Charitable Activities Let the foundation's four largest direct charitable activities during the tax year. Include nelevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1				
	(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation	
NONE				
<u> </u>				
		į		
			<u> </u>	
		▶	0	
Part IX-A	Summary of Direct Charitable Activities		r	
List the fo organization	undation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the nuons and other beneficiaries served, conferences convened, research papers produced, etc.	ımber of	Expenses	
1				
2			}	
			}	
,				
J				
			}	
4				
Part IX-E			Amount	
	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
1			ļ	
			}	
2				
		,		
All other p	rogram-related investments. See instructions.			
3	.,		}	
Takal Add	Enco 1 through 2			
rotal. Add	lines 1 through 3		Form 990-PF (2019	

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn tour	ndations,
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	
b	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	
е	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	ł ł	_
	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	<u> </u>
6	Minimum investment return. Enter 5% of line 5	6	0.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► and do not complete this part.)	oundat	ions
1	Minimum investment return from Part X, line 6	1	0.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	92.
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	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1	
	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	
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.	g wheth	er the foundation

art	Undistributed Income (see instruction	ins)			
		(a) Corpus	(b) Years pnor to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				0.
2	Undistributed income, if any, as of the end of 2019:				
a	Enter amount for 2018 only			•	
b	Total for prior years: 20 , 20 , 20		···		
3	Excess distributions carryover, if any, to 2019:				
о a	From 2014				
b					
C					
đ	From 2017 0.				
e	From 2018	1 050		- 	
f	Total of lines 3a through e	1,253.			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$				
а	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
đ	Applied to 2019 distributable amount				
ė	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2019 (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:				
_	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,253.			j
a	•	1,717.			
ь	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
e	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			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 roquired—see instructions)				
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	1,253.			
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a	0.		<u> </u>	
10	Analysis of line 9:	The state of the s	<u></u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
а	Excess from 2015 0 .				
b	Excess from 2016 0 .				
C	Excess from 2017 0.				
ď	Excess from 2018 0.	;			
е	Excess from 2019 0.				

factors:

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient							
a Paid during the year THE CITIZEN'S FOUNDATION 9404 SOUTHWEST FREEWAY, STE 620 HOUSTON TX 77074 SPORTS PLUS		NC	GENERAL SUPPORT OF PROGRAM	5,000.					
P.O. BOX 83274 GAITHERSBURG MD 20878 IMRAN KHAN CANCER APPEAL		nc	GENERAL SUPPORT OF PROGRAM	1,000.					
8950 W OLYMPIC BLVD BEVERLY HILLS CA 90211 BURKI INSTITUTE OF PUBLIC POLICY AT NETSOL		NC	GENERAL SUPPORT OF PROGRAM	7,500.					
126B BLOCK NEW GARDEN TOWN LAHORE, PAKISTAN AMERICAN MUSLIM INSTITUTE		NC	GENERAL SUPPORT OF PROGRAM	15,000.					
13140 FAITH PLAZA OMAHA NE 68144		NC	GENERAL SUPPORT OF PROGRAM	2,500.					
		<u>.</u>		`					
Total			▶ 3a	31,000.					
b Approved for future payment			,						
Total			▶ 3b						

Pa	rt XVI	-A Analysis of Income-Producing Ac	tivities				- <u></u>
Ente	r gros	s amounts unless otherwise indicated.		siness income	Excluded by secti	on 512, 513, or 514	(e)
1	Progr	ram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
	a		-				
	b _						
	c ⁻						
	d _						
	е _						
	f _						
	g F	ees and contracts from government agencies			<u> </u>		
2	Mem	bership dues and assessments					
3	Intere	est on savings and temporary cash investments					
4		ends and interest from securities					
5		ental income or (loss) from real estate:					
		ebt-financed property				 	
		lot debt-financed property					
6		ental income or (loss) from personal property					
7		r investment income			<u> </u>	ļ.,	
8		or (loss) from sales of assets other than inventory	ļ		ļ		
9		ncome or (loss) from special events	ļ		 		
10		s profit or (loss) from sales of inventory			<u> </u>		
11		r revenue: a					
	Ь_		<u> </u>		 		ļ
	°. –		<u></u>		<u> </u>		· · · · · ·
	d _						
40	e _	otal. Add columns (b), (d), and (e)	 		<u> </u>		
12	Subte	otal. Add columns (b), (d), and (e)	Ł	L		13	<u> </u>
13	lota	i. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatior	 ne\			. 13	
<u> </u>	rt XVI			ent of Exemp	t Purnosas	·····	,
	в No.					-A contributed i	mnortantly to the
	▼	Explain below how each activity for which accomplishment of the foundation's exempt put	rposes (other tha	n by providing fun	ids for such purp	oses). (See Instru	ctions.)
						· · · · · · · · · · · · · · · · · · ·	
					,,		
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							· · · · · · · · · · · · · · · · · · ·
			·			,	· ·
			<u></u>				·
							
	-						

Part	XVII	Information Organization	n Regarding Tra	nsfers to	and Transa	ction	s and F	Relationship	os With	Nonchar	itabl	е Ехе	mpt
1 a	in seo	e organization oction 501(c) (o	directly or indirectly ther than section porting foundation t	501(c)(3)) organizations	s) or	in secti	on 527, rel				Yes	No
u		-	····		rantable exemp	or orge	A IIZZEIOI	· • · · ·			1a(1)	 	×
						• • •					1a(2)	-	×
	• •	her assets .			• • • • •	• • •		- • • •			18(2)	-	
b		transactions:									41- (4)		
			a noncharitable ex					• • • •			1b(1)		×
			ets from a noncharit								1b(2)		×
	(3) Re	ental of facilities,	, equipment, or oth	er assets							1b(3)		X
	(4) Re	eimbursement a	rrangements								1b(4)		×
	(5) Lo	ans or loan gua	rantees								1b(5)		×
	(6) Pe	erformance of se	ervices or members	hip or fun	draising solicita	ations					1b(6)		X
С	Sharir	ng of facilities, e	quipment, mailing l	ists, other	r assets, or paid	d emp	loyees				1c		X
		•	of the above is "Ye		•	-	-				v the	fair m	arket
_	value	of the goods, or	ther assets, or serv	rices give	n by the reporti	ing fol	undation	. If the found	lation re	ceived less	than	fair m	narket
(a) Line	no. (t) Amount involved	(c) Name of none	charitable ex	empt organization		(d) Desc	nption of transfe	rs, transac	ctions, and sha	inng an	angem	ents
		-						· · · · · · · · · · · · · · · · · · ·					
													
													
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2a b	descri	bed in section 5	ectly or indirectly a 501(c) (other than so of following schedule	ection 50°				ore tax-exer	npt org	anizations 	□ Y	es 🗵	No
		(a) Name of organ	ization		(b) Type of organi	zation			(c) Descri	ption of relatio	nship		
													
													
				ļ									
	1			1,,,,,,			4 - 4 -		A. 45. 1	A -4 1 1	l · •	hali d	4
C :-			declare that I have examination of preparer (other to							t of my knowled	ige and	Delief, f	. IS True,
Sign Here	correct, and complete. Declaration of preparer (other the Signature of Officer or trustee				Date PRESIDENT					May the II with the p See Instru	reparer	shown t	elow?
	1 1	Print/Type preparer		Prenare	r's signature			Date			PTIN		
Paid	1	., ,			•				C	heck 🔼 ıf j			•
Prepa	arer	CHUN K. YE			K. YEUNG,	CPA	<u> </u>	04/24/2		olf-employed			<u>u</u>
Use (Firm's name	CHUN K. YEUR							N ► 54-19			
	l	Firm's address ▶	1561 WESTMOR MCLEAN	RELAND	STREET	VA	22101	L-4443	Phone no				(2019)
BAA			LICTION WIN			٧A	LLIV	レーセリセン		F-0	orm 32	,u-r r	(ZU 19)

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
INCOME TAX	186.			
Total	186.			

Legal and Professional Fees

2019

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

Employer Identification No 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 990	-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
				·	
tal to Form 990-l	PF, Part I, Line 16b				

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RAYMOND JAMES	INVESTMENT ADVISORY	1,050.		,	
				}	
Total to Form 990-	PF, Part I, Line 16c	1,050.			

Investments

Name PHE SHAHID JAVED & JAHANARA BURKI F	AMILY FOUNDATION, IN	iC.			yer Identification No 377368
Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	f Year State and Local Obligations FMV	US Govern Obligati Book Va	nment ons	of Year US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a					
Line 10b - Investme	ents - Corporate	Stock:	Book Value	(i of Year Fair Market Value
NETSOL TECHNOLOGIES INC MUTUAL FUNDS ETF DIFFERENCE Totals to Form 990-PF, Part II, I			87, 6, -1,	145. 793. 082. 770. 250.	128,000. 86,279. 6,116. -1,770. 218,625.
Line 10c - Investme	ents - Corporate I	Bonds:	Book Value	•	f Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 10c				
Line 12 - Investme	ents - Mortgage l	oans:	Book Value	(f Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 12				
Line 13 - Inve	estments - Other		Book Value	•	l If Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 13				

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

	0	in the forest time and a finish	,	
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	_