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### **Return of Private Foundation** or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2009

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For c	alend	ar year 2009, or tax year beginning , a	and ending		_		<del></del>		
<b>G</b> C	heck a	ill that apply Initial return initial ret	turn of a former public c	hanty	l	Final return			
		Amended return Add	ress change	Name	change				
Use	the IR					oyer identification numb	er		
la	abel.	Moshe & Simi Mehlman Chari	table Fou		20-8001594				
Oth	erwise	Foundation, Inc.	· · · · · · · · · · · · · · · · · · ·		B Telephone number (see page 10 of the instructions)				
•	rint	Number and street (or P O box number if mail is not delivered	to street address)	Room/suite	718	3-252-1500			
	type.	1379 Coney Island Avenue			C If exe	mption application is pendi	ng, check here		
	Specif	City of town, state, and 211 code			D 1. Fo	reign organizations, check	here 🕨 📘		
	uction	DIOORIYII	11230		<b>2.</b> Fo	reign organizations meetin	g the		
$\overline{}$		ype of organization 🔀 Section 501(c)(3) exempt private				% test, check here and att	· · ·		
	ection	4947(a)(1) nonexempt charitable trust Other taxable	e private foundation			ate foundation status was			
I Fa	ır marl	ket value of all assets at end J Accounting method	X Cash Accr	ual	sectio	n 507(b)(1)(A), check here			
of	year (f	from Part II, col (c), Uther (specify)				foundation is in a 60-month			
_	e 16) 🕽		oe on cash basis )		under	section 507(b)(1)(B), chec	ck here		
<u>P</u> a	rt L	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Not in	.astmant	(c) Adjusted net	(d) Disbursements for charitable		
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net inv		income	purposes		
		the amounts in column (a) (see page 11 of the instructions) )					(cash basis only)		
	1	Contributions, girts, grants, etc , received (attach schedule)	50,000						
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B							
	3	Interest on savings and temporary cash investments	262		262	262			
	4	Dividends and interest from securities					·		
	5a	Gross rents							
<u>o</u>	ь	Net rental income or (loss)							
Revenue	6a	Net gain or (loss) from sale of assets not on line 10							
Š	b	Gross sales price for all assets on line 6a					·		
8	7	Capital gain net income (from Part IV, line 2)			0				
	8	Net short-term capital gain				0	-		
	9	Income modifications				· · · · · · · · · · · · · · · · · · ·			
	10a	Gross sales less returns & allowances					777		
	ь	Less Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	50,262		262	262			
<b>(</b> 0	13	Compensation of officers, directors, trustees, etc							
ŝė	14	Other employee salaries and wages							
penses	15	Pension plans, employee benefits							
	16a	Legal fees (attach schedule)							
ive Ex	ь	Accounting fees (attach schedule) Stmt 1	700						
<u>ج</u> َ ِ ا	С	Other professional fees (attach schedule)							
Administrative	17	Interest							
isti	18	Taxes (attach schedule) (see page 14 of the instructions) Stmt 2	20						
dmin	19	Depreciation (attach schedule) and depletion							
. <del>-</del> =	20	Occupancy							
	21	Travel, conferences, and meetings							
Operating and A	22	Printing and publications							
<u> </u>	23	Other expenses (att sch ) Stmt 3	74		14	14			
ţi	24	Total operating and administrative expenses.							
∋ra		Add lines 13 through 23	794	,	14	14	0		
ğ	25	Contributions, gifts, grants paid	69,790		<b>(</b> ,3	,	69,790		
_	26	Total expenses and disbursements. Add lines 24 and 25	70,584		14	14	69,790		
	27	Subtract line 26 from line 12	')						
	а	Excess of revenue over expenses and disbursements	-20,322						
	ь	Net investment income (if negative, enter -0-)		•	248				
	С	Adjusted net income (if negative, enter -0-)	L	) i	(	248	,		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

	Part II	Attached schedules and amounts in the description column	Beginning of year	End o	of year								
اسا	Part II	Balance Sheets Attached schedules and amounts in the description column 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											
	2	Savings and temporary cash investments	120,044	99,722	99,722								
	3	Accounts receivable	•										
		Less allowance for doubtful accounts ▶											
	4	Pledges receivable ▶											
	-	Less allowance for doubtful accounts ▶											
	5	Grants receivable											
	6	Receivables due from officers, directors, trustees, and other											
	·	disqualified persons (attach schedule) (see page 16 of the											
	_	instructions)											
	7	Other notes and loans receivable (att schedule)											
,,	_	Less allowance for doubtful accounts ▶											
Assets	8	Inventories for sale or use	<del></del>										
SS	9	Prepaid expenses and deferred charges											
۷	10a	Investments—U S and state government obligations (attach schedule)											
	b	Investments—corporate stock (attach schedule)											
	С	Investments—corporate bonds (attach schedule)											
	11	Investments—land, buildings, and equipment basis											
		Less accumulated depreciation (attach sch.) ▶											
	12	Investments—mortgage loans											
	13	Investments—other (attach schedule)											
	14	Land, buildings, and equipment basis											
j		Less accumulated depreciation (attach sch.) ▶											
	15	Other assets (describe ▶ )											
	16	Total assets (to be completed by all filers—see the											
		instructions Also, see page 1, item I)	120,044	99,722	99,722								
	17	Accounts payable and accrued expenses											
	18	Grants payable											
Liabilities	19	Deferred revenue	~ <del>~~~</del> .										
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons			Ì								
abi	21	Mortgages and other notes payable (attach schedule)											
Ï	22	Other liabilities (describe )											
	23	Total liabilities (add lines 17 through 22)	0										
_			<u> </u>		ļ								
ω.		Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31.			.								
Net Assets or Fund Balances					}								
Ĕ	24	Unrestricted											
ë	25	Temporarily restricted											
8	26	Permanently restricted											
Ĕ		Foundations that do not follow SFAS 117, check here ▶ X											
교		and complete lines 27 through 31.											
þ	27	Capital stock, trust principal, or current funds											
ţ	28	Paid-in or capital surplus, or land, bldg, and equipment fund											
Se	29	Retained earnings, accumulated income, endowment, or other funds	120,044	99,722	į								
As	30	Total net assets or fund balances (see page 17 of the											
et	1	instructions)	120,044	99,722									
Ž	31	Total liabilities and net assets/fund balances (see page 17											
		of the instructions)	120,044	99,722									
	Part I												
_		net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	gree with										
		of-year figure reported on prior year's return)	-	1	120,044								
,		r amount from Part I, line 27a		2	-20,322								
		r increases not included in line 2 (itemize) ▶		3	, , , , , ,								
		lines 1, 2, and 3		4	99,722								
		eases not included in line 2 (itemize)		5	<del> </del>								
_		eases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), I	line 30	6	99,722								
_6	, rotal	i net assets of fund parances at end of year time 4 minus line 3/—Fart II, column (0), t			Form 990-PF (2009)								

PartilV Capital Gains a	nd Losses for	Tax on Investme	nt Incom	е				
		rty sold (e g , real estate, ock, 200 shs MLC Co )			(b) How acquired P—Purchase D—Donation		ite acquired , day, yr )	(d) Date sold (mo , day, yr )
1a N/A		· · · · · · · · · · · · · · · · · · ·						
<u>b</u>							····	
<u>c</u>								
<u>d</u>	·	- <del></del>					<del></del>	
е			r					
(e) Gross sales price	``'	lation allowed llowable)			other basis nse of sale			or (loss) minus (g)
a		<del></del> -				· · · · · · · · · · · · · · · · · · ·	<del>.</del>	
		<del>.</del>		<u> </u>				
<u>c</u>	<del></del>							<del>-</del>
			<u> </u>					
Complete only for assets showing	l gain in column (h)	and owned by the four	ndation on	12/31/69				
(i) F M V as of 12/31/69	(j) Adju	isted basis 12/31/69		(k) Exces	s of col (ı) (ı), ıf any	c	ol (k), but not	(h) gain minus less than -0-) <b>or</b> om col (h))
	25 01	12/01/03			(), 2 <del>,</del>		•	
<u>a</u> b								
С С	<u> </u>						<del></del> -	
d			-					
6	<del></del>			•				
2 Capital gain net income or (net ca	apital loss)	If gain, also enter in If (loss), enter -0- in	-			2		<u> </u>
3 Net short-term capital gain or (los	3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)							
	If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)							
If (loss), enter -0- in Part I, line 8			3					
	nder Section 49	940(e) for Reduce	ed Tax or	n Net In	vestment Incom	е		
(For optional use by domestic private							-	
If section 4940(d)(2) applies, leave th								
						<b></b>		
Was the foundation liable for the sect				n the base	e period?   Ye	es X	No	
If "Yes," the foundation does not qual	<u> </u>	<u> </u>	<u>`</u>					
1 Enter the appropriate amount in e	each column for eac	h year, see page 18 o	f the instruc	tions befo	ore making any entries	S T		(4)
(a) Base period years Calendar year (or tax year beginning	ın) Adju	(b) sted qualifying distribution		Net value	(c) of noncharitable-use ass			(d) hibution ratio livided by col (c))
2008		72	,614		156,			0.462840
2007		88	,368		74,			1.183733
2006				_	6,	153		
2005								
2004	_,							
2 Total of line 1, column (d)							2	1.646573
3 Average distribution ratio for the	•		e 2 by 5, or	by the				0.00005
number of years the foundation h	as been in existenc	e if less than 5 years				-	3	0.823287
4 Enter the net value of noncharital	ble-use assets for 2	009 from Part X, line 5	i			_	4	119,613
5 Multiply line 4 by line 3							5	98,476
		•						2
6 Enter 1% of net investment incon	ne (1% of Part I, line	270)				}	6	<del></del>
7 Add lines 5 and 6						}	7	98,478
8 Enter qualifying distributions from							8	69,790
If line 8 is equal to or greater than	n line 7, check the b	ox in Part VI, line 1b, a	and complet	te that par	t using a 1% tax rate	See the	•	
Part VI instructions on page 18	<u> </u>							Form <b>990-PF</b> (2009)

Form	990-PF (2009) Mcshe & Simi Mehlman Charitable Fou 20-8001594			P	age 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	ons)			
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				5
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	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				5
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		_		0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				5
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 7				
b	Exempt foreign organizations—tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868)				
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 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				2
11_	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 2 Refunded ▶ 11				
Pa	rt VII-A Statements Regarding Activities	<del></del>		. 1	_
1a		<u> </u>		Yes	No
	participate or intervene in any political campaign?	-	<u>1a</u>		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				~-
	of the instructions for definition)?	-	1b		X
	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	-			v
С.	Did the foundation file Form 1120-POL for this year?	F	<u>1c</u>		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
2	on foundation managers  \$	-	2		×
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities	H	-		_
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
3	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?	<u> </u>	4a		X
b		/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<b>'</b> }-	5		X
Ū	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	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) ▶ NY		Ì		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			- 1	
	27)? If "Yes," complete Part XIV	L	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X
		Form	. 99	0-PF	/2009

	990-PF (2009) Moshe & Simi Mehlman Charitable Fou 20-8001594	<u> </u>			Р	age <b>5</b>
Pa	rt VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	7		13	X	L
	Website address ► N/A					_
14		hone no 🕨	718-3	77-	787	0
	1053 East 2nd St					
	Located at ▶ Brooklyn, NY	ZIP+4 ▶	11230	)		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here					▶ 📙
	and enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b> •	15			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<del>,</del> .		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)		_			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) 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?	Yes	X 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)?	Yes	X No			
	(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 )	Yes	X No			
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 page 20 of the instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ □	1		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		, <sub>—</sub>			
·	were not corrected before the first day of the tax year beginning in 2009?		N/A	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 2009, did the foundation have any undistributed income (lines 6d and					{
u	6e, Part XIII) for tax year(s) beginning before 2009?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		110			
h	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)					
b	(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 page 20 of the instructions)		N/A	2b		
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			20		<del>                                     </del>
С	► 20 , 20 , 20 , 20					
22	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
3a	at any time during the year?	Yes	X No			
h	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or		<u></u>			
b	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			1		
				1		
	Commissioner under section 4943(c)(7)) to dispose 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, Form 4720, to determine if the		N/A	21-		
	foundation had excess business holdings in 2009 )		H/A	3b		x
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a	ļ	
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	2		4b		X
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009	·			n.PF	(2009)

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Pa	art VII-B Statements Regard	ding Activities for Which For	m 4720 May Be Re	quired (contin	ued)			
5a	Dunng the year did the foundation pay	or incur any amount to						
	(1) Carry on propaganda, or otherwise	attempt to influence legislation (section	n 4945(e))?	\ \ \	res X No			
	(2) Influence the outcome of any speci	fic public election (see section 4955), e	or to carry on,					
	directly or indirectly, any voter regis	stration drive?		Ц \	res X No			}
	(3) Provide a grant to an individual for	travel, study, or other similar purposes	37	<u> </u>	res 🗓 No			
	(4) Provide a grant to an organization	other than a charitable, etc , organizati	on described in		_			
	section 509(a)(1), (2), or (3), or sec	ction 4940(d)(2)? (see page 22 of the ii	nstructions)	\\	res X No			
	(5) Provide for any purpose other than	religious, charitable, scientific, literary	, or educational					
	purposes, or for the prevention of o	ruelty to children or animals?		□ \( \square\)	res 🗴 No			
b	If any answer is "Yes" to 5a(1)-(5), did	any of the transactions fail to qualify ui	nder the exceptions desc	nbed in				
	Regulations section 53 4945 or in a cui			nstructions)?	_N/A	5b		L
	Organizations relying on a current notice	e regarding disaster assistance check	here		▶ ∐			}
C	If the answer is "Yes" to question 5a(4)	, does the foundation claim exemption	from the tax	. —				1
	because it maintained expenditure resp	onsibility for the grant?		N/A 📗	res No			
	If "Yes," attach the statement required	by Regulations section 53 4945-5(d)						
6a	Did the foundation, during the year, rec	eive any funds, directly or indirectly, to	pay premiums		=			
	on a personal benefit contract?			_	res 🛚 X No			اا
b	Did the foundation, during the year, pay	premiums, directly or indirectly, on a	personal benefit contract	?		6b		X
	If "Yes" to 6b, file Form 8870				E2			
	At any time during the tax year, was the				res X No			<b> </b>
	If yes, did the foundation receive any p	· · · · · · · · · · · · · · · · · · ·			N/A	7b		<u></u>
Pa		Officers, Directors, Trustees,	Foundation Manag	jers, Highly P	aid Employee	s,		
	and Contractors							
<u>1 l</u>	List all officers, directors, trustees, for	undation managers and their compe	ensation (see page 22 o	f the instructions	<del> </del>	<del>,</del>		
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Ev	pense a	ccount
	(a) Name a	nd address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		r allowa	
			Out of the position		compensation			
Mo	oshe Mehlman	Brooklyn	President					
11	.11 East 26th St	NY 11210	5.00	0	C	) -		0
Sı	.mı Mehlman	Brooklyn	Treasurer					
11	.11 East 26th St	NY 11210	1.00	0	C	<u> </u>		0
						1		
		<del></del>				ــــــــــــــــــــــــــــــــــــــ		
2	Compensation of five highest-paid e	mployees (other than those include	ed on line 1—see page 2	23 of the instruct	ions).			
	If none, enter "NONE."			<del></del>	T (NO 1) 1	т-	-	
	(a) blame and address of each are	-laves and the #50 000	(b) Title, and average	(0) Composition	(d) Contributions to employee benefit	(e) Ex	pense a	ccount,
	(a) Name and address of each em	ployee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		r allowa	
	··-			-	compensation	+-		
NC	DNE							
					<del> </del>	<del> </del>		
					<del> </del>			
			1					
			<del></del>					
[ota	Il number of other employees paid over \$	50 000		<u> </u>	<u>L</u>		1	
. 04	in named of other employees paid over t				Fo	m 99	0-PF	(2009)

Form 990-PF (2009) Moshe & Simi Mehlman Charitable Fo	ou 20-8001594	Page <b>7</b>					
Part VIII Information About Officers, Directors, Trustees, Founda	tion Managers, Highly Paid Empl	oyees,					
and Contractors (continued)	of the improvediency of more enter "NONE						
3 Five highest-paid independent contractors for professional services (see page 23  (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation					
NONE	(b) Type of service	(c) compensation					
1011							
		<del></del>					
Total number of others receiving over \$50,000 for professional services							
	<del>- · · · · · · · · · · · · · · · · · · ·</del>						
Part IX-A Summary of Direct Charitable Activities							
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.							
1 N/A							
·							
2 .							
3							
		<del></del>					
•							
Part IX-B Summary of Program-Related Investments (see page 2	24 of the instructions)	•					
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount					
1 N/A							
2							
All other program related investments. See none 24 of the instructions							
All other program-related investments. See page 24 of the instructions.							

Total. Add lines 1 through 3

Form	1990-PF (2009) Moshe & Simi Mehlman Charitable Fou 20-8001594		Page <b>8</b>
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn fou	undations,
1	see page 24 of the instructions.)  Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,	Γ	
•	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	121,435
c	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	121,435
е	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	121,435
4	Cash deemed held for chantable activities Enter 1½ % of line 3 (for greater amount, see page 25 of	<u> </u>	
•	the instructions)	4	1,822
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	119,613
6	Minimum investment return. Enter 5% of line 5	6	5,981
	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private ope	erating	
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	5,981
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI )	1	
С	Add lines 2a and 2b	2c	5
3	Distributable amount before adjustments Subtract line 2c from line 1	3	5,976
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5,976
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	5,976
P	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	Π	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	69,790
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.,		
	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	69,790
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form **990-PF** (2009)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Pa	rt XIII Undistributed Income	(see page 26 of t	of the instructions)							
			(a)	(b)	(c)	(d)				
1	Distributable amount for 2009 from Part X	(1,	Corpus	Years prior to 2008	2008	2009				
	line 7					5,976				
2	Undistributed income, if any, as of the en-	d of 2009								
а	Enter amount for 2008 only									
b	Total for prior years 20 , 20	, 20								
3	Excess distributions carryover, if any, to 2									
а	From 2004									
b	From 2005									
С	From 2006									
d	From 2007	84,337								
е	From 2008	64,783								
f	Total of lines 3a through e		149,120							
4	Qualifying distributions for 2009 from Par	t XII,		•						
	line 4. ▶ \$ 69,790									
а	Applied to 2008, but not more than line 2:	3								
b	Applied to undistributed income of prior y	ears		•						
	(Election required—see page 26 of the in	structions)								
С	Treated as distributions out of corpus (Ele	ection								
	required—see page 26 of the instructions	5)								
d	Applied to 2009 distributable amount					5,976				
е	Remaining amount distributed out of corp	ous	63,814							
5	Excess distributions carryover applied to	2009		·						
	(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:									
а	Corpus Add lines 3f, 4c, and 4e Subtrac	t line 5	212,934							
b	Prior years' undistributed income Subtra-	ct				1				
	line 4b from line 2b									
С	Enter the amount of prior years' undistrib	uted								
	income for which a notice of deficiency has	as								
	been issued, or on which the section 494	2(a)								
	tax has been previously assessed									
d	Subtract line 6c from line 6b Taxable									
	amount-see page 27 of the instructions									
е	Undistributed income for 2008 Subtract I	ine				!				
	4a from line 2a Taxable amount—see pa	ige								
	27 of the instructions									
f	Undistributed income for 2009 Subtract I	ines								
	4d and 5 from line 1 This amount must b	е								
	distributed in 2010					0				
7	Amounts treated as distributions out of co	orpus								
	to satisfy requirements imposed by section	on								
	170(b)(1)(F) or 4942(g)(3) (see page 27	of the		(						
	instructions)									
8	Excess distributions carryover from 2004	not								
	applied on line 5 or line 7 (see page 27 or	f the								
	instructions)									
9	Excess distributions carryover to 2010	).								
	Subtract lines 7 and 8 from line 6a		212,934							
10	Analysis of line 9	1								
а	Excess from 2005									
b	Excess from 2006									
C	Excess from 2007	84,337								
d	Excess from 2008	64,783				Į				
е	Excess from 2009	63,814								

_	on Dryman Macha C Simi	Wahlman Ch	itabla E	20-9001	1504	
	1990-PF (2009) Moshe & Simi artiXIV Private Operating Fou					Page <b>10</b>
1a					, this, quodion of	
	foundation, and the ruling is effective for 2			`)	<b>&gt;</b>	
b	Check box to indicate whether the founda	tion is a private operati	ng foundation describe	ed in section	4942(j)(3) or 49	942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years	· · · · · · · · · · · · · · · · · · ·	(e) Total
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(-,
	in restment return from Part X for					
	each year listed		<del></del>	_	<del> </del>	
b	85% of line 2a		<del></del>	<del>-</del>		-
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly					
u	for active conduct of exempt activities					
е	Qualifying distributions made directly		†			
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					<del> </del>
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					<del></del>
þ	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
С	Part X, line 6 for each year listed "Support" alternative test—enter.			+		
·	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on				}	
	securities loans (section					
	512(a)(5)), or royalties)			<del></del>	<del></del>	<del></del>
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III)			<u> </u>		
	(3) Largest amount of support from					
	an exempt organization		<del> </del>			<del>-   </del>
. D	(4) Gross investment income	antion (Complete	this new entries	ha farradation b	ed \$5 000 or more	in accets at
in K	Supplementary Informany time during the year	•	•		iad \$5,000 or more	in assets at
1	Information Regarding Foundation Ma		Of the matractio	110./		
a	List any managers of the foundation who	=	than 2% of the total co	ontributions received	by the foundation	
	before the close of any tax year (but only					
	N/A					
b	List any managers of the foundation who	own 10% or more of th	e stock of a corporatio	n (or an equally large	portion of the	
	ownership of a partnership or other entity	) of which the foundation	on has a 10% or greate	er interest		
	N/A					
2	Information Regarding Contribution, G					
	Check here ▶ X if the foundation only					
	unsolicited requests for funds. If the found organizations under other conditions, com-			of the instructions) to	individuals of	
а	The name, address, and telephone numb	<u> </u>		be addressed		
đ	N/A	c. of the person to write	approations snould	23 444.0000		
	•					
b	The form in which applications should be	submitted and informati	tion and materials they	should include	<u> </u>	
	N/A					
С	Any submission deadlines					
	N/A					<u>.                                      </u>
d	Any restrictions or limitations on awards,	such as by geographic	al areas, chantable fie	lds, kinds of institution	ns, or other factors	
	N/A	<del></del>				

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) Paid during the year See Statement 4 69,790 69,790 ▶ 3a Approved for future payment N/A ▶ 3b Total Form 990-PF (2009) DAA

P	art XVI-A	Analysis of Income-Producing Act	ivities				
Ξnt	er gross amou	unts unless otherwise indicated	Unrelate	d business income	Exclude	d by section 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	Related or exempt function income (See page 28 of
1	Program serv	vice revenue			code		the instructions)
	a						
	b						
	d						
	f				1		<u> </u>
	g Fees and	d contracts from government agencies					<u> </u>
2	_	dues and assessments					
		avings and temporary cash investments					262
		d interest from securities				· · · · -	
		come or (loss) from real estate			<del>- </del>		
J		•	<u> </u>		<del>                                     </del>		-, ·
		inced property			1		
_		-financed property		1	1		
		come or (loss) from personal property	<u> </u>	-			
	Other investr					-	
		) from sales of assets other than inventory	<u> </u>		+	ļ	
		or (loss) from special events			-		
		or (loss) from sales of inventory			1		· •
1	Other revenu	ne <b>a</b>	.				
	с				<u> </u>		
	θ						
2	Subtotal Add	d columns (b), (d), and (e)			0	0	262
3	Total. Add lin	ne 12, columns (b), (d), and (e)	<del></del>			13	262
Se	e worksheet ii	n line 13 instructions on page 28 to verify calculation	ns)				
F	art XVI-B	Relationship of Activities to the Activities	ccomplishme	ent of Exempt Pu	rposes	i	
	Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo					the
_	N/A	instructions )				<del> </del>	
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)A				<del></del>			Form <b>990-PF</b> (2009

DAA

		Exempt Organiza	-	iisicis io aliu Italisactioi	is allu	i itelationsiip	5 11111 1101	Cilaric	abie			
1				in any of the following with any of	her orga	inization described				Yes	No	-
	=	•		n 501(c)(3) organizations) or in sec	_							Ī
	organization			,								1
а	Transfers fro	om the reporting founda	tion to a non	charitable exempt organization of								ļ
	(1) Cash								1a(1)		X	•
	(2) Other as	ssets							1a(2)		X	_
b	Other transa	ictions										j
	(1) Sales of	assets to a nonchantal	ole exempt o	rganization					1b(1)		X	_
	(2) Purchas	es of assets from a nor	ncharitable e	xempt organization					1b(2)		X	_
	(3) Rental of	of facilities, equipment, o	or other asse	ets					1b(3)		X	_
	(4) Reimbu	rsement arrangements							1b(4)		X	_
	(5) Loans o	r loan guarantees							1b(5)		X	_
	(6) Perform	ance of services or mer	nbership or	fundraising solicitations					1b(6)		X	_
C	Shanng of fa	acılıtıes, equipment, mai	ling lists, oth	er assets, or paid employees					1c		X	_
d		-		lete the following schedule Colum								
	value of the	goods, other assets, or	services giv	en by the reporting foundation. If the	ne found	lation received less	s than fair mai	rket				
		transaction or sharing a	he good	•						_		
	(a) Line no	(b) Amount involved	(c) Name	of noncharitable exempt organization	-	(d) Description of tra	insfers, transact	ions, and	sharing arrange	ments		-
N/	<u> </u>											-
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2a	Is the found:	ation directly or indirect	v affiliated w	rith, or related to, one or more tax-	exempt	organizations						-
			-	nan section 501(c)(3)) or in section		organizationo			☐ Y	es X	) No	
b		nplete the following sch	•	14.1 000a011 00 1(0)(0)/ 01 111 000a01	, VI				·		,	
		Name of organization		(b) Type of organization		(1	c) Description o	f relations	hip			-
	N/A	<del></del>					· · · · · · · · · · · · · · · · · · ·					-
	•											_
							,					_
												_
												_
	Under penaltie	es of perjury I declare that	I have examın	ed this return, including accompanying s	chedules	and statements, and	to the best of n	y knowled	dge and			
	belief, it is true	e, correct, and complete Di	eclaration of p	reparer (other than taxpayer or fiduciary	)ıs <b>∖</b> basec	on all information of	which preparer	has any k	nowledge			
				11/	10/19	<u> </u>						_
<u>e</u>	Signature	of officer or trustee		Date	, , , , , , , ,	Tı	tle					_
훈			-			Date			Preparer's identifi number (see Sig		nn.	
<u>_</u>	ع م ا P	reparer's					Check if self-employed	▶ X	page 30 of the in	struction	ıs)	
Sign Here	Paid Preparer's Use Only	gnature Meyer		enzahl, CPA	-	11/02/10			P00151	.608	3	_
-	Pa epa se t	rm's name (or yours if		M. Nebenzahl, CP	A						_	
								EIN ▶	11-295			_
	ar	nd ZIP code	Brook	lyn, NY 11230				Phone no				_
									Form 99	O-PF	(2009)	۸

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

Department of the Treasury Internal Revenue Service

Name of the organization

Moshe & Simi Mehlman Charitable Fou

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

**Employer identification number** 

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

20-8001594 Foundation, Inc. Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt chantable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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, \$5,000 or moré (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization 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), and received from any one contributor, during the year, a contribution 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 П For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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 Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year **▶** \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

for Form 990, 990-EZ, or 990-PF.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

Employer identification number 20-8001594

Moshe & Simi Mehlman Charitable Fou

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Moshe Mehlman 1111 East 26th Street Brooklyn NY 11210	\$ 50,000	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	••	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization **Employer identification number** Moshe & Simi Mehlman Charitable Fou 20-8001594 Part II Noncash Property (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 3.8727% Homewood Gardens LLC 1 50,000 01/15/09 \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (a) No. (c) (b) (d) FMV (or estimate) from **Date received** Description of noncash property given Part I (see instructions) \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given **Date received** Part I (see instructions) \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I

\$

20-8001594		Federal Statements	atements				$\overline{}$
	Form 9	Form 990-PF, Part I, Line 6a - Sale of Assets	ne 6a - Sale of	Assets		,	T .
Description		How Received					
Whom Date Sold Acquired	Date Sold	Sale Price	Cost	Expense	nse Depreciation	Net Siation Gain / Loss	
3.8727% Homewood Gardens LLC 1/15/09	1/28/09 \$	Purchase 50,000 \$	50,000	₩.	w.	w.	
Total	<sub>v</sub>	\$ 000'05	50,000	w	\$ 0	\$ 0	
	Statement 1 - Fo	Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	t I, Line 16b - A	ccounting	Fees		
Description		Total	Net Investment		Adjusted Net	Charitable Purpose	
Indirect Accounting Fees	     	700	· Λ			₩.	
Total	₩.	700	Ş	0	\$	۵ 0	
	Statement		2 - Form 990-PF, Part I, Line 18 - Taxes	8 - Taxes			
Description		Total	Net Investment	_	Adjusted Net	Charitable Purpose	
Excise tax	ا پ	20	w	· ••·		s	-
Total	w.	20	w	°	\$	w O	
	Statement 3 - F	Form 990-PF, Pa	Part I, Line 23 - Other Expenses	ther Exper	ses		
Description		Total	Net Investment		Adjusted Net	Charitable Purpose	
	     		₩.	· &-		w	
Expenses Fees Bank Charges		60 14		14	14		
Total	w	74	₩.		\$ 14	\$	
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20-8001594

Statement 4 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year
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Name	Address			
Address	Relationship	Status	Purpose	Amount
Amer Kollel Shomrei Simch	24 Engleberg Terrrace	וליים היוליים	General Omerations	600
Cong Shaarei Elizer	1880 New York Avenue		General Operacions	000 'H
Brooklyn NY 11210		Public	General Operations	1,500
Keren Aniyim	80 Broad Street, Flr	Flr 29	1	
New York NY 10004		Public	General Operations	2,300
Keren Refuah Shlema	POB 449			
Brooklyn NY 11230		Public	General Operations	6,100
Keren Yisroel Mordechai	1102 East 26th Stree	eet		
Brooklyn NY 11210		Public	General Operations	1,000
Khal Zichron Avrohom Yaak	298 Dahill Road		ı	
Brooklyn NY 11218		Public	General Operations	3,316
Masores Bais Yaakov	1395 Ocean Avenue		1	
Brooklyn NY 11230		Public	General Operations	5,180
TAT Mirrer Yeshiva	1791 Ocean Parkway			
Brooklyn NY 11223	•	Public	General Operations	1,250
Tiferes Devorah L'Kallah	1415 Willow Court			
Lakewood NJ 08701		Public	General Operations	1,105
Yad Eliezer	1102 East 26th Stree	eet		
Brooklyn NY 11210		Public	General Operations	2,250
Yeshiva Ktana of Bensonhu	2025 67th Street			
Brooklyn NY 11204		Public	General Operations	1,000
Yeshivas Mir Yerushalayim	5114 13th Avenue			
Brooklyn NY 11219		Public	General Operations	1,000
Various Contributions	less than \$1,000			
		Public	General Operations	42,789
Total				062,790

Form 8868 (Re	ev 4-2009)				Page 2
<ul><li>If you are f</li></ul>	filing for an Additional (Not Automatic) 3-Month Extension, complete o	nly Part II and ch	eck this box		► X
Note. Only con	nplete Part II if you have already been granted an automatic 3-month exter	nsion on a previou	ısly filed Form 8	8868	
	iling for an Automatic 3-Month Extension, complete only Part I				
Part II	Additional (Not Automatic) 3-Month Extension of Time	Only file the	original (no	o copies	needed).
Type or	Name of Exempt Organization			Employ	er identification number
print	Moshe & Simi Mehlman Charitable For	uį	A 124 1		
File by the	Foundation, Inc.	ļ	1 (12.74 (24)		001594
extended due date for	Number, street, and room or suite no If a P O box, see instructions		*****	For IRS	use only
filing the	1379 Coney Island Avenue	<u> </u>	323	60 JA wy	fine to the first of
return See instructions	City, town or post office, state, and ZIP code For a foreign address, see	instructions		1 2 1	
	Brooklyn NY 11230	1	1 ti	*	
	return to be filed (File a separate application for each return)	П.	1011 1		П coco
Form 99	H · · · · · · · · · · · · · · · · · · ·	. —	orm 1041-A		Form 6069
Form 99		. ⊢	orm 4720		Form 8870
Form 99	0-EZ Form 990-T (trust other than above) complete Part II if you were not already granted an automatic 3-mon	<del></del>	orm 5227 a previously fil	ed Form	8868
	are in the care of Meyer M. Nebenzahl, CPA		a proviously in	ea i oiin	
Telephone					
•	nization does not have an office or place of business in the United States,	chack this hav			▶ □
=	r a Group Return, enter the organization's four digit Group Exemption Num	1	If th	IS IS	<b>"</b>
	roup, check this box	1		is is and attach	2
_	mes and EINs of all members the extension is for	CK (IIIS DOX		anu allach	d
	t an additional 3-month extension of time until 11/15/10	1			
•	ndar year 2009 , or other tax year beginning	, and ending			
	x year is for less than 12 months, check reason Initial return	Final return	Change	ın account	ing period
	detail why you need the extension		Change	iii account	ing period
	ing for information from third part	which i	s neede	d to	complete the
retu	· · · · · · · · · · · · · · · · · · ·	y which i	.s neede	a co	complete the
2004	• •	1	-		
8a if this ap	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tenta	tive tax.			
	nonrefundable credits See instructions	,		8a	s 5
	plication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable of	redits and		150	
•	d tax payments made Include any prior year overpayment allowed as a ci			\$ -	
	paid previously with Form 8868			8b	\$ 7
	Due. Subtract line 8b from line 8a Include your payment with this form, o	r, if required, depo	osit		
	coupon or, if required, by using EFTPS (Electronic Federal Tax Payment			8c	\$ C
	Signature and Ver				
	of perjury, I declare that I have examined this form, including accompanying schedules	i and statements, an	d to the best of my	y knowledge	and belief,
it is true, correct,	and complete, and that I am authorized to prepare this form				
Signature •	Title ▶				Date ▶ 07/29/10
					Form <b>8868</b> (Rev 4-2009)
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Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Form **8868** (Rev 4-2009)

internal Rever	ne Service			
<ul><li>If you ar</li></ul>	e filing for an Automatic 3-Month Extension, complete only Part I and check this box			► X
If you ar	e filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form	)		
Do not com	plete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form	n 8868_		
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).			
A corporatio	n required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete			▶ □
	porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extensione tax returns	sion of		_
Electronic F	Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of tin	ne to file		
	turns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 886			
electronically	r if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870,	group		
returns, or a	composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Part	II) of Fon	m	
8868 Form	ore details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofil	ts.		
Type or	Name of Exempt Organization	Employ	er identification num	ber
print	Moshe & Simi Mehlman Charitable			
File by the	Foundation, Inc.	20-8	001594	
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, see instructions  1379 Coney Island Avenue			
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions  Brooklyn NY 11230			<del></del>
	of return to be filed (file a separate application for each return)			
Form			Form 4720	
$\vdash$	990-BL Form 990-T (sec 401(a) or 408(a) trust)		Form 5227	
<del></del>	990-EZ Form 990-T (trust other than above)		Form 6069	
<b>X</b> Form	990-PF		☐ Form 8870	
Telepho  If the org  If this is  for the whole  a list with the  1 I requ  until	ks are in the care of ▶ Meyer M. Nebenzahl, CPA  The No ▶ 718-377-7870  It is for part of the group, is check this box  The group, check this box  The extension will cover  The extension is corganization's return for  The extension is calendar year 2009  The extension is and ending	If this is attach		▶ □
2 If this		n account	ing period	
3a If this	application is for Form 990 BL 990 BE 990 T 4720 or 6060 colorate tradition			
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, by nonrefundable credits. See instructions	3-	•	<b>E</b>
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax	3a	\$	5
	ents made Include any prior year overpayment allowed as a credit	3ь	•	7
	ce Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	31,754	\$	
	it with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment	4.75.7		
	n) See instructions	તેક કેટેડ 3c		0
	rou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-E		•	0
for payment		_0		
For Privacy	Act and Paperwork Reduction Act Notice, see Instructions.		Form <b>8868</b> (Re	v 4-2000