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# Form **990-PF**

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

OMB No 1545-0052

2010

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 calendar year 2010, or tax year beginning , 2010, and ending ,									
G Che	eck all that apply   Initial return   Init	ial Return of a former p	oublic charity	Fin.	al return				
	Amended return	X Address	change Name	change					
	<u></u>	155 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A	Employer identification nui	mber				
DRAL	LA FOUNDATION INC.		, ,	26-3944967					
	FORGE WAY #3		В	Telephone number (see the	instructions)				
	AWAY, NJ 07866		6	,	instructions)				
110014	111111111111111111111111111111111111111	<u> </u>	973-983-0123						
			C	If exemption application is	· -				
				1 Foreign organizations, ched					
<b>н</b> б		1(c)(3) exempt private f		2 Foreign organizations meet	ing the 85% test, check				
	Section 4947(a)(1) nonexempt charitable		private foundation	here and attach computation  If private foundation status					
	air market value of all assets at end of year   J   Acc	counting method X C	ash Accrual	under section 507(b)(1)(A)					
(7)	from Part II, column (c), line 16)	Other (specify)	F	If the foundation is in a 60					
\$		, column (d) must be or	n cash basis )	under section 507(b)(1)(B)	, check here				
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements				
	Expenses (The total of amounts in	expenses per books	income	income	for charitable				
	columns (b), (c), and (d) may not neces-				purposes				
	sarily equal the amounts in column (a) (see the instructions)				(cash basis only)				
	1 Contributions, gifts, grants, etc, received (att sch)			†					
ĺ	2 Ck ► X if the foundn is not req to att Sch B		<u> </u>						
	3 Interest on savings and temporary			† · · · · · · · · · · · · · · · · · · ·	, ,				
	cash investments								
ļ	4 Dividends and interest from securities			ļ <u> </u>					
	5a Gross rents		· · · · · · · · · · · · · · · · · · ·	<u> </u>					
	<b>b</b> Net rental income or (loss)			ļ					
R E V	6a Net gain/(loss) from sale of assets not on line 10								
V	<b>b</b> Gross sales price for all assets on line 6a								
Ě N	7 Capital gain net income (from Part IV, line 2)			J					
N	8 Net short-term capital gain								
	9 Income modifications			<u> </u>					
8	10 a Gross sales less returns and			1	,				
લ્થ	allowances h Less Cost of	<del></del>	<del></del>	<del> </del>					
₩	goods sold				<u> </u>				
<b>&gt;</b>	c Gross profit/(loss) (att sch)				· · · · · · · · · · · · · · · · · · ·				
MAY	11 Other income (attach schedule)								
					'				
	12 Total. Add lines 1 through 11	0.	0.	0.					
SCANNE	13 Compensation of officers, directors, trustees, etc	0.							
Z	14 Other employee salaries and wages			<del> </del>					
<₹	15 Pension plans, employee benefits								
ÇA	16a Legal fees (attach schedule)								
W.W	<b>b</b> Accounting fees (attach sch)		RE						
N	c Other prof fees (attach sch)	ļ <u> </u>	9	CIVER					
O S T R	17 Interest		<del>  / φ/ ,  </del>	1 - LU ]					
E T	18 Taxes (attach schedule)(see instr.)		W/ MAY 0	70/					
A A	19 Depreciation (attach sch) and depletion	!		2011 8	!				
1 1	20 Occupancy		1 Och	10/					
N V	21 Travel, conferences, and meetings		<del></del>						
A E	22 Printing and publications				<del></del>				
A E I	23 Other expenses (attach schedule)								
E	(2.1.2.1.2.1.2.1.2.1.2.1.2.1.2.1.2.1.2.1								
<u>s</u>	24 Total operating and administrative				<u> </u>				
S	expenses. Add lines 13 through 23			<u> </u>					
	25 Contributions, gifts, grants paid STMT 1	750.			750.				
	26 Total expenses and disbursements. Add lines 24 and 25			_					
	Add lines 24 and 25	750.	0.	0.	750.				
	27 Subtract line 26 from line 12:			٧.,	!				
	a Excess of revenue over expenses and disbursements.	-750.	,	.					
	b Net investment income (if negative, enter -0 ).	<del></del>	0.	<del> </del>					
	C Adjusted net income (if negative, enter 0)		· · · · · · · · · · · · · · · · · · ·	0.					
	a majustea net income (ii negative, chici o )	<u> </u>		<u> </u>	<u> </u>				

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Dar	+ 11	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	<u>End</u>	of year
1 01		Dalance Sheets	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing	14,400.	13,650.	13,650.
	2	Savings and tempora	ary cash investments			
	3	Accounts receivable	<b>.</b>			
	1	Less allowance for	doubtful accounts			
	4	Pledges receivable	<b>*</b>			
		Less allowance for	doubtful accounts			
	5	Grants receivable				
	6	Receivables due from offic	ers, directors, trustees, and other			
		disqualified persons (attac	ch schedule) (see the instructions)			
_	7	Other notes and loans rece	eivable (attach sch). 🕨			
A S		Less allowance for	doubtful accounts ►			
š	8	Inventories for sale of	or use			
A S E T	9	Prepaid expenses ar	nd deferred charges			
Ś	10	a Investments – U S obligations (attach s	and state government chedule)			
		b Investments — corporate :	stock (attach schedule)			
	,	c Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment basis	buildings, and			,
		Less accumulated deprec (attach schedule)	▶			
	12	Investments - morto	gage loans			
	13	Investments - other	(attach schedule)			
	14	Land, buildings, and e	quipment basis 🛌			
		Less accumulated depreci (attach schedule)	ation •			
		Other assets (descri				
	16	see instructions. Als	completed by all filers – o, see page 1, item I)	14,400.	13,650.	13,650.
Ļ	17	, ,	nd accrued expenses	<u></u>		1
À	18	Grants payable		h		į
В	19	Deferred revenue		ļ		1
Ĺ	20	•	tors, trustees, & other disqualified persons	<u> </u>		
T T	21		s payable (attach schedule)			1
ı	22	Other liabilities (descr	ibe)			
E S	23	Total liabilities (add	lines 17 through 22)	0.	0.	1,
		Foundations that fo	llow SFAS 117, check here X24 through 26 and lines 30 and 31.			1
NF	24	Unrestricted		14,400.	13,650.	1
Ë U T N	25	Temporarily restricte	ed I	, , , , , , , , , , , , , , , , , , , ,	· · · · · ·	1
D	26	Permanently restrict	ed			
A B A L A		<del>-</del>	not follow SFAS 117, check here			1
EL	27	Capital stock, trust of	irincipal, or current funds	]		1
SN	28		or land, building, and equipment fund			1
O E	29		ulated income, endowment, or other funds			1 :
RS	30	• .	und balances (see the instructions)	14,400.	13,650.	1
	31	Total liabilities and (see the instructions	net assets/fund balances )	14,400.	13,650.	
Par	t III	Analysis of Chan	ges in Net Assets or Fund Balanc	es		
1	Tota end-	I net assets or fund ba of-year figure reported	alances at beginning of year – Part II, colu d on prior year's return)	umn (a), line 30 (must a	gree with	14,400.
2		r amount from Part I,	· · · · · · · · · · · · · · · · · · ·		2	-750.
3	Other	increases not included in lii	ne 2 (itemize)		3	
4	Add	lines 1, 2, and 3			4	13,650.
5	Decre	ases not included in line 2 (	itemize)	. <b></b>	5	
6	Tota	I net_assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), I	ine 30 <b>6</b>	13,650.

(a) List and descri	LOSSES FOR TAX ON INVESTMENT be the kind(s) of property sold (e.g., rouse, or common stock, 200 shares ML	eal estate.	(b) How acquire P — Purchase D — Donation	(month, day, year)	(d) Date sold (month, day, year
la N/A			D — Donation		
b		<del></del>			
d	<del></del>			<del></del>	<del></del>
<del>`</del>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa	sis le	(h) Gain or (e) plus (f) m	
a					
ь					
c					
d					
e					
Complete only for assets sho	wing gain in column (h) and owned by			(I) Gains (Col	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		gain minus column (l than -0-) <b>or</b> Losses (fr	
a					
b				··	
<del>c</del>	<u> </u>				
_ d		<del> </del>			
_ <del>e</del>		<del></del>		1	
2 Capital gain net income or (r	net capital loss) — If gain, also If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	. 2		
3 Net short-term capital gain of	r (loss) as defined in sections 1222(5)	and (6)			
If gain, also enter in Part I, li in Part I, line 8	ne 8, column (c) (see the instructions)	If (loss), enter -0-	.		
Part V Qualification Und	er Section 4940(e) for Reduce	d Tax on Net Investme	ent Income	<u> </u>	
'Yes,' the foundation does not qu	ection 4942 tax on the distributable am alify under section 4940(e) Do not co	mplete this part	· <del></del>	Yes	No
<del></del>	t in each column for each year, see th		g arry entries	(4)	
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets (c	<b>(d)</b> Distribution olumn (b) divided	
2009					
2008					
2007					
2006					
2005					
				_	
2 Total of line 1, column (d) 3 Average distribution ratio for	the Europe has a second of the Police	tal on line 2 hit E are hit iii	2	!	
3 Average distribution ratio for number of years the foundati	the 5-year base period — divide the to on has been in existence if less than 5	years	3	<u> </u>	
4 Enter the net value of noncha	aritable-use assets for 2010 from Part	X, line 5	4		
5 Multiply line 4 by line 3				;	
6 Enter 1% of net investment ii	ncome (1% of Part I, line 27b)		_6		<del> </del>
7 Add lines 5 and 6			7	,	
8 Enter qualifying distributions	from Part XII, line 4		_ 8		
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI,	line 1b, and complete that	part using a	% tax rate See the	ne

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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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

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charitable purposes?

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3 b

4 a

N/A

determine if the foundation had excess business holdings in 2010)

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

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 2010?

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Part VII-B   Statements Regarding Activit	ies for Which Form	1 4720 May Be Requ	uired (continued)	
5a Quring the year did the foundation pay or incu	=			
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	on (section 4945(e))?	Yes X	No 2
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	1 4955), or to carry	Yes X	No
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes	No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	No			
(5) Provide for any purpose other than religio educational purposes, or for the prevention	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	a current notice regard	ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistant	ce check here	▶ _	]
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A Yes	No
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5-5(d)		
6a Did the foundation, during the year, receive as on a personal benefit contract?			∐Yes [X	No
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	ctly, on a personal bene	rit contract/	6b X
<b>7a</b> At any time during the tax year, was the found	tation a party to a prob	whited tax shelter transa	ction? Yes X	No
<b>b</b> If yes, did the foundation receive any proceed	, , ,			7b
Part VIII Information About Officers, D				
and Contractors	, ,	•	, , , ,	,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CAROL HIEMSTRA-PAEZ	PRESIDENT	0.	0.	0.
21 PINE ST STE 120	0			
ROCKAWAY, NJ 07866			· · ·	
PETER ALLARD	TREASURER	0.	0.	0.
21 PINE ST STE 120	0			1
ROCKAWAY, NJ 07866			<del></del>	
_BETH_DELORIA	SECRETARY	0.	0.	0.
21 PINE ST STE 120	0			
ROCKAWAY, NJ 07866				
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1— see in	estructions) If none e	nter 'NONE '
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position	(e) compensation	employee benefit plans and deferred compensation	other allowances
NONE				
			<del></del>	
Total number of other employees paid over \$50,000			<b>•</b>	
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and Contractors (continued)	
3 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	
	<u> </u>
	***
Total number of others receiving over \$50,000 for professional services	0
	<u>_</u>
RandX: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.	Expenses
1 N/A	
	-
2	-
	-
3	-
	-
4	<del> </del>
	<u> </u>
Part IX:B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>N/A</u>	-
	-
2	
	_
All other program related investments. See instructions	<del> </del>
All other program-related investments See instructions  3	
3	
	0.
Total. Add lines 1 through 3	<b>≻</b> l

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Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Qualifying distributions** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)

Adjusted qualifying distributions. Subtract line 5 from line 4

**b** Cash distribution test (attach the required schedule)

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

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750.

750.

3a 3b

4

5

6

#### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	<b>(c)</b> 2009	<b>(d)</b> 2010
1 Distributable amount for 2010 from Part XI,				704.
2 Undistributed income, if any, as of the end of 2010				704.
a Enter amount for 2009 only			59.	
<b>b</b> Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2010				
<b>a</b> From 2005				
<b>b</b> From 2006				
¢ From 2007				
<b>d</b> From 2008				
<b>e</b> From 2009.	-	,		
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from Part		i i		
XII, line 4 ► \$			Γ0	
a Applied to 2009, but not more than line 2a	<del>-</del>		59.	
<b>b</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 2010 distributable amount				691.
Remaining amount distributed out of corpus	0.			0321
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the				<del></del>
same amount must be shown in column (a) )				
6 Enter the net total of each column as				
indicated below:				1
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency				
has been issued, or on which the section		•		
4942(a) tax has been previously assessed		0.	<u></u>	
d Subtract line 6c from line 6b Taxable		0.		
amount – see instructions				
e Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount — see instructions		1	0.	
ille 2a Taxable alliquit — See histructions			0.	
f Undistributed income for 2010 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2011.				13.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.	:		
8 Excess distributions carryover from 2005 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a				
	0.	<del></del>		<del></del>
10 Analysis of line 9				
a Excess from 2006				
<b>b</b> Excess from 2007	,	l '		
c Excess from 2008.				
d Excess from 2009				
e Excess from 2010				Form 000 PF (2010)

Form 990-PF (2010) DRALLA FOUNDATION			<del></del>	26-394496						
Pain N/A Private Operating Foundations (see instructions and Part VII-A, question 9) N/A										
1 a If the foundation has received a ruling or one is effective for 2010, enter the date of the	ruling									
<b>b</b> Check box to indicate whether the foundate		rating foundation of		4942(j)(3) or	4942(j)(5)					
2a Enter the lesser of the adjusted net	Tax year	ļ	Prior 3 years							
income from Part I or the minimum investment return from Part X for each year listed	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total					
<b>b</b> 85% of line 2a										
c Qualifying distributions from Part XII, line 4 for each year listed										
d Amounts included in line 2c not used directly for active conduct of exempt activities										
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>										
3 Complete 3a, b, or c for the alternative test relied upon										
a 'Assets' alternative test — enter										
(1) Value of all assets										
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)										
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed										
c '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)										
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)										
(3) Largest amount of support from an exempt organization										
(4) Gross investment income										
Part Supplementary Information assets at any time during th	(Complete this e year – see in	part only if the structions.)	organization ha	nd \$5,000 or mor	e in					
Information Regarding Foundation Managers a List any managers of the foundation who is close of any tax year (but only if they have NONE)	nave contributed me	ore than 2% of the than \$5,000) (See	total contributions r section 507(d)(2))	eceived by the found	dation before the					
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more o foundation has a 1	f the stock of a cor 0% or greater inter	poration (or an equ est	ally large portion of	the ownership of					
2 Information Regarding Contribution, Gran Check here ► X if the foundation only n requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected cha	ırıtable organızatıon							
a The name, address, and telephone number	r of the person to	whom applications	should be addresse	d						
<b>b</b> The form in which applications should be s	submitted and infor	mation and materia	als they should inclu	de						
c Any submission deadlines										
<b>d</b> Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	ble fields, kinds of i	nstitutions, or other	factors					

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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 or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount						
Name and address (home or business)	substantial contributor	recipient	Contribution							
a Paid during the year										
Total	T		<u>► 3a</u>							
<b>b</b> Approved for future payment										
Total			_ <b>&gt;</b> 3b	·						

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income	Evaluded by	Excluded by section 512, 513, or 514				
•	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (see the instructions)			
1 Program service revenue	<b> </b>		code					
a	<del>                                     </del>		<del>  </del>					
b	<del> </del>		<del></del>					
cd	<del>                                     </del>		<del>- </del>	<del></del>				
_ <del></del>	<del>                                     </del>		+	······································	<del></del>			
e	<del>                                     </del>		<del> </del>		-			
g Fees and contracts from government agencies	+		<del> </del>					
2 Membership dues and assessments			+					
3 Interest on savings and temporary cash investments		<del></del>		<del></del>	<del></del>			
4 Dividends and interest from securities				<del></del>				
5 Net rental income or (loss) from real estate								
a Debt-financed property								
<b>b</b> Not debt-financed property								
6 Net rental income or (loss) from personal property								
7 Other investment income			<u> </u>					
8 Gain or (loss) from sales of assets other than inventory				<del></del>				
9 Net income or (loss) from special events			<b></b>		<u> </u>			
10 Gross profit or (loss) from sales of inventory					<del> </del>			
11 Other revenue	-				<u> </u>			
a	<del> </del>		<del> </del>		<del></del>			
b	++	<del> </del>	+		<del></del>			
c	+							
d			+					
^								
e	<del> </del>		++	<del></del>	<del></del>			
12 Subtotal Add columns (b), (d), and (e)				13	0.			
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	ons )			13	0.			
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculate		hmont of Even	nt Purnos		0.			
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the	e Accomplis			es				
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activities to the	e Accomplis			es				
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# Form 990-PF (2010) DRALLA FOUNDATION INC. 26-3944967 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

															Yes	No
(	describe	organization dired d in section 501( to political organ	(c) of the	Code (oth	gage in a ier than :	any of th section 5	e followii 501(c)(3)	ng witl organ	h any otl izations)	her organiza ) or in section	ation on 527,					
	-	s from the report			noncha	ritable ex	xempt or	ganıza	ition of				ł			1
	1) Cast	•	<b>J</b>					•					[~	1a (1)		X
•		er assets											F	1a (2)		X
•	•	nsactions												<u> </u>		
		s of assets to a	nonchari	itable exem	not organ	nization								1b (1)		X
		hases of assets					zation							1 b (2)		X
,		al of facilities, ed												1b (3)		X
•		nbursement arrar		•										1b (4)		X
•		is or loan quarar	•										-	1b (5)	-	_ <del>X</del> _
•		ormance of servi		nembershin	or fund	raising s	olicitation	าร					<u> </u>	1b (6)	-	<u>X</u>
		of facilities, equi		•		_			29.0				-	1c		X
	Jilai ii ig	or idemites, equi	pincin, i	noming note	s, other t	200013, 0	n paid on	p.o.y.c	.00				L			
t	he good	swer to any of this, other assets, saction or sharin	or service	es given by	y the rep	ortina fo	ounďation	) If the	e founda	ition receive	d less t	han fair	market	arket val value in	ue of	
(a) Lin		(b) Amount involved		(c) Name of				$\overline{}$		Description of				arıng arrar	ngement	s
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2a	s the foi	undation directly d in section 501(	or indire c) of the	ectly affiliate Code (other	ed with,	or relate Section 5	ed to, one	e or m	ore tax-	exempt orga 5272	inizatio	ns		∏Yes	X	No
		complete the foll	. ,	•	CI (IIIII)	300(1011 3	, <b>01</b> (0)(0))	, 0,	30000011	<b>JL</b> 7					41	110
<u> </u>		Name of organia		Inedule		1) Type o	of organiz	zation			(c) De	scription	of relati	ionshin		
I/A	(a)	Traine of organia	zation			y Type o	71 Organiz	201011			(c) De.	scription	OI TEIALI	ionamp		
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	correct.	enaities of perjury, I de and complete Declara	eciare that ation of prej	parer (other tha	an ta <del>xpa</del> yer	r or fiduciary	y) is based	on all in	formation o	of which prepare	r has any	knowledge	iowiedge a	and belief, f	is irue,	
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		Print/Type preparer's	s name		Pr	parer's sign	natu	$\lambda$		Date /	2/-	Check if	ıf F	PTIN	_	
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	2101	Firm's name	•	LAMANNA,	DEQ(%					· // V ~	<del>///</del>	s EIN - N				
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se (	Only	Firm's address		LLE, NJ (		<u> </u>	<del>/                                    </del>				Phon	e no	(973) 98	83-8880		
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2010

#### FEDERAL STATEMENTS

PAGE 1

DRALLA FOUNDATION INC.

26-3944967

250.

STATEMENT 1 FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS** 

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

RELATIONSHIP OF DONEE:

CLASS OF ACTIVITY:

DONEE'S ADDRESS:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

DONEE'S NAME:

RESEARCH FOUNDATION

MUSCULAR DYSTROPHY ASSOCIATION 24 EAST SPRING VALLEY AVENUE MAYWOOD, NJ 07607

NONE

RESEARCH FOUNDATION

CAMP FOR KIDS VICTORY JUNCTION 4500 ADAMS WAY

RANDLEMAN, NC 27317

NONE

FAMILY SERVICES

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

500.

750. TOTAL \$

\$

STATEMENT 2 FORM 990-PF, PART VII-A, LINE 8B **COPIES OF FORM 990-PF TO STATE OFFICIALS** 

NOT REQUIRED