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Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0052
2010

For calendar year 2010, or tax year beginning 10-01-2010 , and ending 09-30-2011

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

Name of foundation
MASADA FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)
C/O R KIRSCHNER 137-05 72ND ROAD

City or town, state, and ZIP code
FLUSHING, NY 11367

A Employer identification number
16-1622664

B Telephone number (see page 10 of the instructions)
(718) 762-8700

C If exemption application is pending, check here ☐
D 1. Foreign organizations, check here ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ☐
E If private foundation status was terminated under section 507(b)(1)(A), check here ☐
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

H Check type of organization ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)☒ \$ 119,815

J Accounting method ☒ Cash ☐ Accrual
☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	924,998			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	302	302		
	4 Dividends and interest from securities.				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV , line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	925,300	302	0	
	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see page 14 of the instructions)				
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	0	0	0	0
	25 Contributions, gifts, grants paid	921,361			921,361
	26 Total expenses and disbursements. Add lines 24 and 25	921,361	0	0	921,361
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	3,939			
	b Net investment income (if negative, enter -0-)		302		
	c Adjusted net income (if negative, enter -0-)			0	

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

Cat No 11289X

Form **990-PF** (2010)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	115,876	119,815	119,815
	2	Savings and temporary cash investments			
	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 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	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 I)	115,876	119,815	119,815	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)	3,904	3,904	
	23	Total liabilities (add lines 17 through 22)	3,904	3,904	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	111,972	115,911	
	30	Total net assets or fund balances (see page 17 of the instructions)	111,972	115,911	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	115,876	119,815	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1	111,972
2	Enter amount from Part I, line 27a	2	3,939
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	115,911
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	115,911

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss) <div>If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7</div>			2	
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	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If “Yes,” the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2009	52,865	53,199	0 993722
2008	1,324,613	381,905	3 468436
2007	2,129,378	754,772	2 821220
2006	1,928,436	930,785	2 071838
2005	452,852	24,334	18 609846
2 Total of line 1, column (d).			2 27 965062
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 5 593012
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5.			4 121,022
5 Multiply line 4 by line 3.			5 676,877
6 Enter 1% of net investment income (1% of Part I, line 27b).			6 3
7 Add lines 5 and 6.			7 676,880
8 Enter qualifying distributions from Part XII, line 4.			8 921,361
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions on page 18			

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)			
1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	3
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0
3 Add lines 1 and 2.		3	3
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	3
6 Credits/Payments			
a	2010 estimated tax payments and 2009 overpayment credited to 2010	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7 Total credits and payments Add lines 6a through 6d.		7	0
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> 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		9	3
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10	
11 Enter the amount of line 10 to be Credited to 2011 estimated tax <input checked="" type="checkbox"/> Refunded <input type="checkbox"/>		11	

Part VII-A Statements Regarding Activities			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			Yes No
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)? 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.		1a 1b	No No
c Did the foundation file Form 1120-POL for this year?		1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input checked="" type="checkbox"/> \$ 0 (2) On foundation managers <input checked="" type="checkbox"/> \$ 0			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input checked="" type="checkbox"/> \$ 0			
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.		2	No
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	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	No
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? If "Yes," attach the statement required by General Instruction T.		5	No
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	Yes
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	Yes
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input checked="" type="checkbox"/> NY			
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	Yes
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV		9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10	No

Part 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		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of RICHARD KIRSCHNER Telephone no (718) 762-8700 Located at 137-05 72ND ROAD FLUSHING NY ZIP+4 11367			
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.			
16	At any time during calendar year 2010, 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?	15		
See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country.		16		No

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.			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? (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? (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 page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here.	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the 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?			
b	If "Yes," did it have excess business holdings in 2010 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 the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a

During the year did the foundation pay or incur any amount to

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes

No

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes

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 than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions).

Yes

No

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes

No

5b

If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here.

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).

Yes

No

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.

6b

No

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes

No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(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
RICHARD KIRSCHNER 137-05 72ND ROAD FLUSHING, NY 11367	PRESIDENT/DIRECTOR 0 50	0	0	0
RACHELLE KIRSCHNER 137-05 72ND ROAD FLUSHING, NY 11367	TREASURER/DIRECTOR 0 50	0	0	0
STANLEY FLEISHMAN 98 RYE RIDGE ROAD HARRISON, NY 10528	SECRETARY/DIRECTOR 0 50	0	0	0

2

Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total

number of other employees paid over \$50,000.

0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of the 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.		0

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	Expenses
1 CONTRIBUTIONS & GRANTS PAID	921,361
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see page 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	
2	
All other program-related investments. See page 24 of the instructions	
3	
Total. Add lines 1 through 3.	0

Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

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	0
b	Average of monthly cash balances.	1b	122,865
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	122,865
e	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	122,865
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions).	4	1,843
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	121,022
6	Minimum investment return. Enter 5% of line 5.	6	6,051

Part XI

Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	6,051
2a	Tax on investment income for 2010 from Part VI, line 5.	2a	3
b	Income tax for 2010 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	3
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	6,048
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	6,048
6	Deduction from distributable amount (see page 25 of the instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	6,048

Part XII

Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	921,361
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	921,361
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 page 26 of the instructions).	5	3
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	921,358
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			

Part XIII

Undistributed Income (see page 26 of the instructions)

		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7					6,048
2 Undistributed income, if any, as of the end of 2010					
a Enter amount for 2009 only.				0	
b Total for prior years 2008 , 2007 , 2006			0		
3 Excess distributions carryover, if any, to 2010					
a From 2005.	451,635				
b From 2006.	1,928,842				
c From 2007.	2,091,880				
d From 2008.	1,306,041				
e From 2009.	50,205				
f Total of lines 3a through e.		5,828,603			
4 Qualifying distributions for 2010 from Part XII, line 4 ▶ \$ 921,361					
a Applied to 2009, but not more than line 2a				0	
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)			0		
c Treated as distributions out of corpus (Election required—see page 26 of the instructions). . .		0			
d Applied to 2010 distributable amount.					6,048
e Remaining amount distributed out of corpus		915,313			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)		0			0
6 Enter the net total of each column as indicated below:					
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		6,743,916			
b Prior years' undistributed income Subtract line 4b from line 2b.			0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.			0		
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions . . .			0		
e Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				0	
f Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011					0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)		0			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions)		451,635			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a		6,292,281			
10 Analysis of line 9					
a Excess from 2006.	1,928,842				
b Excess from 2007.	2,091,880				
c Excess from 2008.	1,306,041				
d Excess from 2009.	50,205				
e Excess from 2010.	915,313				

Part XIV

Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
		(a) 2010	(b) 2009	(c) 2008	(d) 2007	
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					
e	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					
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 XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

RICHARD KIRSCHNER

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number of the person to whom applications should be addressed

b

The form in which applications should be submitted and information and materials they should include

c

Any submission deadlines

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			▶ 3a	921,361
b Approved for future payment				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions on page 28 to verify calculations)

Form **990-PF** (2010)

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a

Transfers from the reporting foundation to a noncharitable exempt organization of

1

Cash.

1a(1)

No

2

Other assets.

1a(2)

No

b

Other transactions

1

Sales of assets to a noncharitable exempt organization.

1b(1)

No

2

Purchases of assets from a noncharitable exempt organization.

1b(2)

No

3

Rental of facilities, equipment, or other assets.

1b(3)

No

4

Reimbursement arrangements.

1b(4)

No

5

Loans or loan guarantees.

1b(5)

No

6

Performance of services or membership or fundraising solicitations.

1b(6)

No

c

Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

1c

No

d

If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a

Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐

Yes

☒

No

b

If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
--------------------------	--------------------------	---------------------------------

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

2011-11-29

Date

Title

Paid Preparer's Use Only

Preparer's Signature

ALAN YATES CPA

Date

2011-11-28

Check if self-employed ☐

PTIN

Firm's name

NUSSBAUM YATES BERG KLEIN & WOLPOW LLP

Firm's EIN

Firm's address

MELVILLE, NY 11747

Phone no.

(631) 845-5252

Form 990-PF (2010)

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Name of organization MASADA FOUNDATION	Employer identification number 16-1622664
--	---

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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—

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (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 33¹/₃% 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 II.

☐ 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 on line H 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).

Name of organization MASADA FOUNDATION	Employer identification number 16-1622664
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Part I

Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	RICHARD KIRSCHNER 137-05 72ND ROAD FLUSHING, NY 11367	\$ 924,998	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization MASADA FOUNDATION	Employer identification number 16-1622664
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Part II Noncash Property (see Instructions)			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization MASADA FOUNDATION	Employer identification number 16-1622664
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Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry)

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of **\$1,000 or less** for the year (Enter this information once See instructions) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div> <div></div> <div></div> <div></div>		
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div> <div></div> <div></div> <div></div>		
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div> <div></div> <div></div> <div></div>		
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div> <div></div> <div></div> <div></div>		
—	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	<div>Transferee's name, address, and ZIP + 4</div> <div>Relationship of transferor to transferee</div> <div></div> <div></div> <div></div>		


Additional Data

Software ID:
Software Version:
EIN: 16-1622664
Name: MASADA FOUNDATION


Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ISRAEL SETTLEMENT FUND RECHOV PARDIN BNEI BRAK VARIOUS 99999 IS	NONE	EXEMPT	OTHER	200
CLO OF ARGENTINA 183 WILSON STREET BROOKLYN, NY 11211	NONE	EXEMPT	OTHER	100
YOTHERSHIVA KOTHERSSOTHERR TORAH 72 -11 VLOTERIGH PLACOTHER KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	150
TZOTHERDAKA VCHOTHERSOTHERD 1424OTHER 34TH ST BROOKLYN, NY 11230	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	36
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN, NY 11230	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	36
AFO BEIT EL 50 POLK AVE HEMPSTEAD, NY 11550	NONE	EXEMPT	OTHER	1,000
AFO BEIT EL 50 POLK AVE HEMPSTEAD, NY 11550	NONE	EXEMPT	OTHER	1,500
HADAR HATORAH 824 EASTERN PKWY BROOKLYN, NY 11213	NONE	EXEMPT	RELIGIOUS EDUCATION	50
KOLEL MISHKAN SOLOMON 1760 E 18 TH ST BROOKLYN, NY 11230	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	1,000
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN, NY 11230	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	50
CHASAM SOFER 1665 50TH ST BROOKLYN, NY 11230	NONE	EXEMPT	RELIGIOUS EDUCATION	180
NACHLAT SHLOMO RECHOV CHAI TAIB BNEI BRAK VARIOUS 99999 IS	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	36
SCHWAB CHARITABLE GIFT FUND 211 MAIN STREET SAN FRANCISCO, CA 94105	NONE	EXEMPT	OTHER	880,000
CONG MIKVEH ISRAEL 73-11 VLEIGH PLACE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	OTHER	36
YI QV 141-55 77TH AVE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	400
Total			3a	921,361


Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TOV 68-58 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	400
KEREN EZER MELECH 2 SKILLMAN STREET BROOKLYN,NY 11205	NONE	EXEMPT	INDIGENT FAMILIES	620
SHUVU 5417 18 TH AVE BROOKLYN,NY 11204	NONE	EXEMPT	OUTREACH	500
YESH CHASAN SOFER 50TH ST - 18TH AND 19TH AVE NY,NY 12230	NONE	EXEMPT	RELIGIOUS EDUCATION	200
BNOS MALKA 7102 113 TH STREET FLUSHING,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	100
HACNOSAS KALLAH ERNA LINDENFELD 7011 150TH STREET KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	36
MERKAZ TEMICHA 1312 44 ST BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	50
TZEDAKA VCHESD 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	50
OHR TORAH 6 HASMADAR ST OFAKIM VARIOUS 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	36
ASHDOD MERKAZ CHINUCH 5014 16TH AVE BROOKLYN,NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	249
MESIVTA TIFERES TORAH 84-15 ABINGDON RD KEW GARDENS,NY 11415	NONE	EXEMPT	RELIGIOUS EDUCATION	100
AFO CHASIDEI VIZNITZ 186 ROSS ST BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	180
BEIT ZVIL INST FOR TALMUD RECHOV KEREN KAYEMET 59 JERUSALEM VARIOUS 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	250
OHR TORAH KLAY 7 TEL AVIV VARIOUS 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	250
YESH ATERES SHMUEL OF WATERBURY 136-64 72 AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	120
Total  3a				921,361


Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
OZER DALIM 1301 AVE K BROOKLYN, NY 11330	NONE	EXEMPT	INDIGENT FAMILIES	30
JEWISH INST FT BLIND 185 MADISON AVE NY, NY 10002	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	25
SCRANTON COMMUNMITY KOLEL 722 CLAY AVE SCRANTON, PA 18510	NONE	EXEMPT	RELIGIOUS EDUCATION	100
PASSAIC TORAH INSTITUTE 173 PARK AVE POASSAIC, NJ 070550000	NONE	EXEMPT	RELIGIOUS EDUCATION	180
MESIVTA ATERES YAKOV 131 WASHINGTON AVE LAWRENCE, NY 11559	NONE	EXEMPT	RELIGIOUS EDUCATION	350
MESIVTA ATERES YAKOV 131 WASHINGTON AVE LAWRENCE, NY 11559	NONE	EXEMPT	RELIGIOUS EDUCATION	40
HASC 1393 OCEAN PKWY BROOKLYN, NY 11230	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	100
CHOFET CHAIM HERITAGE FDTN 361SPOOK ROCK RD SUFFERN, NY 10901	NONE	EXEMPT	OTHER	50
CONG BNEI YAAKOV 11 EMES LANE MONSEY, NY 10952	NONE	EXEMPT	OTHER	100
OSE TZEDAKA VCHESED 1329 44 TH ST BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	120
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	72
AGUDAS TOV V CHESED 46 MAIN ST MONSEY, NY 10952	NONE	EXEMPT	INDIGENT FAMILIES	50
BONEI OLAM (US BANK) 4 BEECHWOOD DRIVE LAWRENCE, NY 11559	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	1,000
SINAI ACADEMY 2025 79 TH ST BROOKLYN, NY 11214	NONE	EXEMPT	RELIGIOUS EDUCATION	250
EZRAS YISROEL FUND 1274 49TH ST BROOKLYN, NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	72
Total  3a				921,361

Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TOV 68-58 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	400
YESH NETIV ARYEH 18 ORCHARD HILL RD MONSEY,NY 10952	NONE	EXEMPT	RELIGIOUS EDUCATION	1,000
YESH TIFERES MOSHE ABINGDOIN RD KEW GARDENS,NY 11415	NONE	EXEMPT	RELIGIOUS EDUCATION	500
ZICHRON SHLOMO REFUAH FUND 1319 51 ST BROOKLYN,NY 11219	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	50
ZICHRON MORDECHAI 125 BLOMINGDALE RD STATEN ISLAND,NY 10309	NONE	EXEMPT	OTHER	100
CHILD LIFE SOCIETY 135-27 78 DRIVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	180
CONG OHR MOSHE 1 MONSEY BLVD MONSEY,NY 10952	NONE	EXEMPT	RELIGIOUS EDUCATION	36
SINAI ACADEMY 2025 79TH ST BROOKLYN,NY 11214	NONE	EXEMPT	RELIGIOUS EDUCATION	1,300
ACHIEZER CONG 1960 E 7TH STREET BROOKLYN,NY 11223	NONE	EXEMPT	RELIGIOUS EDUCATION	180
CONG TORAH LODAAS 138-53 77 AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	100
FRIENDS OF DAAS MEYSHARIM 1274 49ST BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	1,000
KOLLEL SHOMREI HACHOMOS 18 HEYWARD ST BROOKLYN,NY 11211	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	360
YAD BATYA L' KALLAH 1256 E 26 TH ST BROOKLYN,NY 11210	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	375
YIKEW GARDEN HILLS 150-05 70TH ROAD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	750
MIDRASH SHMUEL HANASI 19 GIVAT SHMUEL VARIOUS 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	50
Total  3a				921,361


Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
AHAVAS CHESED 1255 43 ST BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	54
ICHUD HAYESHIVOS VARIOUS VARIOUS 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	360
TORAH ANYTIMECOM 71-28 A MIAM ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	OTHER	180
BNOS LEAH PROSPECT PARK 1604 AVE R BROOKLYN,NY 11229	NONE	EXEMPT	RELIGIOUS EDUCATION	50
MISASKIM 5805 16TH AVE BROOKLYN,NY 11204	NONE	EXEMPT	OTHER	100
ZICHRON DOVID EMERGENCVY FUND 141-43 73 AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	72
ZO ARTZEINU POB 241 CEDARHURST,NY 11516	NONE	EXEMPT	OTHER	120
RESPONSIBILITY FOR YOUTH ED POB 824 LAKEWOOD,NJ 087010000	NONE	EXEMPT	OTHER	25
EZRAT CHOLIM VYOLDOT 1403 44TH ST BROOKLYN,NY 11219	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	25
OHR TORAH 4 PHYLLS TERRACE MONSEY,NY 10952	NONE	EXEMPT	RELIGIOUS EDUCATION	36
MACHNE ASHER 61 WALTON ST BROOKLYN,NY 11206	NONE	EXEMPT	RELIGIOUS EDUCATION	360
SHUVU 5417 18TH AVE BROOKLYN,NY 12230	NONE	EXEMPT	OUTREACH	90
CONG BAIS YOSEF D'ULEM 139-19 72 RD FLUSHING,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	180
ZICHRON SHLOMO REFUAH FUND 1319 51 ST BROOKLYN,NY 11219	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	500
Total  3a				921,361


Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CHASDEI CHASHI L KALAH 734 E 7TH ST BROOKLYN,NY 11218	NONE	EXEMPT	OTHER	100
YESHIVA OHR YERUSHALAYIM 72-47 137 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	100
CONG BAIS YECHIEL VARIOUS VARIOUS 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	100
FRIENDS OF ACHEINU 216 RIVER AVE LAKEWOOD,NJ 087010000	NONE	EXEMPT	RELIGIOUS EDUCATION	100
CONG TORAH TEMIMA 5504 16 AVE BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	50
KEREN SIMCHAS CHASAN V' KALLAH(US BANK) 712 MONTGOMERY ST BROOKLYN,NY 11213	NONE	EXEMPT	INDIGENT FAMILIES	285
DARCHEI MENACHEM 823 EASTERN PKWY BROOKLYN,NY 11213	NONE	EXEMPT	RELIGIOUS EDUCATION	250
CONG KNESSET YEHUDA 848 E 13 TH ST BROOKLYN,NY 11230	NONE	EXEMPT	RELIGIOUS EDUCATION	100
SHEVACH HS 75-09 MAIN ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	250
BAIS YAKOV QUEENS 124-50 METROPOLITAN AVE KEW GARDEN HILLS,NY 11230	NONE	EXEMPT	RELIGIOUS EDUCATION	170
MERKAZ TOAH CASIDEI RAMAT SHLOMO RECHOV HADMAR 25 VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	72
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	100
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	50
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	50
PESACH TIKVAH 18 MIDDLETON ST BROOKLYN,NY 11206	NONE	EXEMPT	INDIGENT FAMILIES	180
Total 3a				921,361


Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TOV 68-58 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	400
YESHIVA CENTRAL QUEENS 147-37 70TH ROAD KEW GARDENS HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	200
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
ALEH NEGEV FDTN POB 4911 NY,NY 10024	NONE	EXEMPT	INDIGENT FAMILIES	36
ESTER MILLER BAIS YAKOV 700 NORTH AND SOUTH RD ST LOUIS,MO 63130	NONE	EXEMPT	RELIGIOUS EDUCATION	50
MESIVTA ATERES YAKOV 131 WASHINGTON AVE LAWRENCE,NY 11559	NONE	EXEMPT	RELIGIOUS EDUCATION	45
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	120
NACHLAT TZVI 42 ELIYAHU MERIDOR PISGAT ZEV VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	360
GATEWAYS 11 WALLENBERG DR MONSEY,NY 10952	NONE	EXEMPT	OUTREACH	40
KEREN ANIYIM 68-29 MAIN ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	420
ORACH CHAIM RESCUE FUND 521 5TH AVE LAKEWOOD,NJ 087010000	NONE	EXEMPT	INDIGENT FAMILIES	100
YESHIVA TORAS CHAIM 296 SADDLE RIVER RD MONSEY,NY 10952	NONE	EXEMPT	RELIGIOUS EDUCATION	50
BM KEW GARDEN HILLS 75-02 137 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	120
EZRAS YISROEL FUND 4415 14 TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	100
CONG TOMCHEI YISROEL 130 CLYMER ST BROOKLYN,NY 11211	NONE	EXEMPT	INDIGENT FAMILIES	180
Total  3a				921,361


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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
JEP 7601 147 ST KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	OUTREACH	100
YESH CHOFETZ CHAIM 7601 147 ST KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	100
STAR OUTREACH 185-12 UNION TPKE QUEENS, NY 11366	NONE	EXEMPT	OUTREACH	100
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
EZRAT ISRAEL INC 806 EASTERN PKWY BROOKLYN, NY 11213	NONE	EXEMPT	INDIGENT FAMILIES	50
JEWISH HERITAGE CTR 68-29 MAIN STREET KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	OUTREACH	100
AHH 138-45 78 TH DRIVE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	100
KHAL BNEI TORAH 3514 FLATLANDS AVE BROOKLYN, NY 11234	NONE	EXEMPT	RELIGIOUS EDUCATION	100
YISACHAR V'ZEVULUN VARIOUS VARIOUS 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	36
MTJ 145 E BDWY NY, NY 10002	NONE	EXEMPT	RELIGIOUS EDUCATION	100
CONG BAIS YOSEF D'ULEM 139-19 72 RD FLUSHING, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	400
ISRAEL PURIM FUND 205 W BEECH ST LONG BEACH, NY 11561	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	180
YESH TORAS CHAIM 1025 NE MIAMI GARDENS DRIVE MIAMI, FL 33179	NONE	EXEMPT	RELIGIOUS EDUCATION	100
MESIVTA ATARES YAKOV 131 WASHINGTON AVE LAWRENCE, NY 11559	NONE	EXEMPT	RELIGIOUS EDUCATION	1,000
Total  3a				921,361


Form 990PF Part XV Line 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
AFO B'EER CHAIM YITZCOK 4612 12TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	36
AFO B'EER CHAIM YITZCOK 4612 12TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	36
TZEDAKA VCHESED 147-37 71 AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	36
SHEVES ACHIM 3924 14 TH AVE BROOKLYN,NY 11218	NONE	EXEMPT	INDIGENT FAMILIES	54
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
MEIR PANIM L'CHAYIL 641 MONTGOMERY ST BROOKLYN,NY 11225	NONE	EXEMPT	INDIGENT FAMILIES	100
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	150
ISRAEL SETTLEMENT FUND VARIOUS VARIOUS 99999 IS	NONE	EXEMPT	OTHER	180
CONG KHAL BNEI YOSEF 235 PENN ST BROOKLYN,NY 11211	NONE	EXEMPT	TEMPLE/SYNAGOGUE	40
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	50
AGUDAH OF ST LOUIS 8202 DELMAR BLVD UNIVERSITY CITY,MO 63124	NONE	EXEMPT	TEMPLE/SYNAGOGUE	100
CONG BAIS YOSEF D'ULEM 139-19 72 RD FLUSHING,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	250
NCSY 11 BROADWAY NY,NY 10004	NONE	EXEMPT	OUTREACH	20
NCSY 11 BROADWAY NY,NY 10004	NONE	EXEMPT	OUTREACH	160
Total  3a				921,361


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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CONG BAIS YOSEF D'ULEM 139-19 72 RD FLUSHING,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	72
YESH KOL YAAKOV 29 WEST MAPLE AVE MONSEY,NY 10952	NONE	EXEMPT	TEMPLE/SYNAGOGUE	72
YESH MEOR YTITZCOK 85 DYKSTRAS WAY MONSEY,NY 10952	NONE	EXEMPT	RELIGIOUS EDUCATION	36
AISHEL SHABBAT (US BANK) 1010 AVE N BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	250
MTJ 145 E BDWY NY,NY 10022	NONE	EXEMPT	RELIGIOUS EDUCATION	150
AFO MEKOR MEIR 1274 49 TH ST BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	72
YAD YOSEF 12 RECHOV LAPIAN JERUSALEM VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	50
AJC 165 E AST 56 TH STREET NYC,NY 10022	NONE	EXEMPT	OUTREACH	500
OORAH 1805 SWARTHMORE AVE LAKEWOOD,NJ 087010000	NONE	EXEMPT	OUTREACH	1,040
RAV CHESED 50 LAWRENCE AVE BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	70
A TIME 1310 48 ST BROOKLYN,NY 11219	NONE	EXEMPT	OTHER	1,000
AFO MIDRASH ELIYAHU RECHOV CHAFET CHAIM 52 ISRAEL VARIOUS 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	120
CONG TORAH TEMIMA 5504 16 AVE BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	18
KOLLEL SHOMREI HACHOMOS 18 HEYWARD ST BROOKLYN,NY 11211	NONE	EXEMPT	INDIGENT FAMILIES	200
AFO SHEBA MEDICAL CTR 250 W 57 TH STREET NYC,NY 10107	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	360
Total  3a				921,361


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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
YESHIVA GEDOLA TIFERES SHMUEL 1517 56 TH STREET BROOKLYN,NY 11219	NONE	EXEMPT	OTHER	125
KINGSTON AID VARIOUS VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	100
YESH CHASAN SOFER 1876 50 TH STREET BROOKLYN,NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	120
YAD ELIEZER FOR BABIES 1102 E 26 TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	180
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
AHAVAS CHESED VARIOUS VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	500
YIKEW GARDEN HILLS 150-05 70TH ROAD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	72
AFO TORAS CHAIM 1880 54THST BROOKLYN,NY 11204	NONE	EXEMPT	OTHER	100
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	50
YESH OROT MEMIZRACH 21 RECHOV SHIMON RKEACH VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	36
A C FUND 637 6 TH STREET LAKEWOOD,NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	36
CHASODIM TOVIM BAIS VAAD HARTZI 199 LEE AVE BROOKLYN,NY 11211	NONE	EXEMPT	INDIGENT FAMILIES	36
VAAD HARABOINIM L'INYONEI TZEDAKAH POB 500112 VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	500
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
Total  3a				921,361


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Name and address (home or business)				
a Paid during the year				
TOV 68-58 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	600
CHESED L'AVRAHAM 138-08 78 TH DRIVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	180
RSA 7601 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	180
AHH 138-45 78 TH DRIVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	60
YESHIVA MEOR HATORAH POB 188 ROOSEVELT,NJ 085550000	NONE	EXEMPT	RELIGIOUS EDUCATION	36
KOLLEL BAIS AHARON TZVI 235 PENN ST BROOKLYN,NY 11211	NONE	EXEMPT	RELIGIOUS EDUCATION	25
AMIT 140 17 69 AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	25
SHOR YOSHUV INSTITUTE 1 CEDAR LAWN AVE LAWRENCE,NY 11559	NONE	EXEMPT	RELIGIOUS EDUCATION	25
RAMBAM FDTN 1353 49 TH BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	72
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	50
CHABAD OF GREAT NECK (US BANK) 400 EAST SHORE RD GREAT NECK,NY 11024	NONE	EXEMPT	TEMPLE/SYNAGOGUE	200
CHEN V'CHESED 1375 CONEY ISLAND AVE BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	100
NOAM SHABBOS 1701 45 ST BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	36
BY QUEENS 124-50 METROPOLITAN AVE BRKLYN,NY 11415	NONE	EXEMPT	RELIGIOUS EDUCATION	100
CHESED FUND 1928 51 ST BROOKLYN,NY 11204	NONE	EXEMPT	INDIGENT FAMILIES	125
Total  3a				921,361


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Name and address (home or business)				
a Paid during the year				
ESTER MILLER BAIS YAKOV 700 NORTH AND SOUTH RD ST LOUSI,MO 63130	NONE	EXEMPT	INDIGENT FAMILIES	25
HACNOSAS KALLAH WALLENSTIN RECHOV CHAZON RAMAT SHLOMO VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	180
CONGREGATION NACHALS YITZCOK D' HUMNA 141 04 73 AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	500
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
MECHON RUTH CHESSED CTR 1796 45 TH ST BROOKLYN,NY 11204	NONE	EXEMPT	INDIGENT FAMILIES	120
MERKAZ HABRIS POB876 MONSEY,NY 10952	NONE	EXEMPT	INDIGENT FAMILIES	270
CONG OSEH TZEDAKAH V CHSED 1312 44TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	120
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
OTSAR 2334W 13TH ST BROOKLYN,NY 11230	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	250
RAV CHESED 50 LAWRENCE AVE BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	30
AFO MISHKAN MEIR 1274 49TH ST BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	25
CONG OSEH TZEDAKAH VCHESED 4310 16 AVE BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	54
TOV 68-58 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	400
TORAH IMAGES 1312 44TH ST BROOKLYN,NY 11219	NONE	EXEMPT	OTHER	36
Total  3a				921,361


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Name and address (home or business)				
a Paid during the year				
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
KIDS KICKING CANCER(US BANK) 7316 AVE U BROOKLYN,NY 11230	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	180
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
AFO BAIS MAOZ VARIOUS VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	180
BAIS HATALMUD 2127 82 ST BROOKLYN,NY 11214	NONE	EXEMPT	RELIGIOUS EDUCATION	100
MORIAH BIRCAS MIORDECHAI 1340 PRINCETON AVE LAKEWOOD,NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	25
TZIDKAS YOSEF NAFTALI 149-05 79TH AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	25
HEBREW FREE BURIAL ASSOC 224 W 35 ST NY,NY 10117	NONE	EXEMPT	INDIGENT FAMILIES	25
YAD LACHMA ANYA 20 IGRO COURT SOUTH STATEN ISLAND,NY 10309	NONE	EXEMPT	INDIGENT FAMILIES	25
TELSHE YESHIVA 28400 EUCLID AVE WICKLIFFE,OH 44092	NONE	EXEMPT	RELIGIOUS EDUCATION	25
YESH KESSER TORAH 72 11 VLEIGH PL KEW GARDENSN,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	25
ANEINU WIDOWS AND ORPHAN FUND 697 6 ST LAKEWOOD,NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	25
YESHIVA GEDOLA OF BAYONNE 747 AVE C BAYONNE,NJ 070022813	NONE	EXEMPT	RELIGIOUS EDUCATION	25
GIOH POB 3147 NY,NY 10127	NONE	EXEMPT	INDIGENT FAMILIES	25
Total  3a				921,361

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
TIKVAH LAYELED 322 W 52ND ST BROOKLYN, NY 11220	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	25
JEWISH INST FT BLIND 185 MADISON AVE NY, NY 10002	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	25
AHAVAT MORDECHAI 3HATASHTENS JERUSALEM POB6674 VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	25
MERKAZ 1569 46 TH ST BROOKLYN, NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	25
OHR SAMEACH 1399 CONEY ISLAND AVE BROOKLYN, NY 11230	NONE	EXEMPT	OUTREACH	25
MESIVTA YESH GEDOLA 59 WEST END AVE BROOKLYN, NY 11235	NONE	EXEMPT	RELIGIOUS EDUCATION	25
TALMUDICAL YESH OF PHILA 6063 DREXEL DR PHILADELPHIA, PA 19131	NONE	EXEMPT	RELIGIOUS EDUCATION	25
OZER DALIM 1301AVE K BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
YESHIVA BAIS MOSHE 930 HICKORY ST SCRANTON, PA 18505	NONE	EXEMPT	RELIGIOUS EDUCATION	25
BIKUR CHOLIM QUEENS 140-21 69 AVE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	25
VAAD LHATZOLAS NIDCHEI YISROEL 403 YESHIVA LANE BALTIMORE, MD 21208	NONE	EXEMPT	INDIGENT FAMILIES	25
CHIKDRENS VILLAGE OF JERUSALEM 15 BEKMAN ST BROOKLYN, NY 11225	NONE	EXEMPT	INDIGENT FAMILIES	25
MEIR PANIM L'CHAYIL 5316 NEW UTRECHT AVE BROOKLYN, NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	25
CONG YESOD HAEMUNAH 618 6 TH ST LAKEWOOD, NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	25
CHEVRA SIMCHAS SHABBOS 539 MONTGOMERY ST BROOKLYN, NY 11225	NONE	EXEMPT	INDIGENT FAMILIES	25
Total  3a				921,361

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Name and address (home or business)				
a Paid during the year				
SCRANTON HEB DAY SCHOOL 540 MONROE AVE SCRANTON, PA 18510	NONE	EXEMPT	RELIGIOUS EDUCATION	25
MITZVAH HACHNOSAS KALLAH 12 SOUTH MONSEY RD MONSEY, NY 10952	NONE	EXEMPT	INDIGENT FAMILIES	25
ACH TOV 1305 53 ST BROOKLYN, NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	25
AGUDSS ISRAEL HELPING HAND 10 EMS LANE MONSEY, NY 10952	NONE	EXEMPT	INDIGENT FAMILIES	25
CN FUND 637 6 TH STREET LAKEWOOD, NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	25
CHANUN VRACHUM 655 EIGHTH ST LAKEWOOD, NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	25
KEREN OR 350 7 TH AVE BROOKLYN, NY 11215	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	25
PEARL BLAU LEARNING CTR 233 CAREY ST LAKEWOD, NJ 087014540	NONE	EXEMPT	OTHER	25
HOUSE OF SAGES 283 E BDWY NY, NY 10002	NONE	EXEMPT	INDIGENT FAMILIES	25
CHASODIM TOVIM 1460 E 19TH STREET BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
REVACH VHAZOLAH 51 BLAUVELT ROAD MONSEY, NY 10952	NONE	EXEMPT	INDIGENT FAMILIES	25
ZICHRON MAYER 20 IGRO COURT SOUTH STATEN ISLAND, NY 10309	NONE	EXEMPT	RELIGIOUS EDUCATION	25
VAAD IHATZOLAS NIDCHEI YISROEL 1566 CONEY ISLAND AVE BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
COUNT ME IN 788 E 4TH STREET BROOKLYN, NY 11218	NONE	EXEMPT	INDIGENT FAMILIES	25
CONG OHR MOSHE 521 5TH S LAKEWOOD, NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	25
Total  3a				921,361

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Name and address (home or business)				
a Paid during the year				
AFO SHALVAH 315 5 TH AVE BROOKLYN,NY 11215	NONE	EXEMPT	INDIGENT FAMILIES	25
AISH HATORAH 900 FOREST AVE LAKEWOOD,NJ 087010000	NONE	EXEMPT	INDIGENT FAMILIES	25
HEB ACADEMY CLEVELAND 1975 LYNDWAY RD CLEVELAND,OH 44121	NONE	EXEMPT	OUTREACH	25
ZECHER YITZCOK 406 6TH STREET LAKEWOOD,NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	25
ZICHRON LEIB 20 IGRO COURT SOUTH STATEN ISLAND,NY 10309	NONE	EXEMPT	INDIGENT FAMILIES	25
AFO TZOHAR 1274 49 TH ST BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	25
YISROEL RELIEF FUND 667 8TH ST LAKEWOOD,NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	25
CHAIM V'CHESED 24 BENNETT AVE BROOKLYN,NY 11209	NONE	EXEMPT	INDIGENT FAMILIES	25
BIKUR CHOLIM 1450 WALDEN AVE LAKEWOOD,NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	25
MINCHAS YOSEF 762 KENT AVE BROOKLYN,NY 11249	NONE	EXEMPT	INDIGENT FAMILIES	25
ATERET SHALOM 1375 CONEY ISLAND AVE BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
COUNT ME IN 788 E 4TH STREET BROOKLYN,NY 11218	NONE	EXEMPT	INDIGENT FAMILIES	25
EZRAS TORAH 235 E BROADWAY NY,NY 10002	NONE	EXEMPT	INDIGENT FAMILIES	100
MESAMCH LEV 1364 53ST BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	25
CONG MIKVEH ISRAEL 73 26 137 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	OTHER	100
Total ▶ 3a				921,361

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Name and address (home or business)				
a <i>Paid during the year</i>				
JEP 7601 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	OUTREACH	30
BONEI OLAM 54 BUTTELL AVE LAKEWOOD,NY 087014540	NONE	EXEMPT	SICK/DISABLED FAM/CHILDR	1,000
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	30
TZEDAKA VCHESED 1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	180
YIKEW GARDEN HILLS 150-05 70TH ROAD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	85
RAV MEIR' BAL HANES VARIOUS VARIOUS 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	100
SHALOM YIZCHAK TORAH INST 208 5 STREET LAKEWOOD,NJ 087014540	NONE	EXEMPT	INDIGENT FAMILIES	120
EZRAT YISROEL 806 EASTERN PKWY BROOKLYN,NY 11213	NONE	EXEMPT	INDIGENT FAMILIES	100
BM KEW GARDEN HILLS 75-02 137 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	750
Total			3a	921,361

TY 2010 Other Liabilities Schedule

Name: MASADA FOUNDATION

EIN: 16-1622664

Description	Beginning of Year - Book Value	End of Year - Book Value
DUE TO JETRO	3,904	3,904