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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

2011

For calendar year 2011, or tax year beginning 10-01-2011, and ending 09-30-2012

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

A Employer identification number
16-1622664

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

Room/suite

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

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

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 ☐

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

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 ☐

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 136,651

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)	75,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	631	631		
	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	75,631	631	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).	50	0	0	50
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	50	0	0	50
	25 Contributions, gifts, grants paid.	58,745			58,745
	26 Total expenses and disbursements. Add lines 24 and 25	58,795	0	0	58,795
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	16,836			
	b Net investment income (if negative, enter -0-)		631		
	c Adjusted net income (if negative, enter -0-)			0	

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	119,815	136,651	136,651
	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)	119,815	136,651	136,651

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	115,911	132,747	
	30	Total net assets or fund balances (see page 17 of the instructions)	115,911	132,747	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	119,815	136,651	

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	115,911
2	Enter amount from Part I, line 27a	2	16,836
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	132,747
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	132,747

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) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		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))
2010	921,358	121,022	7 613145
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
2	Total of line 1, column (d).		2 16 968361
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 3 393672
4	Enter the net value of noncharitable-use assets for 2011 from Part X, line 5.		4 165,989
5	Multiply line 4 by line 3.		5 563,312
6	Enter 1% of net investment income (1% of Part I, line 27b).		6 6
7	Add lines 5 and 6.		7 563,318
8	Enter qualifying distributions from Part XII, line 4.		8 58,795

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 VIExcise 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 type="checkbox"/> and enter 1% of Part I, line 27b		1	13
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	13
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	13
6		Credits/Payments			
a		2011 estimated tax payments and 2010 overpayment credited to 2011	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	13
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 2012 estimated tax <input type="checkbox"/>	Refunded <input type="checkbox"/>	11	

Part VII-AStatements 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
		1a		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)?			No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ 0 (2) On foundation managers <input 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 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 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 2011 or the taxable year beginning in 2011 (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 2011, 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 the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country	16	Yes	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 2011?	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 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? 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 2011 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 2011.).	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 2011?	4b		No

<p>5a During the year did the foundation pay or incur any amount to</p> <p>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(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). . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b 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. <input checked="" type="checkbox"/></p> <p>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? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," attach the statement required by Regulations section 53.4945–5(d).</p>			
<p>6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.</p>	5b		
<p>7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?</p>	6b	No	
	7b		

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

	(b) Total		(d) Contributions to	
--	-----------	--	----------------------	--

(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) Description of employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000.	0
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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	58,795
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see page 23 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	168,517
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	168,517
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	168,517
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions).	4	2,528
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	165,989
6	Minimum investment return. Enter 5% of line 5.	6	8,299

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	8,299
2a	Tax on investment income for 2011 from Part VI, line 5.	2a	13
b	Income tax for 2011 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	13
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	8,286
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	8,286
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	8,286

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	58,795
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	58,795
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	58,795
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 2010	(c) 2010	(d) 2011
1		Distributable amount for 2011 from Part XI, line 7			
2		Undistributed income, if any, as of the end of 2011			
a		Enter amount for 2010 only.			
b		Total for prior years 20____, 20____, 20____			
3		Excess distributions carryover, if any, to 2011			
a		From 2006.			
b		From 2007.			
c		From 2008.			
d		From 2009.			
e		From 2010.			
f		Total of lines 3a through e.			
4		Qualifying distributions for 2011 from Part XII, line 4			
a		Applied to 2010, but not more than line 2a			
b		Applied to undistributed income of prior years (Election required—see page 26 of the instructions)			
c		Treated as distributions out of corpus (Election required—see page 26 of the instructions).			
d		Applied to 2011 distributable amount.			
e		Remaining amount distributed out of corpus			
5		Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a).)			
6		Enter the net total of each column as indicated below:			
a		Corpus Add lines 3f, 4c, and 4e Subtract line 5			
b		Prior years' undistributed income Subtract line 4b from line 2b.			
c		Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.			
d		Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions.			
e		Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions.			
f		Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011.			
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).			
8		Excess distributions carryover from 2006 not applied on line 5 or line 7 (see page 27 of the instructions).			
9		Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a.			
10		Analysis of line 9			
a		Excess from 2007.			
b		Excess from 2008.			
c		Excess from 2009.			
d		Excess from 2010.			
e		Excess from 2011.			

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 2011, 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) 2011	(b) 2010	(c) 2009	(d) 2008	
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	58,745
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			14	631	
4 Dividends and interest from securities.					
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory. . .					
11 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e).		0		631	0
13 Total. Add line 12, columns (b), (d), and (e).			13		631





[illegible]

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?		Yes	No
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.			

[illegible]

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	
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					
*****		2013-02-14		*****	
Signature of officer or trustee		Date		Title	
Sign Here Paid Preparer's Use Only	Preparer's Signature  ALAN YATES CPA		Date 2013-02-11		Check if self-employed <input checked="" type="checkbox"/>
	Firm's name  NUSSBAUM YATES BERG KLEIN & WOLPOW LLP		Firm's EIN  26-0221653		PTIN P00627547
	445 BROAD HOLLOW ROAD STE 319				
	Firm's address  MELVILLE, NY 11747		Phone no (631) 845-5252		

May the IRS discuss this return with the preparer shown above? See instructions ☐ Yes ☐ No

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

2011

Name of organization MASADA FOUNDATION	Employer identification number 16-1622664
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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 in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed

(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	\$ 75,000	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)
		\$	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) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>

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) ➤ \$

Use duplicate copies of Part III if additional space is needed

(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		
	Transferee's name, address, and ZIP 4		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></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		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></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		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></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		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></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	

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>				
LEIB KLETSKY FUND5525 NEW UTRECHT AVE BROOKLYN,NY 11219	NONE	EXEMPT	OTHER	18
TIKVAH LAYELED322 W 52ND STREET POB 1097 NEW YORK,NY 10157	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	100
ORLANDO TORAH ACADEMY 11200 S APUPKA VNELAND RD ORLANDO,FL 32836	NONE	EXEMPT	RELIGIOUS EDUCATION	18
YRSRH100 BENEET AVE NEW YORK,NY 11209	NONE	EXEMPT	RELIGIOUS EDUCATION	100
NATIVOT1970 52 ST BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	18
YIKGH CHARITY FUND150-05 70TH ROAD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	100
YAD ELIEZER1102 E 26 TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	100
HASHIVAYNU144-02 JEWEL AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	OUTREACH	400
Total  3a				58,745

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				
BIRKAS RIFKA1340 PRIMCETON AVE LAKEWOOD,NJ 08701	NONE	EXEMPT	INDIGENT FAMILIES	36
CONG MIKVA ISRAEL73-48 136 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	OTHER	36
PEARL BLAU LEARNING CTR 233 CAREY STREET LAKEWOOD,NJ 08701	NONE	EXEMPT	RELIGIOUS EDUCATION	36
COUNT ME IN788 E 4TH ST BROOKLYN,NY 11218	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	36
YESH ZICHRON MAYER5 RONAL TAWIL WAY MOUNTAINDALE,NY 12763	NONE	EXEMPT	RELIGIOUS EDUCATION	36
CONG ZICHRON ARYEH641 6TH ST LAKEWOOD LAKEWOOD,NJ 08701	NONE	EXEMPT	RELIGIOUS EDUCATION	36
KEREN RACHEIM1460 E 19TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
OHEL MALKA1369 51 STREET BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	36
JT FT BLIND185 MADISON AVE NEW YORK,NY 10157	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	36
HEBREW FREE BURIAL ASSOCIATION224 W 35 STREET NEW YORK,NY 10117	NONE	EXEMPT	OTHER	36
KEREN OR350 7 TH AVE NEW YORK,NY 10001	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	36
HEB ACADEMY CLEVELAND 1975 LYNDWAY RD CLEVELAND,OH 44121	NONE	EXEMPT	RELIGIOUS EDUCATION	36
GIRLS TOWN OHR CHADASH 1274 49 TH STREET BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	36
EZER M' TZION1281 49 TH STREET BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	36
ZICHRON DAVID20 IGROS CT STATEN ISLAND,NY 10309	NONE	EXEMPT	INDIGENT FAMILIES	36
AVOT U ' BONIMPOB 163 MONSEY,NY 10952	NONE	EXEMPT	OTHER	36
AFO TZOHAR1274 49 TH STREET BROOKLYN,NY 11219	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	36
ALEH FOUNDATIONPOB 4911 NEW YORK,NY 10185	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	36
CHESED TZEDAKA427 6TH ST LAKEWOOD,NJ 08701	NONE	EXEMPT	INDIGENT FAMILIES	36
HOME OF SAGES25 BIALYSTOKER NEW YORK,NY 10002	NONE	EXEMPT	INDIGENT FAMILIES	36
HOUSE OF SAGES283 E BROADWAY NEW YORK,NY 10002	NONE	EXEMPT	INDIGENT FAMILIES	36
TZIDKAS YOSEF NAFTALI149-05 79 TH AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	36
OD YOSEF CHAI18 NEW COUNTRY ROAD MONSEY,NY 10952	NONE	EXEMPT	INDIGENT FAMILIES	36
SCRANTON HEB DAY SCHOOL 540 MONROE AVE SCRANTON,PA 18510	NONE	EXEMPT	RELIGIOUS EDUCATION	36
RJJ1 PLAINFIRELD AVE EDISON,NJ 08817	NONE	EXEMPT	RELIGIOUS EDUCATION	36
MIRRER YESHIVA1791 OCEA PKWY BROOKLYN,NY 11223	NONE	EXEMPT	RELIGIOUS EDUCATION	36
SEGULAH1276 46 TH STREET BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	36
ASRA KADISHE203 PENN ST BROOKLYN,NY 11211	NONE	EXEMPT	OTHER	18
KGH ERUV COMMITTEE136-84 71 RD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	OTHER	15
AISH HATORAH900 FOREST AVE LAKEWOOD,NJ 08701	NONE	EXEMPT	RELIGIOUS EDUCATION	18

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				
SATMAR BIKUR CHOLIM545 BEDFORD AVE BROOKLYN,NY 11211	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	100
RAMBAM FOUNDATION1353 49 TH ST BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	72
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	25
YIQV141-55 77TH AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	50
BAIS HATALMUDPOB 144085 2127 82ND STREET BROOKLYN,NY 11214	NONE	EXEMPT	RELIGIOUS EDUCATION	100
TORA PREP SCHOOL609 NORTH AND SOUTH RD ST LOUIS,MO 63130	NONE	EXEMPT	RELIGIOUS EDUCATION	180
TZEDAKA V'CHESEDHARAV RUBIN 9 VARIOUS,ISRAEL 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	50
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
ATERES HATORAHISRAEL VARIOUS,ISRAEL 99999 IS	NONE	EXEMPT	OTHER	54
TOV68-58 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	1,000
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	100
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	100
MEIR PANIIM LACHAYAL641 MONTGOMERY ST BROOKLYN,NY 11225	NONE	EXEMPT	INDIGENT FAMILIES	100
OHAVEI TORAH450 W 250TH STREET RIVERDALE,NY 10471	NONE	EXEMPT	RELIGIOUS EDUCATION	1,000
SHALOM YITZCHAK TORAH INSTITUTE208 5T STREET LAKEWOOD,NJ 08701	NONE	EXEMPT	RELIGIOUS EDUCATION	72
MEIR PANIM5316 NEW UTRECHT AVE BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	36
MESAMCHE LEV1364 53 RD ST BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	36
SIMCHAS YOM TOV1879 48 TH ST BROOKLYN,NY 11204	NONE	EXEMPT	INDIGENT FAMILIES	36
BAMBI424 WEST END AVE NEW YORK,NY 10022	NONE	EXEMPT	INDIGENT FAMILIES	36
CHOFETZ CHAIM HERITAGE CTR361 SPOOK ROCK ROAD SUFFERN,NY 10901	NONE	EXEMPT	OTHER	36
MESHI CHILDREN REHAB CTR 1125 OCEAN AVE LAKEWOOD,NJ 08701	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	36
ZICHRON SHLOMO7914 12TH AVE BROOKLYN,NY 11214	NONE	EXEMPT	OTHER	36
YESH BAIS MOSHE930 HICKORY STREET SCRANTON,PA 18501	NONE	EXEMPT	RELIGIOUS EDUCATION	36
OZER DALIM1301 AVE K BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
YESH KESSER TORAH72-11 VLEIGH PLACE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	36
BIKUR CHOLIM1450 WALDEN AVE LAKEWOOD,NJ 08701	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	36
LEKOVOD SHABBOSA323 AVE F BROOKLYN,NY 11218	NONE	EXEMPT	INDIGENT FAMILIES	36
CHILDREN VILLAGE JERUSALEM15 BEEKMAN ST NEW YORK,NY 10013	NONE	EXEMPT	RELIGIOUS EDUCATION	36
YAD V'EZER1451 PRESIDENT ST BROOKLYN,NY 11213	NONE	EXEMPT	INDIGENT FAMILIES	36

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 BERR CHIAM YITCHOK 4612 12TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	OTHER	100
AFO MEDRASH ELIYAHU1116 49 TH STREET BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	100
TORAH TEMIMA CNG5504 16TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	50
BAIS MEDRASH TAHAROS540 PRESIDENT ST BROOKLYN,NY 11215	NONE	EXEMPT	RELIGIOUS EDUCATION	150
RAV CHESED50 LAWRENCE AVE BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	70
AFO TORAS CHIAM1880 54 TH STREET BROOKLYN,NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	100
AFO TAF L' TAF1274 49 TH ST BKYN BROOKLYN,NY 11219	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	120
YIKGH CHARITY FUND150-05 70TH ROAD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	1,000
KOLEL CHASIDEI GUR1937 OCEAN AVE BROOKLYN,NY 11230	NONE	EXEMPT	RELIGIOUS EDUCATION	150
ASHDOD MERKAZ CHINUCH PROJECT5014 16 TH AVE BROOKLYN,NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	249
LUEKEMIA SOCIETYPOB 9026 PITTSFIELD PITTSFIELD,MA 01202	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	18
CONG MIKVE ISRAEL73-48 136 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	OTHER	18
YESHIVA KETANA QUEENS78- 15 PARSONS BLVD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	1,000
OTHERISRAEL VARIOUS,ISRAEL 99999 IS	NONE	EXEMPT	OTHER	170
KIMPATORIN202 KEAP STREET BROOKLYN,NY 11211	NONE	EXEMPT	OTHER	360
YESH CHASAN SOFER1819 50TH ST BROOKLYN,NY 11230	NONE	EXEMPT	RELIGIOUS EDUCATION	72
SCHI345 OAK ST LAKEWOOD,NJ 08701	NONE	EXEMPT	RELIGIOUS EDUCATION	100
TZEDAKA V'CHESED AFULA ED CTR1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
ZICHRON AVRAM ELIYAHU 944 PARK TERRACE LAKEWOOD,NJ 08701	NONE	EXEMPT	INDIGENT FAMILIES	36
MANHIGUT YEHUDITPOB 241 CEDARHURST,NY 11516	NONE	EXEMPT	OTHER	100
YAD ELIEZER1102 E 26 TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	100
ICHUD HAYESHIVOS1274 49 TH ST BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	360
CONG SHAAREI ZION2030 OCEAN PKWY BROOKLYN,NY 11223	NONE	EXEMPT	RELIGIOUS EDUCATION	36
YESHIVA BAIS PIONCHOS 1951 NEW CENTRAL AVE LAKEWOOD,NJ 08701	NONE	EXEMPT	RELIGIOUS EDUCATION	65
MECHON RUTH CHESED CTR 4502 18 TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	120
YESHIVA MEON HATORAH POB 188 ROOSEVELT,NJ 08555	NONE	EXEMPT	RELIGIOUS EDUCATION	36
KOLLEL BAIS AHARON TZVI 235 PENN STREET BROOKLYN,NY 11211	NONE	EXEMPT	RELIGIOUS EDUCATION	25
YESHIVA DERECH CHAIM 1178 E 27 TH STREET BROOKLYN,NY 11210	NONE	EXEMPT	RELIGIOUS EDUCATION	36
MARKAZ HABRITPOB 876 MONSEY,NY 10952	NONE	EXEMPT	OTHER	210
TIFERES ACHIM1237 45 TH ST BROOKLYN,NY 11219	NONE	EXEMPT	OTHER	250

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				
ZICHRON SHLOM REFUA FUND 1319 51 ST BROOKLYN,NY 11219	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	100
AHH138-45 78 TH DRIVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	100
CONG OHEL YITZCHOK137-58 70TH AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	100
ISRAEL PURIM FUND205 W BEECH ST LONG BEACH,NY 11561	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	50
ORLANDO TORAH ACADEMY 11200 S APUPKA VNELAND RD ORLANDO,FL 32836	NONE	EXEMPT	RELIGIOUS EDUCATION	50
YESHIVA ETZION180-01 UNION TPKE FLUSHING,NY 11366	NONE	EXEMPT	RELIGIOUS EDUCATION	50
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	180
CHAZAQ144-0269 RD FLUSHING,NY 11367	NONE	EXEMPT	OUTREACH	54
TOV68-58 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	400
KOLEL SHOMREO HACHOMOA 111 AUDLEY ST KEW GARDEN,NY 11415	NONE	EXEMPT	INDIGENT FAMILIES	200
MESAMCHE LEV1364 53RD ST BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	50
RACHEIM1540 CONEY ISLAND AVE BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	30
ISRAEL SETTLEMENT FUND18 RECHOV YEHUDA HANASI VARIOUS,ISRAEL 99999 IS	NONE	EXEMPT	OTHER	180
OORAH1805 SWARTHMORE AVE LAKEWOOD,NJ 08701	NONE	EXEMPT	OUTREACH	1,040
REFUAH HELPLINE9 MERON DR MONROE,NY 10950	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	180
MANHIGUT YEHUDITPOB 241 CEDARHURST,NY 11516	NONE	EXEMPT	OTHER	2,000
BAIS YOSEF D'ULEM139-19 72 RD FLUSHING,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	500
BMKGH75-02 137 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	250
NEVE MICHAELOARDER CHANNA ISRAEL VARIOUS,ISRAEL 99999 IS	NONE	EXEMPT	OTHER	360
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
TI UPSTATE NY769 PARK AVE ROCHESTER,NY 14607	NONE	EXEMPT	INDIGENT FAMILIES	100
SPECIAL CHILDREN CTR1400 PROPECT STREET LAKEWOOD,NJ 08701	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	250
AFO ATERET HATORA1882 58 TH ST BROOKLYN,NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	54
BY HS OF ST LOUIS700 NORTH SOUTH ROAD ST LOUIS,MO 63130	NONE	EXEMPT	RELIGIOUS EDUCATION	25
MTJ145 E BDWY NEW YORK,NY 10002	NONE	EXEMPT	RELIGIOUS EDUCATION	120
A TIME131 48TH BROOKLYN,NY 11219	NONE	EXEMPT	OTHER	640
PROJECT INSPIRE1407 BROADWAY NEW YORK,NY 10018	NONE	EXEMPT	OUTREACH	630
BONEI OLAM54 BUTTELL AVE LAKEWOOD,NJ 08701	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	250
VAAD LHATZOLAS NIDCHEI YISROEL1566 CONEY ISLAN AVE BROOKLYN,NY 11230	NONE	EXEMPT	OTHER	180
OHR TORA4 PHYLLIS TERRACE MONSEY,NY 10952	NONE	EXEMPT	OTHER	54

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Name and address (home or business)				
a Paid during the year				
LMAN ACHAI1781 E 23RD ST BROOKLYN,NY 11229	NONE	EXEMPT	INDIGENT FAMILIES	100
AFO TIFERES YEHOSHUA1781 E 23RD ST BROOKLYN,NY 11229	NONE	EXEMPT	INDIGENT FAMILIES	100
RAV CHESED50 LAWRENCE AVE BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	90
KEREN SIMCHAS CHOSON V'KALLAH712 MONTGOMERY ST BROOKLYN,NY 11213	NONE	EXEMPT	INDIGENT FAMILIES	250
YESHIVA OF WATERBURY32 HILLSIDE AVE WATERBURY,CT 06710	NONE	EXEMPT	RELIGIOUS EDUCATION	150
DERECH HARAMBAM1303 53 ST BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	200
AFO HIDABROOT1520 39 ST BROOKLYN,NY 11218	NONE	EXEMPT	OUTREACH	100
ASHDOD MERKAZ CHINUCH PROJECT5014 16 TH AVE BROOKLYN,NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	99
HASHIUUVAYNU144-02 JEWEL AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	OUTREACH	170
BAIS YOSEF D'ULEM139-19 72 RD FLUSHING,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	500
YAD BATYA L' LKALLAH1256 E 26 TH ST BROOKLYN,NY 11210	NONE	EXEMPT	RELIGIOUS EDUCATION	400
KOLLEL NER DOVID76-01 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	260
YESH TIFERES NAFTALI 3059ENGLISHTOWN RD JAMESBURG,NJ 08831	NONE	EXEMPT	RELIGIOUS EDUCATION	1,000
CHILD LIFE SOCIETY1347 43RD ST BROOKLYN,NY 11219	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	180
BAMBI138-33 78 RD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	250
DARCHEI MENACHEM432 RUTLAND RD BROOKLYN,NY 11203	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	250
BY QUEENS124-50 METORPOLITAN AVE KEW GARDEN,NY 11415	NONE	EXEMPT	RELIGIOUS EDUCATION	250
YESHIVA KNESSET YEHUDA848 E 13 ST BROOKLYN,NY 11230	NONE	EXEMPT	RELIGIOUS EDUCATION	100
OHE MOSHE1514 39 TH ST BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	36
MERKAZ TORAH V XCHESED RECHOV HADMOR M SADIGURA 25 VARIOUS,ISRAEL 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	100
PESACH TOIKVAH18 MIDDLELTON ST V BROOKLYN,NY 11206	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	100
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	50
BM KGH75-02 137 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	140
KEREN ANIYIM68-29 MAIN ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	1,070
GOMLEI CHESED637 6TH ST LAKEWOOD,NJ 08701	NONE	EXEMPT	INDIGENT FAMILIES	50
EZRAS YIROEL4415 14TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	72
RSA76-01 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	72
EZRAT ISRAEL806 EASTERN PKWY BROOKLYN,NY 11213	NONE	EXEMPT	RELIGIOUS EDUCATION	54
GEMCH CHASANIM TOMCHEI 770 EASTERN PKWY BROOKLYN,NY 11213	NONE	EXEMPT	INDIGENT FAMILIES	54
JEP76-01 147 ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	OUTREACH	100

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				
TORAH TEMIMA ORG5504 16TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	72
TORAH TEMIMA ORG5504 16TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	100
BM KGH75-02 137TH ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	100
CENTRAL FUND FOR ISRAEL C/O MARCUS AVE OF AMERICAS NEW YORK,NY 10018	NONE	EXEMPT	OTHER	1,200
YIKGH CHARITY FUND150-05 70TH ROAD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	50
TOV68-58 147TH ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	1,000
CONG SHAAREI ZION2030 OCEAN PKWY BROOKLYN,NY 11223	NONE	EXEMPT	TEMPLE/SYNAGOGUE	36
TZEDAKA V 'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
BNOS MALKA7102 113TH STREET FLUSHING,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	100
AFO BEIT EL50 POLK AVE HEMPSTEAD,NY 11550	NONE	EXEMPT	INDIGENT FAMILIES	1,000
YESHIVAT BET EL29-10 TOMSON AVE LIC,NY 11101	NONE	EXEMPT	INDIGENT FAMILIES	1,500
RCCS762 BEDFORD AVE BROOKLYN,NY 11223	NONE	EXEMPT	SICK/DISABLED/FAMILIES/CHILDREN	340
ERNA LINDENFELD HACHNOPSAS KALLA147-32 77TH ROAD KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	56
AFO NOAM HATORAH1362 54TH STREET BROOKLYN,NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	25,000
YESHIVAS OHR HACHAYIM 141-61 71 ST AVE KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	50
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
MERKAZ MOSDOS VISNITZ70-50 136 TH ST KEW GARDEN HILLS,NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	100
BET YAKOV OROT SARA1123 AVE N BROOKLYN,NY 11230	NONE	EXEMPT	RELIGIOUS EDUCATION	50
BETH ZVUL100 E MOSHOLU PKWY BRONX,NY 10458	NONE	EXEMPT	OTHER	200
YESHIVAS CHASAN SOFER 50TH STREET BTWN 18 AND 19 AVE NEW YORK,NY 12230	NONE	EXEMPT	RELIGIOUS EDUCATION	180
KOLLEL MISHKAN SHLOMO 5014 16 TH AVE BROOKLYN,NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	1,000
CHOFETZ CHAIM HERITAGE CTR361 SPOOK ROCK ROAD SUFFERN,NY 10901	NONE	EXEMPT	RELIGIOUS EDUCATION	50
AFO BEIT MOAZ40/6 NACHAL SOREK RAMAT BEIT SHMESH VARIOUS,ISRAEL 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	100
CONG TORAH LODAAS138-53 77TH AVE FLUSHING,NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	100
BONEI OLAM54 BUTTELL AVE LAKEWOOD,NJ 08701	NONE	EXEMPT	TEMPLE/SYNAGOGUE	500
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	50
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	50
CONG OSEH TZEDAKA V'CHESED4310 16 TH AVE BROOKLYN,NY 11219	NONE	EXEMPT	TEMPLE/SYNAGOGUE	150
TZEDAKA V'CHESED1424E 34TH ST BROOKLYN,NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	36
OHR MENACHEM1960 53RD ST BROOKLYN,NY 11229	NONE	EXEMPT	RELIGIOUS EDUCATION	250

Additional Data

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

Form 990PF - Special Condition Description:

Special Condition Description

TY 2011 Other Expenses Schedule

Name: MASADA FOUNDATION

EIN: 16-1622664

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NYS FILING FEE	50	0	0	50

TY 2011 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