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**Return of Private Foundation** 

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

		lendar year 2013 or tax year beginning	12	/17 , 2013, and	ending		12/31, 2013
	Name	of foundation MALLAH FAMILY FOUND	ATION INC			A Employer identifi	cation number
C/O DAVID DORFMAN					46-4319882	2	
_	Numb	er and street (or P O box number if mail is not delivered	d to street address) Room/suite		B Telephone number (see instructions)		
						(73	2) 404-1860
	555	ROUTE 1 SOUTH		300	0	,	.,
_		town, state or province, country, and ZIP or foreign po	stal code		-		
						C If exemption applica	tion is
	ISE	LIN, NJ 08830				pending, check here	
_		ck all that apply   X   Initial return	Initial return o	of a former public	charity	1_	.□
G	Cile	Final return	Amended ret	•	Charity	D 1 Foreign organizati 2 Foreign organizati	
		Address change	Name change			85% test, check h	ere and attach
	Cho	ck type of organization X Section 501(				computation .	
'n	_	ection 4947(a)(1) nonexempt charitable trust	Other taxable private			E If private foundation	<b>L</b> 1 1
			unting method X Ca		<del></del>	under section 507(b)	
'						F If the foundation is	
			ther (specify) column (d) must be on			under section 507(b)	(1)(B), check here .
				casii basis j		1	(d) Disbursements
L	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net investmer	nt	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in	expenses per books	ıncome		ıncome	purposes
_		column (a) (see instructions) )	5,000,000.				(cash basis only)
-00	1	Contributions, gifts, grants, etc., received (attach schedule) if the foundation is <b>not</b> required to	3,000,000.	<del></del>			
Š	2	Check ► L attach Sch B	3.		3.	3.	
7	3	Interest on savings and temporary cash investments	3.		<del>  </del> -		
_	4	Dividends and interest from securities					
<b>e</b>		Gross rents					<del></del>
≽	b	Net rental income or (loss)					<del></del>
3	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales pince for all					<del></del>
en/	_	assets on line 6a					
A. P. M. M. F. F. Sven Wed Y	7	Capital gain net income (from Part IV, line 2).					<del></del>
Ų	] 8	Net short-term capital gain					
25	; 9 40 a	Income modifications Gross sales less returns					
4		and allowances · · · ·					···
		Less Cost of goods sold .					
U		Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	5,000,003.		3.	3.	<del></del>
_	12	Total Add lines 1 through 11	3,000,003.		3.	٥.	
	13	Other employee salaries and wages	V	<del></del>			
es	14	Other employee salaries and wages !					
SU	15	Pension plans, employee benefits			-		
ă	16 a	Legal fees (attach schedule)		· · · ·			<del> </del>
Ш	b						
Ě	c	Other professional fees (attach schedule)					
Administrative Expenses	17	InteresDGDEN, U.T.			_		
ij	18	Taxes (attach schedule) (see instructions)					
Ē	19	Depreciation (attach schedule) and depletion.		-		-	
ĕ		Occupancy					
and	21	Travel, conferences, and meetings					
0	22	Printing and publications		· <u>·</u>			<del></del>
Operating	23	Other expenses (attach schedule)					
ē	24	Total operating and administrative expenses.					
o		Add lines 13 through 23	0				
	25	Contributions, gifts, grants paid					
_	26	Total expenses and disbursements Add lines 24 and 25	0				(
	27	Subtract line 26 from line 12					
		Excess of revenue over expenses and disbursements	5,000,003.		2		
		Net investment income (if negative, enter -0-)			3.		
_	С	Adjusted net income (if negative, enter -0-)				3.	

Part I		Polones Shorts	Attached schedules and amounts in the	Beginning of year	End of year			
نه	art II	Datatice Streets	description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bear	ing		5,000,003.	5,000,003.		
	2	Savings and temporary	cash investments	_				
	3	Accounts receivable ▶						
ŀ			btful accounts ▶					
	4	Pledges receivable ▶_						
		Less allowance for dou	btful accounts ▶					
	5	Grants receivable						
	6	Receivables due from	officers, directors, trustees, and other					
		disqualified persons (at	tach schedule) (see instructions)					
	7	Other notes and loans r	eceivable (attach schedule)					
			btful accounts ▶					
ţ	8		e					
sets	9		eferred charges					
As	10 a		e government obligations (attach schedule)					
			stock (attach schedule)					
			bonds (attach schedule)					
	11	Investments - land, buildings and equipment basis Less accumulated deprecia (attach schedule)	s, •					
	12	,	loans					
	13	Investments - other (atta	ach schedule)					
	14	Land, buildings, and equipment basis Less accumulated depreca	ation >					
	15	Other assets (describe	<b>&gt;</b> )					
	16		completed by all filers - see the					
		instructions Also, see p	age 1, item I)	0	5,000,003.	5,000,003.		
_	17	Accounts payable and a	ocrued expenses					
	18					1		
ç	19					1		
itie	20		ors, trustees, and other disqualified persons			]		
Liabilities	21		otes payable (attach schedule)			1		
Ë	22		∍ ▶)		-	1		
		(						
	23	Total liabilities (add line	es 17 through 22)	0	(	d		
_ _		Foundations that fol	low SFAS 117, check here ▶ 24 through 26 and lines 30 and 31.					
Balances	24	Unrestricted						
ם	25							
_	26	Permanently restricted -				1		
디			not follow SFAS 117, ▶ 🗓			1		
Ŧ		check here and com	plete lines 27 through 31.					
ō	27		cipal, or current funds					
ë	28		land, bldg, and equipment fund			1		
Net Assets or Fund	29	•	ulated income, endowment, or other funds	V	5,000,003.	1		
et/	30		i balances (see instructions)	0	5,000,003.	1		
ž	31		net assets/fund balances (see		, ,			
				0	5,000,003.			
P	art II		anges in Net Assets or Fund			<del></del>		
			palances at beginning of year - Part		must agree with			
-			ed on prior year's return).		_			
2		er amount from Part I,				5,000,003.		
3	Oth	er increases not include	ded in line 2 (itemize) ▶			, , , , , , , , , , , , , , , , , , , ,		
4	Add	lines 1, 2, and 3			4	5,000,003.		
_								
6	Tota	al net assets or fund h	n line 2 (itemize) ► alances at end of vear (line 4 minus	line 5) - Part II, column (	b), line 30 6	5,000,003.		

Pag	e	3

Part IV Capital Gains	and Losses for Tax on Inv	estment Income			
(a) List an	d describe the kind(s) of property sold	(e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
2-story b	P - Purchase D - Donation	(mo , day, yr )	(mo, day, yr)		
1a					
b				-	
c					
d					<del>-</del>
e					
	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	.ce)
(e) Gross sales price	(or allowable)	plus expense of sale	1	(e) plus (f) mini	
	·		<del> </del>		
<u>a</u>					·
<u>b</u>					
<u>c</u>					
<u>d</u>					<del></del>
<u>e</u>					
Complete only for assets	showing gain in column (h) and owner			Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i)	COI	<ul><li>(k), but not less t Losses (from co</li></ul>	
	as 01 12/31/69	over col (j), if any	<u> </u>	200303 (110111 00	
<u>a</u>	<del> </del>		ļ		
b		"	ļ		
С					
d					
e					
2. Capital gain not income or		f gain, also enter in Part I, line 7 🧻			
2 Capital gain net income or	(Het Capital loss)	f (loss), enter -0- ın Part I, lıne 7	2		
3 Net short-term capital gair	or (loss) as defined in sections 1	222(5) and (6)			
If gain, also enter in Par	t I, line 8, column (c) (see ins	tructions) If (loss), enter -0- in $igrlack{1}{igrl}$			
Part I, line 8			3		
Part V Qualification l	Inder Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
(For optional use by domestic	private foundations subject to th	ne section 4940(a) tax on net invest	ment incor	ne)	
	•	• •		,	
If section 4940(d)(2) applies,	leave this part blank NO	r available for initial	YEAR RE	TURNS	
, , , , , ,	·				
Was the foundation liable for	the section 4942 tax on the distril	butable amount of any year in the b	ase period	اء ا	Yes No
	not qualify under section 4940(e)		·	_	<u> </u>
		r, see the instructions before making	any entri	es	
(a)	(b)	(c)	, , , , , , , , ,	(d)	
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2012				(00: (0) 0:::000 0)	
2011					
2010				<del></del> -	·
2009	· · · · · -				<del></del>
2008				<del></del>	<del></del>
2000		<u> </u>			
2 Total of line 1 column (4)			,		
2 Total of line 1, column (d)			2		
		e the total on line 2 by 5, or by the			
number of years the found	aation has been in existence if les	s than 5 years	3		
4 Enter the net value of non	charitable-use assets for 2013 fro	om Part X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		
	·				
7 Add lines 5 and 6			7		
• • • •					<del></del>
8 Enter qualifying distributio	ns from Part XII, line 4		8		
If line 8 is equal to or gre	eater than line 7, check the box	in Part VI, line 1b, and complete t	hat part i	using a 1% tax	rate See the
Part VI instructions	<u></u>		<u> </u>		

· By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict Х Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 7 8a Enter the states to which the foundation reports or with which it is registered (see instructions) 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) 8b Х 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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Х Part XIV...... Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and Х

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_	Section (2010) Immunitarity Condition (100 Inc. 100 Inc.	7002		age 0
	rt VII-A Statements Regarding Activities (continued)			1
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	·			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ►N/A			
14	The books are in care of ▶ DORFMAN MIZRACH & THALER, LLP Telephone no ▶ 732-404	-186	0	
	Located at ▶555 ROUTE ONE SOUTH ISELIN, NJ ZIP+4 ▶ 08830			
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			Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	l		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
4.0	During the year did the foundation (either directly or indirectly)			
ıa				
	· · · · · · · · · · · · · · · · · · ·			
	(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? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	_		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b_		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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 2013?	1c		Х
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))			
9	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and			
_	6e, Part XIII) for tax year(s) beginning before 2013?			
L	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		- 1	
	at any time during the year?		I	
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or		- 1	
	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 2013 )	<u>3</u> b		_ X
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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 2013?	4b	1	Χ

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Pai	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
5 a	During the year did the foundation pay or incur any amou	nt to				į
	(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	4945(e))?	. Yes X No		ļ
	(2) Influence the outcome of any specific public ele	ction (see section 4	1955), or to carry or	n,		
	directly or indirectly, any voter registration drive?			. Yes X No		
	(3) Provide a grant to an individual for travel, study, or other	ner sımılar purposes?		. Yes X No	.	
	(4) Provide a grant to an organization other than a	charitable, etc., org	janization described i	n		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	see instructions)		. Yes X No		
	(5) Provide for any purpose other than religious, ch	aritable, scientific,	literary, or education	al		
	purposes, or for the prevention of cruelty to children of	r anımals?		. Yes X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in		
	Regulations section 53 4945 or in a current notice regard	ing disaster assistand	æ (see instructions)?		5b	
	Organizations relying on a current notice regarding disast	er assistance check h	ere			
С	If the answer is "Yes" to question 5a(4), does the	foundation claim ex	emption from the ta	x		
	because it maintained expenditure responsibility for the gi	ant?		. Yes No		
	If "Yes," attach the statement required by Regulations sections	ion 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fund	s, directly or indire	ctly, to pay premium	s		
	on a personal benefit contract?			. Yes X No		
b	Did the foundation, during the year, pay premiums, direct				6ь	Х
	If "Yes" to 6b, file Form 8870					
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X No		
þ	If "Yes," did the foundation receive any proceeds or have	any net income attril	outable to the transaction	nn?	7b	
	Information About Officers, Directors				yees,	
1	and Contractors  List all officers, directors, trustees, foundation n	nanagers and their	compensation (see	instructions)		
<u>'</u>		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense	account
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo	
ATC	H 1		0	q		0
2	Compensation of five highest-paid employees	(other than thos	se included on line	e 1 - see instruction	ons). If no	ne, enter
	"NONE."	#N THE		(d) Contributions to		·
(a	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expense other allo	
		devoted to position		compensation		
	NONE					
			ı			
	· · · · · · · · · · · · · · · · · · ·					
			I			
	-tn-					
<b>-</b>						
Tota	I number of other employees paid over \$50,000 .	<u> </u>		<u> ▶ </u>		
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	MALLAH FAMILY FOUNDATION INC	46-4319882
orm 990-PF	(2013)	Page
Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)	Paid Employees,
3 Five	highest-paid independent contractors for professional services (see instructions). If non	e, enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type o	f service (c) Compensation
NONE		
Total numb	per of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
List the fou organization	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as is and other beneficianes served, conferences convened, research papers produced, etc.	s the number of Expenses
1 N/A		
2		
3		
·		
4		
Part IX-B		
	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	; 	
2		
All other pr	ogram-related investments. See instructions	
a NONE		1

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Total. Add lines 1 through 3 . . . . .

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Par	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions)	gn foundati	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	416,667.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	416,667.
е			
	1c (attach detailed explanation)	]	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see	3	416,667.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	4	6,250.
5		5	410,417.
6	Minimum investment return. Enter 5% of line 5	6	20,521.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ □ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	20,521.
2 a	Tax on investment income for 2013 from Part VI, line 5	_	·
b	Income tax for 2013 (This does not include the tax from Part VI) 2b	1	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	20,521.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	20,521.
6	Deduction from distributable amount (see instructions)	6	<u> </u>
7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	20,521.
Pari	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	
b	Program-related investments - total from Part IX-B	1b	<del></del>
2	Program-related investments - total from Part IX-B  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		<del></del>
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	<del></del>	·-
_	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when c		
	qualifies for the section 4940(e) reduction of tax in those years		ino roundation

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Form 990-PF (2013) Page 9 Part XIII Undistributed Income (see instructions) (b) (d) Years prior to 2012 2012 2013 Distributable amount for 2013 from Part XI, 20,521. Undistributed income, if any, as of the end of 2013 Enter amount for 2012 only . . . . . . . Total for pnor years 20 11 ,20 10 ,20 09 Excess distributions carryover, if any, to 2013 a From 2008 ..... **b** From 2009 . . . . . c From 2010 ..... **d** From 2011 . . . . . . From 2012 . . . . . Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ a Applied to 2012, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election d Applied to 2013 distributable amount ..... e Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 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 4a from line 2a Taxable amount - see f Undistributed income for 2013 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2014 ......... 20,521. Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . . Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2009 . . .

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b Excess from 2010 . . .c Excess from 2011 . . .d Excess from 2012 . . .e Excess from 2013 . . .

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Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment					
Recipient	Recipient Show any relationship to Name and address (home or business) Residual Show any relationship to Name and address (home or business) Recipient Show any relationship to Show any foundation manager or substantial contribution Show and the Contribution Show any foundation status of recipient Show and Sh							
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount				
a Paid during the year	Or Substantial Contributor	<del></del>						
a Taid daring the year								
		ŀ		1				
				1				
		Ì						
		i						
	•							
Total			▶ 3a					
b Approved for future payment								
1								
Total			▶ 3b					

Page 12

	amounts unless otherwise indicated		ated business income	Excluded b	y section 512, 513, or 514	(e)
_	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
=		· · ·-				(Dec manacions)
_		<u> </u>		<del>-  </del>		
				<del>-  </del>		
	<del></del>			-		
f						
	and contracts from government agencies					
-	ship dues and assessments					
	n savings and temporary cash investments					
	is and interest from securities			14	3.	
	al income or (loss) from real estate	· ···				
	-financed property					
	debt-financed property					
	I income or (loss) from personal property					<del>, u</del>
	vestment income					
	oss) from sales of assets other than inventory	-				
	me or (loss) from special events					
	rofit or (loss) from sales of inventory					
	venue a			-		·
-						
		<del></del>				
e	A 11 - 1 (b) (d) (d/2)				3.	<del></del>
	Add columns (b), (d), and (e)					
	dd line 12, columns (b), (d), and (e)					
art XVI-	Relationship of Activities		complishment of F	vemnt Purn	nees	
ine No.	Explain below how each activit	-	•		•	
▼	accomplishment of the foundation	on's exemp	t purposes (other thar	n by providing	funds for such purpose	s) (See instructions
						-
				•		
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Part	XVII	Information R Exempt Orga		ansfers To and Tr	ansacti	ons an	d Relationships	With Non	chari	itable	)		
(	ın sed organ	ction 501(c) of the Conzations?	ode (other than	engage in any of the section 501(c)(3) org	anizations	s) or in s	section 527, relating			Yes	No		
		·	-	a noncharitable exen							v		
(	(1) Ca	ash			• • • • •				1a(1)		X		
		transactions					• • • • • • • • • • • • • • • • • • • •	• • • • • •	1a(2)				
			oncharitable exer	mpt organization					1b(1)		Х		
(	(2) Pi	rchases of assets fr	om a noncharita	ble exempt organization	on				1b(2)		Х		
(	(3) Re	ental of facilities, equ	ipment, or other	assets					1b(3)		Х		
(	(4) Re	eimbursement arrang	ements						1b(4)		Х		
(	( <b>5)</b> Lo	ans or loan guarante	es						1b(5)		Х		
	(6) Pe	erformance of service	es or membersh	ip or fundraising solici	tations		• • • • • • • • • • • • • • • • • • • •				X		
C :	Snarir	ng of facilities, equipr	ment, mailing lis	ts, other assets, or pa s," complete the follo	ia employe	es	Column (h) should		1c	<b>f</b>	X		
u ı	value	of the goods other	assets or servi	ces given by the rep	owing sci orting fou	ndation	olumn (b) should	aiways snow	/ ine :	fair m fair m	arke		
				gement, show in colu									
(a) Lin		(b) Amount involved	7	onchantable exempt organiz			cription of transfers, trans						
		N/A				N/A							
				<del></del>									
						<del></del>	<del>-</del>						
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		<del></del>	-										
c	lescri		of the Code (ot wing schedule	iliated with, or relate her than section 501( (b) Type of orga	c)(3)) or ıı		1 527?	[ 		es X	No		
		(3) Hame of organization		(b) Type of olga		<del></del>	(c) Descr	iption of relations	· iib				
				<del></del>									
					•					_			
	,												
	Unde	r penalties of perjury, I decla ct, and complete Declaration of	are that I have examin f preparer (other than ta	ed this return, including accor xpayer) is based on all information	mpanying scho	edules and eparer has a	statements, and to the bes	t of my knowledg	e and b	elief, it i	is true,		
Sign		$\mathcal{D}_{i}\mathcal{D}_{j}$		5/14/14	, i	_		May the IRS			_		
Here	Sig	nature of officer or trustee		Date	Z	Title	95017	with the pre-		Yes _	below No		
	_1	Print/Type preparer's na	me	Preparer's signature	<del></del>		Date	,, , , , , , , , , , , , , , , , , , ,	TIN				
Paid		DAVID DORFMAN		I) M				, III	20135	5020	a		
Prepa	arer	-	RFMAN MIZRA	CH & THALER,	LP		Firm's E	- 10 15					
Use (	Only		5 ROUTE ONE				7 11/13 5	<u> </u>					
-			ELIN, NJ				08830 Phone no 732-4			04-1860			

## Schedule B

(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

## **Schedule of Contributors**

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

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs.gov/form990

OMB No 1545-0047

Name of the organization		Employer identification number					
MALLAH FAMILY FOUNDATION							
C/O DAVID DORFMAN	46-4319882						
Organization type (check one)							
Filers of: Section:							
Form 990 or 990-EZ	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private fou	ındatıon					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundate	tion					
	501(c)(3) taxable private foundation						
Instructions  General Rule							
	Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 c	or more (in money or					
property) from any one c	contributor Complete Parts I and II						
Special Rules							
under sections 509(a)(1)	organization filing Form 990 or 990-EZ that met the 33 1/3 % support to and 170(b)(1)(A)(vi) and received from any one contributor, during the or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	e year, a contribution of					
during the year, total con	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, total contributions of more than \$1,000 for use <i>exclusively</i> 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 total 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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization MALLAH FAMILY FOUNDATION INC

Employer identification number 46-4319882

	C/O DAVID DORFMAN		40 4313002
Part I	Contributors (see instructions) Use duplicate copies of Pa	rt I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	SHELDON MALLAH  12 HASTINGS LANDING  HASTINGS ON HUDSON, NY 10706	\$5,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization MALLAH FAMILY FOUNDATION INC C/O DAVID DORFMAN

Employer identification number 46-4319882

Part II	Noncash Property	(see instructions).	Use duplicate copies of	f 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
 - - -		  \$	
(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
		    \$\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Page 4 Name of organization MALLAH FAMILY FOUNDATION INC Employer identification number C/O DAVID DORFMAN 46-4319882 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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TRUSTEES	
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LIST OF OFFICERS,	
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PART	
990PF,	
FORM	

46-4319882

ATTACHMENT 1

COMPENSATION	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT
NAME AND ADDRESS	SHELDON MALLAH 12 HASTINGS LANDING HASTINGS ON HUDSON, NY 10706

GRAND TOTALS

6068HC 3831 5/14/2014 8:54:36 AM V 13-4.7F