

For calendar year 2017, or tax year beginning 10-01-2017, and ending 09-30-2018

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		B Telephone number (see instructions) (718) 762-8700	
City or town, state or province, country, and ZIP or foreign postal code FLUSHING, NY 11367		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		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 ☐	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 20,338,088	J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	

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 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)	20,000,850			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	17,613	17,613		
	4 Dividends and interest from securities	44,561	44,561		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	48,486			
	b Gross sales price for all assets on line 6a _____ 48,486				
	7 Capital gain net income (from Part IV, line 2)		48,486		
	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	20,111,510	110,660		
	13 Compensation of officers, directors, trustees, etc	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 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		50
	24 Total operating and administrative expenses. Add lines 13 through 23	50	0		50
	25 Contributions, gifts, grants paid	15,012			15,012
	26 Total expenses and disbursements. Add lines 24 and 25	15,062	0		15,062
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	20,096,448			
	b Net investment income (if negative, enter -0-)		110,660		
	c Adjusted net income (if negative, enter -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	85,865	70,874	70,874
	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 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)	0	20,267,214	20,267,214
	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)	85,865	20,338,088	20,338,088	
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 ☐ 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 ☒ 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	81,961	20,334,184	
	30 Total net assets or fund balances (see instructions)	81,961	20,334,184	
31 Total liabilities and net assets/fund balances (see instructions) .	85,865	20,338,088		

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	81,961
2 Enter amount from Part I, line 27a	2	20,096,448
3 Other increases not included in line 2 (itemize) ▶ _____	3	155,775
4 Add lines 1, 2, and 3	4	20,334,184
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	20,334,184

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)
1 a GOLDMAN SACH-FUTURE CONTRACT	P	2017-09-30	2017-12-31
b GOLDMAN SACH-FUTURE CONTRACT	P	2017-09-30	2017-12-31
c GOLDMAN SACH- ST REALIZED	P	2017-09-30	2017-12-31
d			
e			

(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 27,220			27,220
b 18,147			18,147
c 3,119			3,119
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) 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			27,220
b			18,147
c			3,119
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	48,486
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 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 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))
2016	653,650	85,541	7 641365
2015	18,152	92,835	0 195530
2014	16,503	128,897	0 128032
2013	22,254	102,171	0 217811
2012	22,331	123,806	0 180371

2 Total of line 1, column (d)	2	8 363109
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	1 672622
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	5,841,946
5 Multiply line 4 by line 3	5	9,771,367
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,107
7 Add lines 5 and 6	7	9,772,474
8 Enter qualifying distributions from Part XII, line 4	8	15,062

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b	1	2,213
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	2,213
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	2,213
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	0
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	0
7	Total credits and payments. Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	2,213
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 2018 estimated tax ☐ Refunded ☐	11	

Part VII-A Statements Regarding Activities

	Yes	No
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?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ 0 (2) On foundation managers ☐ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	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? <i>If "Yes," attach the statement required by General Instruction T</i>	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? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ 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? <i>If "No," attach explanation</i> .	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 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	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 instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	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 15			
16	At any time during calendar year 2017, 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? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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 ☒ No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? ☐ 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 2017? ☐ 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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? ☐ Yes ☒ No 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 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? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2017 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 2017). ☐ Yes ☒ No 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 2017? 4b			No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	☐ Yes ☒ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
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 instructions)?		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>		6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RICHARD KIRSCHNER 137-05 72ND ROAD FLUSHING, NY 11367	PRESIDENT/DIRECTOR 0 50	0	0	0
RACHELLE KIRSCHNER 137-05 72ND ROAD FLUSHING, NY 11367	TREASURER/DIRECTOR 0 50	0	0	0
STANLEY FLEISHMAN 98 RYE RIDGE ROAD HARRISON, NY 10528	SECRETARY/DIRECTOR 0 50	0	0	0

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

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

Total number of other employees paid over \$50,000. ▶ 0**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

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 GRANTS PAID & OPERATING COSTS	15,062
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 ▶ 0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see 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	5,852,533
b	Average of monthly cash balances.	1b	78,377
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	5,930,910
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	5,930,910
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	88,964
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	5,841,946
6	Minimum investment return. Enter 5% of line 5.	6	292,097

Part XI Distributable Amount (see 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	292,097
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	2,213
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	2,213
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	289,884
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	289,884
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	289,884

Part XII Qualifying Distributions (see 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	15,062
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	15,062
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 instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	15,062

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 instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				289,884
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.				16,149
b From 2013.				17,150
c From 2014.				10,061
d From 2015.				13,510
e From 2016.				649,373
f Total of lines 3a through e.	706,243			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ _____ 15,062				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				15,062
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	274,822			274,822
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	431,421			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	431,421			
10 Analysis of line 9				
a Excess from 2013.				
b Excess from 2014.				
c Excess from 2015.				
d Excess from 2016.				431,421
e Excess from 2017.				

Part XIV Private Operating Foundations (see 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 2017, 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)

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) 2017	(b) 2016	(c) 2015	(d) 2014	
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 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 instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address 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 <i>Paid during the year</i> See Additional Data Table				
Total			3a	15,012
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

[illegible]

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

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

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

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

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

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	***** 2019-02-13 Date	***** Title	May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No
	Signature of officer or trustee			

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	RANDI LEE OWENCPA		2019-02-13		P01011812
	Firm's name ▶ NUSSBAUM YATES BERG KLEIN & WOLPOW LLP				Firm's EIN ▶ 26-0221653
	Firm's address ▶ 445 BROADHOLLOW RD STE 319 MELVILLE, NY 11747				Phone no (631) 845-5252

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				
1000 HELPING HANDS 7524 GCP FH NY 1960 E 7TH STREET BKLLYN NY 112237524 GCP FH NY 7524 BROOKLYN, NY 11223	NONE	EXEMPT	INDIGENT FAMILIES	50
ACHIEZER CONG1960 E 7TH STREET BROOKLYN, NY 11223	NONE	EXEMPT	TEMPLE/SYNAGOGUE	180
AF BEER CHAIM YITZCOK 1054 43 RD STREET BROOKLYN, NY 10016	NONE	EXEMPT	OTHER	200
Total ▶ 3a				15,012

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>				
ASHDOD MERKAZ CHINUCH 5014 16TH AVE BROOKLYN, NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	149
ASHDOD MERKAZ CHINUCH 5014 16TH AVE BROOKLYN, NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	149
BAIS MEDRASH TAHAROS 540 PRESIDENT ST BROOKLYN, NY 11215	NONE	EXEMPT	RELIGIOUS EDUCATION	250
Total ▶ 3a				15,012

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>				
BAIS MEDRASH TAHAROS 540 PRESIDENT ST BROOKLYN, NY 11215	NONE	EXEMPT	RELIGIOUS EDUCATION	250
BAMBI825 WEA NYC NEW YORK, NY 10003	NONE	EXEMPT	INDIGENT FAMILIES	72
BAMBI825 WEA NYC NEW YORK, NY 10003	NONE	EXEMPT	INDIGENT FAMILIES	72
Total ▶ 3a				15,012

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>				
BETH JACOB HACHASSISI 4403 15TH AVE BROOKLYN, NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	100
BIKUR CHOLIM D'SATMAR 545 BEDFORD AVE BROOKLYN, NY 11223	NONE	EXEMPT	INDIGENT FAMILIES	100
BINAT SHLOMO1134 E 15 TH ST BROOKLYN, NY 11230	NONE	EXEMPT	OTHER	126
Total ▶ 3a				15,012

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>				
BINAT SHLOMO1134 E 15 TH ST BROOKLYN, NY 11230	NONE	EXEMPT	OTHER	126
BMKGH75-02 137 ST KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	250
BNOS MALKA7102 113 TH ST FLUSHING, NY 11375	NONE	EXEMPT	RELIGIOUS EDUCATION	100
Total ▶ 3a				15,012

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>				
BNOS MALKA7102 113 TH ST FLUSHING, NY 11375	NONE	EXEMPT	RELIGIOUS EDUCATION	250
BNOS MALKA7102 113 TH ST FLUSHING, NY 11375	NONE	EXEMPT	RELIGIOUS EDUCATION	250
BY QUEESN124 50 METROPOLITYAN AVE KEW GARDEN HILLS, NY 11415	NONE	EXEMPT	RELIGIOUS EDUCATION	250
Total ▶ 3a				15,012

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>				
CHAI LIFELINE151 W 30TH ST NEW YORK, NY 10002	NONE	EXEMPT	SICK/DISABLED FAMILIES/CHILDREN	100
CHASADIM TOVIMPOB 1076 NEW YORK, NY 10002	NONE	EXEMPT	INDIGENT FAMILIES	50
CHASDEI CHASI L KALAH 1863 E 13 TH ST NEW YORK, NY 11229	NONE	EXEMPT	INDIGENT FAMILIES	250
Total ▶ 3a				15,012

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				
CHAZAQ141-24 JEWEL AVE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	OUTREACH	250
CHESED 247286 N MAIN ST SPRING VALLEY, NY 10977	NONE	EXEMPT	TEMPLE/SYNAGOGUE	100
CONG BAIS YSEF D ULEM139-19 72 RD KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	350
Total ▶ 3a				15,012

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>				
CONG CHOMOS YERUSHALAYIM 5/7 ZERITSKY JERUSALEM ISRAEL 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	180
CONG ZICHROIN ALTER 75-31 150 ST KGH 11367 KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	200
CONG MIKVEH ISRAEL 71-11 VLEIGH PLCE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	18
Total ► 3a				15,012

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>				
CONG BAIS YOSEF139-19 72 RD KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	180
CONG CHASDEI MENACHEM42 BDWY BROOKLYN, NY 11249	NONE	EXEMPT	INDIGENT FAMILIES	36
CONG ICHUD HAYESHIVOS 1274 49 ST BKLYN NY BROOKLYN, NY 11230	NONE	EXEMPT	RELIGIOUS EDUCATION	360
Total ▶ 3a				15,012

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				
CONG KHAL BNEI JOSEPH 45 BROADWAY NEW YORK, NY 10002	NONE	EXEMPT	INDIGENT FAMILIES	100
CONG MACHZIKEI HADATH1601 42 ST BROOKLYN, ISRAEL 11230 IS	NONE	EXEMPT	TEMPLE/SYNAGOGUE	200
CONG MACHZIKEI HADATH CO GLASER 1601 42 ST BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	250
Total ▶ 3a				15,012

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>				
CONG MIKVE ISRAEL 71-11 VLEIGH PLACE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	OUTREACH	22
CONG MIKVE ISRAEL 71-11 VLEIGH PLACE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	36
CONG MIKVE ISRAEL 71-11 VLEIGH PLACE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	18
Total ▶ 3a				15,012

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>				
CONG MIKVE ISRAEL 71-11 VLEIGH PLACE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	21
CONG MIKVE ISRAEL 71-11 VLEIGH PLACE BROOKLYN, NY 11223	NONE	EXEMPT	TEMPLE/SYNAGOGUE	18
CONG MIKVE ISRAEL 71-11 VLEIGH PLACE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	18
Total ▶ 3a				15,012

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>				
CONG MIKVE ISRAEL 71-11 VLEIGH PLACE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	21
CONG MIKVE ISRAEL 71-11 VLEIGH PLACE BROOKLYN, NY 11218	NONE	EXEMPT	TEMPLE/SYNAGOGUE	18
CONG MIKVE ISRAEL 71-11 VLEIGH PLACE BROOKLYN, NY 11203	NONE	EXEMPT	TEMPLE/SYNAGOGUE	21
Total ▶ 3a				15,012

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>				
CONG TORAH LODAAS 144 77 TH AVE KGH NY BROOKLYN, NY 10017	NONE	EXEMPT	OTHER	120
EIN OD MILVADO208 5TH ST LAKEWOOD, NJ 08701	NONE	EXEMPT	OTHER	50
ERNA LINDENFELD HACHOSAS KALLAH 147-32 77 RD KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	SICK/DISABLED FAMILIES/CHILDREN	50
Total ▶ 3a				15,012

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>				
EZER L' NITZRACH1435 44 ST BROOKLYN, NY 10016	NONE	EXEMPT	INDIGENT FAMILIES	100
EZER MIZAION5225 NEW UTRECHT AVE BROOKLYN, NY 10282	NONE	EXEMPT	INDIGENT FAMILIES	200
EZER MIZAION5225 NEW UTRECHT AVE BROOKLYN, NY 10282	NONE	EXEMPT	INDIGENT FAMILIES	25
Total 3a				15,012

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>				
EZRAS YISROEL20 IGROS CT SI NEW YORK, NY 10309	NONE	EXEMPT	INDIGENT FAMILIES	100
EZRAS YISROEL4415 14 TH AVE BROOKLYN, NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	100
GIOHPOB 3147 NEW YORK, NY 10277	NONE	EXEMPT	INDIGENT FAMILIES	25
Total ▶ 3a				15,012

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>				
GO KOSHER PROJECT5 LAMONT COURT BROOKLYN, NY 11215	NONE	EXEMPT	OTHER	25
GO KOSHER PROJECT5 LAMONT COURT BROOKLYN, NY 11215	NONE	EXEMPT	OTHER	36
HEBNREW FREE BURIAL ASSOC 125 MAIDEN LAN E NEW YORK, NY 10273	NONE	EXEMPT	OTHER	25
Total ▶ 3a				15,012

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>				
HEBRON FUND1760 OCEAN AVE BROOKLYN, NY 11230	NONE	EXEMPT	OTHER	200
HENREW FREE BURIAL ASSOC 125 MAIDEN LAN E NEW YORK, NY 10273	NONE	EXEMPT	OTHER	30
HOME OF SAGES OF ISRAELISRAEL ISRAEL 99999 IS	NONE	EXEMPT	OTHER	25
Total ▶ 3a				15,012

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>				
HOME OF SAGES OF ISRAEL25 WILLEET NEW YORK, NY 10002	NONE	EXEMPT	INDIGENT FAMILIES	25
HOUSE OF SAGES283 E BDWY NEW YORK, NY 10002	NONE	EXEMPT	INDIGENT FAMILIES	25
ISRAEL PURIN FUND 205 W BEACH LB NY NEW YORK, NY 10002	NONE	EXEMPT	INDIGENT FAMILIES	100
Total ▶ 3a				15,012

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>				
JEP QUEENS7601 147 ST KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	OUTREACH	100
JERUSALEM OPEN HOUSEISRAEL ISRAEL 99999 IO	NONE	EXEMPT	INDIGENT FAMILIES	25
JERW INST FT BLIND185 MADSON AVE NEW YORK, NY 10016	NONE	EXEMPT	SICK/ DISABLED FAMILIES /CHILDREN	25
Total ▶ 3a				15,012

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>				
JEWISH EXPERIENCE OF MADISON 3453 N 54 ST MILWAUKEE 53216 NEW YORK, NY 11210	NONE	EXEMPT	OUTREACH	250
JEWSIH HERITAGE CTR 1544 PROSPECT AVE EAST MEADOW, NY 11554	NONE	EXEMPT	OUTREACH	200
JINSPIREKEW GARDEN HILLS KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	TEMPLE/SYNAGOGUE	40
Total ▶ 3a				15,012

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>				
JINSPIREKEW GARDEN HILLS KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	OUTREACH	72
JINSPIREKEW GARDEN HILLS KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	OUTREACH	122
KEREN ANIYIM1246 E 13 TH ST BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	250
Total ▶ 3a				15,012

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>				
KEREN SIMCHAS CHOON KALLA 1227 PRESIDENT STR BROOKLYN, NY 11225	NONE	EXEMPT	INDIGENT FAMILIES	180
KEREN SIMCHAS CHOON KALLA 1227 PRESIDENT STR BROOKLYN, NY 11225	NONE	EXEMPT	INDIGENT FAMILIES	100
KEREN ZICHRON GEDALYAHU 1155 E 15 TH ST BROOKLYN, NY 11230	NONE	EXEMPT	INDIGENT FAMILIES	72
Total ▶ 3a				15,012

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				
KGH ERUV COMMITTEEPOB 671017 FLUSHING, NY 11367	NONE	EXEMPT	OTHER	25
KMIPARTORIN AID1324 50TH ST BROOKLYN, NY 11213	NONE	EXEMPT	OTHER	250
KNESSET YEHUDA 140 SNHEDRIA MURCHEVET 848 E 13 TH ST BKLYN 11230 BROOKLYN, NY 11229	NONE	EXEMPT	RELIGIOUS EDUCATION	200
Total ▶ 3a				15,012

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>				
KOLEL SHOMREIO HACHOMOS 18 HEYWARD STR BROOKLYN, NY 11249	NONE	EXEMPT	INDIGENT FAMILIES	180
KOLLEL SHOMREI HACHOMOS 18 HEYWARD STR BROOKLYN, NY 11249	NONE	EXEMPT	INDIGENT FAMILIES	54
KULANUPOB 305 CEDARHURST, NY 11516	NONE	EXEMPT	SICK/ DISABLED FAMILIES /CHILDREN	100
Total ▶ 3a				15,012

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				
MAIMOINDES WAY INC 5316 NEW UTERECHT AVE BROOKLYN, NY 11219	NONE	EXEMPT	OTHER	36
MAIMOINDES WAY INC 5316 NEW UTERECHT AVE BROOKLYN, NY 11219	NONE	EXEMPT	OTHER	120
MEIR PANIM LACHAYAL 383 KINGSTON AVE BROOKLYN, NY 11204	NONE	EXEMPT	OTHER	100
Total ▶ 3a				15,012

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>				
MERKAS SHIUREI TORAH 1796 45 TH STR BROOKLYN, NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	120
MESAMCHE LEV1364 53 ST BROOKLYN, NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	36
MESAMCHE LEV1364 53 ST BROOKLYN, NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	36
Total ▶ 3a				15,012

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>				
MESIVTA NEIMAS HATORAH N6104 PARK HEIGHTS BALTIMORE, NY 21215	NONE	EXEMPT	RELIGIOUS EDUCATION	100
MESIVTA NEIMAS N HATORA N6104 PARK HEIGHTS BALTIMORE, NY 11219	NONE	EXEMPT	OTHER	36
MISHKAN YOSEFISRAEL ISRAEL 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	36
Total ▶ 3a				15,012

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>				
MOSDOT BEIT SHAAN RECHOV HARAV BLOI BNEI BRAK ISRAEL 99999 IS	NONE	EXEMPT	RELIGIOUS EDUCATION	180
MTJ141 E BDWY NEW YORK, NY 10002	NONE	EXEMPT	RELIGIOUS EDUCATION	36
NCSY11 BROADWAY NEW YORK, NY 10004	NONE	EXEMPT	OUTREACH	50
Total ▶ 3a				15,012

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>				
NEVEI HACHESED RECHOV MINCHAS YITCOK BEIT SHMESH ISRAEL 99999 IS	NONE	EXEMPT	INDIGENT FAMILIES	100
OD YOSEF CHAI18 NEW COUNTY RD BROOKLYN, NY 10952	NONE	EXEMPT	INDIGENT FAMILIES	36
OD YOSEF CHAI18 NEW COUNTY RD PARAMUS, NJ 07652	NONE	EXEMPT	INDIGENT FAMILIES	25
Total ▶ 3a				15,012

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>				
OD YOSEF CHAI18 NEW COUNTY RD BROOKLYN, NY 11203	NONE	EXEMPT	SICK/ DISABLED FAMILIES /CHILDREN	54
OR TORAH4 PHYLLIS TERRACE MONSEY, NY 00952	NONE	EXEMPT	RELIGIOUS EDUCATION	54
ORLANDO TA8651 COMMODITY CIRCLE ORLANDO, FL 32819	NONE	EXEMPT	RELIGIOUS EDUCATION	50
Total ▶ 3a				15,012

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				
ORLANDO TA8651 COMMODITY CIRCLE ORLANDO, FL 32819	NONE	EXEMPT	RELIGIOUS EDUCATION	36
OUR PLACE44 WALL ST NEW YORK, NY 10005	NONE	EXEMPT	CHILDREN AT RISK - SCHOOL	150
OZER DALIM1564 41 ST BROOKLYN, NY 11218	NONE	EXEMPT	INDIGENT FAMILIES	36
Total 3a				15,012

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				
PEF ISRAEL ENDOWMENT FUND 630 3RD AVE NY, NY 10017	NONE	EXEMPT	SICK/ DISABLED FAMILIES /CHILDREN	72
PRI HAARETZISRAEL ISRAEL 99999 IS	NONE	EXEMPT	OTHER	36
RCCS762 BEDFIRD AVE BROOKLYN, NY 11218	NONE	EXEMPT	SICK/ DISABLED FAMILIES /CHILDREN	250
Total ▶ 3a				15,012

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>				
REFUAPOB 1076 NEW YORK, NY 10002	NONE	EXEMPT	SICK/ DISABLED FAMILIES /CHILDREN	50
REISMAN FELLOWSHIP FDTN 8425 113 ST RICHMOND HILL NEW YORK, NY 11415	NONE	EXEMPT	INDIGENT FAMILIES	72
RJJ SCHOOL1 PLAINFIELD AVE EDISON, NJ 08817	NONE	EXEMPT	RELIGIOUS EDUCATION	25
Total ▶ 3a				15,012

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>				
RSA76-01 147 ST KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	RELIGIOUS EDUCATION	250
SHALOM YITZCHAK TORAH INSTITUTE 208 5TH ST LAKEWOOD, NJ 08701	NONE	EXEMPT	RELIGIOUS EDUCATION	120
SHEVES ACHIM3924 14TH AVE BROOKLYN, NY 11204	NONE	EXEMPT	OTHER	54
Total ▶ 3a				15,012

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>				
SHOMREI KOLLEL HACHOMOS 18 HEYWARD STR BROOKLYN, NY 11249	NONE	EXEMPT	INDIGENT FAMILIES	250
SINAI TA2025 79TH ST BROOKLYN, NY 11214	NONE	EXEMPT	RELIGIOUS EDUCATION	250
SURI KOPS KEREN MISHPACHA 72-25 136 ST KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	180
Total ▶ 3a				15,012

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				
TELSHE YESHIVA28400 EUCLID AVE WICKLIFFE, OH 44092	NONE	EXEMPT	RELIGIOUS EDUCATION	25
TEN YAD595 EMPIRE BLVD BROOKLYN, NY 11225	NONE	EXEMPT	INDIGENT FAMILIES	250
TEN YAD595 EMPIRE BLVD BROOKLYN, NY 11225	NONE	EXEMPT	INDIGENT FAMILIES	250
Total				15,012
3a				

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>				
TOMCHEI SHABBOS QUEENS 12901 METROPILITAN AVE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	60
TORAH IMAGES5014 16TH AVE BROOKLYN, NY 11204	NONE	EXEMPT	OTHER	72
TORAH IMAGES5014 16TH AVE BROOKLYN, NY 11204	NONE	EXEMPT	OTHER	72
Total ▶ 3a				15,012

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>				
TORAH TMIMAH1556 44 ST BKLYN BROOKLYN, NY 11219	NONE	EXEMPT	RELIGIOUS EDUCATION	36
TZIDKAT YOSEF NAFTALI 79-04 150TH ST KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	72
TZIDKAT YOSEF NAFTALI7525 153 ST KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	100
Total ▶ 3a				15,012

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>				
YAD BATYAH LKALLAH1256 E 26 ST BROOKLYN, NY 11204	NONE	EXEMPT	INDIGENT FAMILIES	250
YAD LACHIM580 5TH AVE NEW YORK, NY 10109	NONE	EXEMPT	OUTREACH	200
YAD LACHIMM20 IGROS CT SI NEW YORK, NY 10309	NONE	EXEMPT	OUTREACH	100
Total ▶ 3a				15,012

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>				
YAD YEHUDA 812 HYDE COURT SILVER SPRNGS BROOKLYN, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	36
YESH SHAAREI ZION7524 GCP FLUSHING, NY 11375	NONE	EXEMPT	RELIGIOUS EDUCATION	50
YESH TORAS CHAIM OF SOUTHSORE 1170 WILLIAM ST HEWLETT, NY 11557	NONE	EXEMPT	RELIGIOUS EDUCATION	100
Total ▶ 3a				15,012

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>				
YESHG CHASAN SOFER1876 50 THS T BROOKLYN, NY 11204	NONE	EXEMPT	INDIGENT FAMILIES	150
YESHIVA ATERE HATORAH 5014 16TH AVE BROOKLYN, NY 11204	NONE	EXEMPT	RELIGIOUS EDUCATION	120
YESHIVA DARCHEWI MENACHEM 4213 RUTLANND RD BROOKLYN, NY 11203	NONE	EXEMPT	RELIGIOUS EDUCATION	250
Total ▶ 3a				15,012

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>				
YESHIVA OF BKLYN1470 OCEAN PKWY BROOKLYN, NY 11204	NONE	EXEMPT	TEMPLE/SYNAGOGUE	100
YI OF HOLLOSWOOD 8625 FRANCIS LEWIS BLVD QUEENS VILLAGE, NY 11427	NONE	EXEMPT	TEMPLE/SYNAGOGUE	50
YI OF WEST HEMPSTEAD 630 HEPSTEAD AVE W HEMPSTEAD, NY 11550	NONE	EXEMPT	TEMPLE/SYNAGOGUE	100
Total ▶ 3a				15,012

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>				
YIQV GEMILAS CHESED FUND 141-55 77 AVE KEW GARDEN HILLS, NY 11367	NONE	EXEMPT	INDIGENT FAMILIES	36
ZICHRON MRODECAHI 125 BLOOMINGDALE RD STATEN ISLAND, NY 10309	NONE	EXEMPT	OTHER	100
ZICHRON SHLOMO7914 21ST AVE BROOKLYN, NY 11214	NONE	EXEMPT	INDIGENT FAMILIES	25
Total ▶ 3a				15,012

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>				
ZICHRON SHLOMO7914 21ST AVE BROOKLYN, NY 11214	NONE	EXEMPT	INDIGENT FAMILIES	25
ZICHRON SHLOMO1319 51 ST BROOKLYN, NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	50
ZICHRON SHLOMO REFUA FUND 1319 51 ST BROOKLYN, NY 11219	NONE	EXEMPT	INDIGENT FAMILIES	25
Total ▶ 3a				15,012

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>				
ZICHRON SHLOMO REFUA FUND 1319 51 ST BROOKLYN, NY 11219	NONE	EXEMPT	SICK/ DISABLED FAMILIES /CHILDREN	25
Total 				15,012
3a				

TY 2017 Investments - Other Schedule

Name: MASADA FOUNDATION

EIN: 16-1622664

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
GOLDMAN SACHS	FMV	20,267,214	20,267,214

TY 2017 Other Expenses Schedule**Name:** MASADA FOUNDATION**EIN:** 16-1622664**Other Expenses Schedule**

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

TY 2017 Other Increases Schedule

Name: MASADA FOUNDATION

EIN: 16-1622664

Description	Amount
UNREALIZED GAINS	155,775

TY 2017 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

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 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2017
	Name of the organization MASADA FOUNDATION	Employer identification number 16-1622664

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 990PF, Part I, line 2, to certify that it doesn't 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) Total contributions	(d) Type of contribution
1	RICHARD KIRSCHNER 137-05 72ND ROAD FLUSHING, NY 11367	\$ 657,850	Person ☐ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions)
2	RICHARD KIRSCHNER 137-05 72ND ROAD FLUSHING, NY 11367	\$ 19,343,000	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
.		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
.		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
.		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
.		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

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
1	SECURITIES- STRUCTURED NOTES	\$ 657,850	2018-06-29
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Name of organization MASADA FOUNDATION	Employer identification number 16-1622664
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee