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Return of Private Foundation

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

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

0000

2009

OMB No 1545-0052

For calendar year 2009, or tax year beginning				, а	nd ending					
G Check all that apply: Initial return			Initial return of a former public charity Final return							
_			FF 7.	Amended return	Address change	· —	-	hange		
-11	se th	e IRS	Name of foundation		<u></u>			mployer identification nu	mber	
label. Otherwise, Number and street (or P O box number if mail is not deliver						^ -	11-3522			
				almorad to atract address)	Room/suite	Ьт	elephone number (see pag			
	prir	nt	,	or PO box number it mail is not us	clivered to street address)	Koonvaule		elephone number (see pag	e 10 of the manuchons)	
	or ty		2722 Avenue K	-d 7IDd-			<u> </u>			
	•	ecific	City or town, state, a	na ZIP coae	ND/	44040.0700		exemption application is pe	=	
			Brooklyn	Castras 504(a)(2) ava	NY	11210-3722	1	Foreign organizations, che		
H	Sec	ck type tion 49	e of organization: 947(a)(1) nonexer	Section 501(c)(3) exempt charitable trust	Other taxable private	foundation	2. Foreign organizations meeting the 85% test, check here and attach computation			
一			. , , ,	·	•			private foundation status w		
1			t value of all asse m Part II, col. (c),			n		ider section 507(b)(1)(A), c the foundation is in a 60-m		
		16) ►		4,663 (Part I, column (d) must be on cash bas	sis)		nder section 507(b)(1)(B), c		
Pa	rt I		-	and Expenses (The total of		i	1		(d) Disbursements	
ГС	L. L			and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net investm	ent	(c) Adjusted net	for charitable	
				ee page 11 of the instructions))	books	income		ıncome	purposes	
	-				46 300	< -5 -		\$ \$5°.00 &0.00 .	(cash basis only)	
	1		<u> </u>	c , received (attach schedule)	46,390	1		, ,	*	
	2			n is not required to attach Sch B	21	** *	21	, , , ,	, , , , , , , , , , , , , , , , , , , ,	
	3		-	emporary cash investments	32		32		L	
	4		ends and interest fro	m securities	32		<u> </u>			
		Gross		s) 0		' *		V W	^ ^	
ne			ental income or (loss	le of assets not on line 10	0		~ ~ /	~ ;		
Revenue		_	sales price for all asset	_	* * **	****	migra.	, ,,,,	7000	
Š	7		•	from Part IV, line 2)	* * * *		0	*	11. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
ď	8		ai gain net income (hort-term capital gai		** . ^	№ •				
	9		nort-term capital gai ne modifications	II .	* & ~				4 14 4 8	
	•		sales less returns and	allowanese .	*, 1	% . / \	<u>`</u>	. 10 2		
	i .		Cost of goods sold		······································	3.		* *\ 8	/š_ &_ &	
			profit or (loss) (atta	<u> </u>	0	**		* * * * * * * * * * * * * * * * * * * *		
	11		income (attach sch		0	 	0	0	· · · · · · · · · · · · · · · · · · ·	
	12		. Add lines 1 through		46,443		53			
	13			, directors, trustees, etc	70,773	Ť		0		
xpenses	14	•	employee salaries							
Ĕ	15		on plans, employee					· · · · · · · · · · · · · · · · · · ·		
ĕ	t .		fees (attach sched		0	-	0	0	0	
Ш		_	unting fees (attach s		0		0		_	
<u>≷</u>	l		professional fees (0	}	0			
Administrative	17	Intere								
St	18			page 14-of the instructions)	0		0	0	0	
<u> </u>	19	Depre	eciation (attach sche	page 14-of the instructions)	O		0	0		
퉏	20	Occu	panev-/						· · · · · · · · · · · · · · · · · · ·	
	21	Trave	i, comerences and	meetings 70						
<u> </u>	22	Printi	ng and publications	3 2010 0 						
, ca	23	Other	expenses/attach-s	chedule)	9		0	0	0	
ij	24	Total	operating and adr	ninistrative expenses.						
: rat		Add I	nes 13 through 23	1	9	<u> </u>	0	0	0	
Operating and	25		ibutions, gifts, grant	s paid	69,650	. ~			69,650	
įŌ	26			sements Add lines 24 and 25	69,659	ol	0	0		
<i>,</i>	27	Subtr	act line 26 from line	12	* *	* ,	~«	* ,	2 '	
	l			penses and disbursements	-23,216	<u> </u>			* 13 (3)	
	1			(if negative, enter -0-)			53			
			sted net income (if	·						

V

Day	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year			
rai	Щ	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash—non-interest-bearing	27,879	4,663	4,663			
	2	Savings and temporary cash investments						
	3	Accounts receivable ▶ 0						
		Less allowance for doubtful accounts	0	0	0			
	4	Pledges receivable ▶ 0	*	××4	**			
		Less allowance for doubtful accounts	0	0	0			
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
		disqualified persons (attach schedule) (see page 15 of the			0			
	_	instructions)	0	0	0			
	7	Other notes and loans receivable (attach schedule)						
Assets		Less allowance for doubtful accounts	0	0	0			
SS	8	Inventories for sale or use			·			
Ä	9	Prepaid expenses and deferred charges						
		a Investments—U S and state government obligations (attach schedule)	0	0	0			
		b Investments—corporate stock (attach schedule)	0	0	0			
		c Investments—corporate bonds (attach schedule)	0	0	0			
	11	Investments—land, buildings, and equipment basis						
		Less accumulated depreciation (attach schedule)	0	0	0			
	12	Investments—mortgage loans						
	13	Investments—other (attach schedule)	0	0	0			
	14	Land, buildings, and equipment basis						
		Less accumulated depreciation (attach schedule)	0	0	0			
	15	Other assets (describe	0	0	0			
	16	Total assets (to be completed by all filers—see the			4 000			
		instructions Also, see page 1, item I)	27,879	4,663	4,663			
	17	Accounts payable and accrued expenses						
S	18	Grants payable						
ij	19	Deferred revenue		0	Ş. Î			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0		,			
Ë	21	Mortgages and other notes payable (attach schedule)	0		* ' " , " , " , " , " , " , " , " , " , "			
	22	Other liabilities (describe Total liabilities (add lines 17 through 22)	0		" x %			
	23		U		À			
40	1	Foundations that follow SFAS 117, check here						
ces	١	and complete lines 24 through 26 and lines 30 and 31.						
ä	24	Unrestricted			1775			
ä	25	Temporarily restricted						
<u>Б</u>	26	Permanently restricted		<u>.</u>				
Š		Foundations that do not follow SFAS 117, check here						
Ē.		and complete lines 27 through 31.						
Net Assets or Fund Balan	27	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund						
ets	29	Retained earnings, accumulated income, endowment, or other funds	27,879	4,663				
SS	30	Total net assets or fund balances (see page 17 of the	21,019	7,000				
ţ	30	instructions)	27,879	4,663				
Ž	31	Total liabilities and net assets/fund balances (see page 17	27,070	1,000	Ni.			
	"	of the instructions)	27,879	4,663	. 36			
Pa	rt III		. 2.,010	,,,,,,	•			
		I 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)						
2		r amount from Part I, line 27a		2	-23,216			
3		r increases not included in line 2 (itemize)		3	0			
4		lines 1, 2, and 3		4	4,663			
5		reases not included in line 2 (itemize)		5	0			
_6	6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 4,663							

Part IV	Capital Gains an	a Losses for lax on inve	estment inco	ome	<u> </u>			
				'	b) How acquired P—Purchase D—Donation		Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
1a								
b				\perp				
<u> </u>				+				
d				+				
<u>e</u>	· · · · · · · · · · · · · · · · · · ·							
(e) Gross sales price	(f) Depreciation allowed (or allowable)			her basis e of sale			or (loss)) minus (g)
<u>a</u>	0	0			0			0
<u>b</u>	0	0			0			0
<u>c</u> d	0	0			0			- 0
<u>-u</u>	0	0						0
	plete only for assets show	ving gain in column (h) and owne	d by the founda	tion			(I) Gains (Col	(h) gain minus
	FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	ess c	of col (ı)), ıf any		col (k), but not	less than -0-) or om col (h))
a	0	0			0			0
b	0	0			0			0
<u> </u>	0	0			0			0
<u>d</u>	0	0			0			0
<u>e</u>	0	0			0			0
-	oital gain net income or	(net capital loss) { If (loss),	also enter in F , enter -0- in F	art I	, line 7	2		0
		or (loss) as defined in section						
_	· ·	line 8, column (c) (see pages	s 13 and 17 of	the	;			_
	ructions) If (loss), ente		<u> </u>	• •		3		0
		der Section 4940(e) for Re						
(For opt	tional use by domestic	private foundations subject to	the section 4	940	(a) tax on net i	nvest	ment income.)
	on 4940(d)(2) applies, le							
		ne section 4942 tax on the dis				the b	ase period?	☐ Yes ☐ No
If "Yes,"	the foundation does n	ot qualify under section 4940	(e). Do not co	mple	ete this part.			
1 Er	nter the appropriate am	ount in each column for each	year; see pag	je 18	8 of the instruc	tions l	before making	g any entries.
	(a)	(b)			(c)			(d)
Calanda	Base period years ar year (or tax year beginning i	Adjusted qualifying distribution	ons Net valu	e of n	noncharitable-use a	ssets		ribution ratio livided by col (c))
Calerius	2008		2,140		24	,625	(00) (0)	1.305178
	2007							0.00000
	2006							0 000000
	2005							0 000000
	2004							0 000000
2 Tot	al of line 1, column (d)					.	2	1.305178
		or the 5-year base period—di				y [
the	number of years the fo	undation has been in existen	ce if less than	5 ye	ears	.	3	1.305178
4 Ente	er the net value of nonc	charitable-use assets for 2009	from Part X,	line	5		4	0
5 Mul	tiply line 4 by line 3 .						5	0
6 Ent	er 1% of net investmen	t income (1% of Part I, line 2	7 b) .			.	6	0
7 Add	lines 5 and 6						7	0
		ns from Part XII, line 4 ter than line 7, check the box				. [8 part using a 1	0 % tax rate See
	Part VI instructions on					[

Рa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see pa	age '	18 of the	e inst	ructi	ons)
1 8	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1	٠	وتررا	4,		,
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check			1		
	here ▶ ☐ and enter 1% of Part I, line 27b		7		4	
(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_			1	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4_				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			1	
6	Credits/Payments		3.	0.50		4
ŧ	a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 0	ž Ž	ļ. ^		7.	2,
t	Exempt foreign organizations—tax withheld at source		3 4 30.00		, ,	, de .
•	Tax paid with application for extension of time to file (Form 8868) 6c 0	₫.	(**)****	`.		,
•	Backup withholding erroneously withheld . 6d				<u> </u>	
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	ļ		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	_9_			1	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	ļ		0	
11	<u> </u>	11		,	0	
Pa	rt VII-A Statements Regarding Activities					
1 8	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			. 20	Yes	No
	participate or intervene in any political campaign?			1a		Х
ŧ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the					
	instructions for definition)?			1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			, 9.	ŽŽ.	* *
	published or distributed by the foundation in connection with the activities			******		
(Did the foundation file Form 1120-POL for this year?			1c		Х
(Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1		
	(1) On the foundation \$ (2) On foundation managers \$			1	tag chad	X.
•	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			×	-	, .
	on foundation managers \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
_	o If "Yes," has it filed a tax return on Form 990-T for this year?			4b	N/A	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	.X	X
_	If "Yes," attach the statement required by General Instruction T			\$ /		× :
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			XX.		
	By language in the governing instrument, or			3 - 364 3 - 364 3 - 364		
	By state legislation that effectively amends the governing instrument so that no mandatory directions That a self-state that the state legislation that offers are the self-state and the self-state that the self-state legislation that offers are the self-state legislation that offers are the self-state legislation that the self-state legislati			لشكند.	3.42	
7	that conflict with the state law remain in the governing instrument?		a-4 V/V	7	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), a	na P	artxv	-	^	
0	a Enter the states to which the foundation reports or with which it is registered (see page 19 of the			1	* 🛴	
	Instructions) NY			1	4	
'	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			8b	X	***************************************
۵	General (or designate) of each state as required by General Instruction G? If "No," attach explanation			100	^	
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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27	12		İ		
	or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27 If "Yes," complete Part XIV	,,		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing			⊢		 ^
. 0	• •			10	Х	
	their names and addresses			ווי		L

AII.	Char	table	Four	ndation

-1	11	-3	5 ′	าา	2	11

Page 5

Part	VII-A Statements Regarding Activities (continued)						
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	11		Х			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)						
	* * * * * * * * * * * * * * * * * * * *						
	August 17, 2008?	12 13	Х	<u>X</u>			
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_^_				
14	Website address ► N/A The books are in care of ► Mr David Maryles Telephone no ► (718) 788-3	722					
	146 20th Street Brooklyn NV	,35					
	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		•				
	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required						
			Vaa	No			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly)	23 1.	Yes	No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	3× ·	•	-			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		45	. Ang./ a			
	a disqualified person? . Yes X No						
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		9				
	(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	227					
	(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	<u> </u>		* * ;			
	after termination of government service, if terminating within 90 days)	project in	* **				
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	7	· .				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	N/A	***			
	Organizations relying on a current notice regarding disaster assistance check here	## ?/~	- 1	*			
	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 2009?	1c		<u>X</u>			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			j			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))						
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?			,			
	If "Yes," list the years ≥ 20		2	1			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			- 4.21			
-	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	^ 、 *	***				
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b	N/A	. 68 e'			
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		y.	7. Y.			
	▶ 20, 20, 20	. 40					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business						
	enterprise at any time during the year?			9			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation	3.4	* ,]			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved	, 3					
	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		r	1.03			
	If the foundation had excess business holdings in 2009)	3b	N/A	التكسدا			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	14/7	X			
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	<u> </u>	*, ,				
-	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X			

, n. 🥕								
Form 990-PF (2009) JIA Charitable Foundation				11-3522310	Page 6			
Part VII-B Statements Regarding Activities	s for Which Form	4720 May Be R	equired (continued)					
 5a During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public experience 	amount to influence legislation (s	section 4945(e))?		X No				
on, directly or indirectly, any voter registration drive?								
(3) Provide a grant to an individual for travel, stud	• • • • • • • • • • • • • • • • • • • •		Yes _>	X No	- 1			
• • • • • •	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) Yes X No							
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of			Yes	X No	*			
b If any answer is "Yes" to 5a(1)–(5), did any of the ti	ransactions fail to quali	fy under the exception	ins described in	3				
Regulations section 53 4945 or in a current notice r	egarding disaster assis	stance (see page 22	of the instructions)?	<u>5b</u> _	N/A ***			
Organizations relying on a current notice regarding			▶∟	_	r			
c If the answer is "Yes" to question 5a(4), does the fo	·	tion from the		¬ ﴾	1 1 m			
tax because it maintained expenditure responsibility If "Yes," attach the statement required by Regulation	•	 (d)	LYes L	No				
6a Did the foundation, during the year, receive any fun premiums on a personal benefit contract?	nds, directly or indirectly	y, to pay	Yes	X No	≷			
b Did the foundation, during the year, pay premiums, <i>If "Yes" to 6b. file Form 8870</i>	directly or indirectly, o	n a personal benefit o	contract?	6b	X			
•	a party to a prohibited	tax shelter transaction	on? Yes	X No				
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b								
Part VIII Information About Officers,				aid Employ	ees,			
and Contractors								
1 List all officers, directors, trustees, founda	ation managers and	their compensat	ion (see page 22 of the	e instruction	າຣ).			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	other al	se account, llowances			
George Grossberger	Trustee							
2722 Ave K Brooklyn NY 11210	1 00	0		0	0			
Vickie Grossberger 2722 Ave K Brooklyn NY 11210	Trustee 1 00	0		0	0			
	.00	0		o	0			
	00	0		0	0			
2 Compensation of five highest-paid employ If none, enter "NONE."								
(a) Name and address of each employee paid more than \$50,0	(b) Title, and avera hours per week devoted to position	(c) Compensation	on (d) Contributions to employee benefit plans and deferred compensation		nse account, llowances			
None								
				1				

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

0

JIA Chantable Foundation		11-3522310	raye 1
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	oundation Managers, Highly Paid	Employee	es,
3 Five highest-paid independent contractors for professional services (see)	page 23 of the instructions). If none, enter	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comper	nsation
NONE			
		-	0
			. 0
			0
			0
Total number of others receiving over \$50,000 for professional services	· · <u>· · · · · · · · · · · · · · · · · </u>	. ▶	1
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant st the number of organizations and other beneficianes served, conferences convened, research page.	pers produced, etc	Expens	ses
Making Contributions to public charities that support either Jewish religion Services, or helping the indigent			
2			
3			
4			
4			
Part IX-B Summary of Program-Related Investments (see page	24 of the instructions)		
Describe the two largest program-related investments made by the foundation during the tax year		Amou	ınt
1			
2			
All other program-related investments See page 24 of the instructions			
3			

Total. Add lines 1 through 3

0

 \blacktriangleright

Form 990-PF (2009)

Pai	Minimum Investment Return (All domestic foundations must complete this part. Fore	eign foundation	ns,
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	20,000
C	Fair market value of all other assets (see page 24 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	20,000
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d .	3	20,000
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25	1 1	
	of the instructions)	4	300
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	19,700
6	Minimum investment return. Enter 5% of line 5	6	985
Par	t XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priv	ate operating	
	foundations and certain foreign organizations check here 🕨 🔲 and do not complete this pa	rt.)	
1	Minimum investment return from Part X, line 6	1	985
2a	Tax on investment income for 2009 from Part VI, line 5	1	-
b	Income tax for 2009 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	1
3	Distributable amount before adjustments Subtract line 2c from line 1	3	984
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4 .	5	984
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	984
	Overlife in Distributions (see page 25 of the matriations)		
Par	Qualifying Distributions (see page 25 of the 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	69,650
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		
а	Suitability test (prior IRS approval required)	. 3a	
b	Cash distribution test (attach the required schedule)	3b	C
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	69,650
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	C
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	69,650
	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		

Par	rt XIII Undistributed Incon	ne (see page 26 of t	he instructions)			
1	Distributable amount for 2009 from	om Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7					984
2	Undistributed income, if any, as of the end of 2009					
_	a Enter amount for 2008 only				0	
	b Total for prior years 20,			0		
3	Excess distributions carryover,					
í	a From 2004	59,820				
	b From 2005	70,641				
	C From 2006	40,525				
	d From 2007	58,447 30,916				
•	e From 2008	30,910	260,349			:
4	f Total of lines 3a through e . Qualifying distributions for 2009	from Part	200,348		<i>'</i> : ∗\$*. 3	*
7	XII, line 4 > \$	69,650			· " » ·	*
	a Applied to 2008, but not more th				0	
	b Applied to undistributed income					
	(Election required—see page 26			0	:	
	c Treated as distributions out of c			2		
	required—see page 26 of the in-		0	. ₩		
	d Applied to 2009 distributable am	•				984
	e Remaining amount distributed o		68,666			
5	Excess distributions carryover a	•	0		,	0
	(If an amount appears in columi same amount must be shown in	n (d), the		8 /		
6	Enter the net total of each col indicated below:	umn as				
	a Corpus Add lines 3f, 4c, and 4e	Subtract line 5	329,015		, No.	
	b Prior years' undistributed incom		. A. A.			*
	line 4b from line 2b .			0	·	
(c Enter the amount of prior years'	undistributed				
	income for which a notice of def	ficiency has				
	been issued, or on which the se	ection 4942(a)				
	tax has been previously assess	ed				•\$
(d Subtract line 6c from line 6b Ta	axable				
	amount—see page 27 of the ins	structions		0		
(e Undistributed income for 2008	Subtract line	4			
	4a from line 2a Taxable amoun	t—see page 27 of the		*		
	instructions		*		0	
1	f Undistributed income for 2009	Subtract				
	lines 4d and 5 from line 1. This	amount must				
	be distributed in 2010				, ,	0
7	Amounts treated as distributions	s out of				****
	corpus to satisfy requirements in	mposed by				
	section 170(b)(1)(F) or 4942(g)((3) (see page 27 of				
	the instructions)					
8	Excess distributions carryover f		i			
	not applied on line 5 or line 7 (s	ee page 27 of the				
_	instructions) .		59,820			
9	Excess distributions carryove					
	Subtract lines 7 and 8 from line	6a	269,195			
10	Analysis of line 9	l ====================================		•		
	a Excess from 2005 .	70,641	1			
	b Excess from 2006	40,525	§			
	C Excess from 2007 .	58,447	1			
	d Excess from 2008	30,916	1			
	e Excess from 2009	l 68.666	1	l	i e	I

_	99b-PF (2009) JIA Charitable Foundation				11-3522	
ar	t XIV Private Operating Foundations (s	ee page 27 of th	ne instructions ai	nd Part VII-A, qu	estion 9)	N/A
l a	If the foundation has received a ruling or determination foundation, and the ruling is effective for 2009, entitled to the ruling is effective for 2009, entitled to the ruling is effective for 2009, entitled to the ruling is effective for 2009.			•	.	
b	Check box to indicate whether the foundation is a	private operating fou	indation described in	n section	4942(j)(3) or	4942(J)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	investment return from Part X for each year listed	0			0	0
h	85% of line 2a	0	0	0	0	0
_	Qualifying distributions from Part XII,		-			<u>~</u>
	line 4 for each year listed	o	o	О	ol	0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3	Complete 3a, b, or c for the					
•	alternative test relied upon "Assets" alternative test—enter					
a	(1) Value of all assets					0
	(2) Value of assets qualifying					
h	under section 4942(j)(3)(B)(i) "Endowment" alternative test—enter 2/3					0
U	of minimum investment return shown in					
	Part X, line 6 for each year listed	0	0	0	0	0
C	"Support" alternative test—enter				1	
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	_				0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Cor				,000 or more in	
	assets at any time during the ye	ar—see page 2	8 of the instruc	tions.)		
1	Information Regarding Foundation Manag	jers:				
а	List any managers of the foundation who have conbefore the close of any tax year (but only if they have				the foundation	
b	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which				ortion of the	
	Information Posseding Contribution Con-	t Gift Loon Sal	nolambin oto D	rograme:		
4	Information Regarding Contribution, Gran Check here X if the foundation only makes				nes not accept	
	unsolicited requests for funds. If the foundation ma under other conditions, complete items 2a, b, c, ar	akes gifts, grants, et				ions
	The name, address, and telephone number of the		olications should be	addressed		
a	The name, address, and telephone number of the	person to whom app	plications should be	addiessed		
b	The form in which applications should be submitte	d and information ar	nd materials they sh	ould include		
С	Any submission deadlines					
d	Any restrictions or limitations on awards, such as l	by geographical area	as, charitable fields,	kinds of institutions	, or other	

Part XV Supplementary Information (continued)

3 (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	Foundation status of	Purpose of grant or contribution	Amount				
	Name and address (home or business)	or substantial contributor	recipient						
а	Paid during the year								
See	Schedules Attached	None	Public	See Attached	69,650				
					0				
					0				
					0				
					0				
					0				
					0				
					0				
					0				
	•				0				
					0				
					0				
					0				
			:		0				
					0				
					0				
_	Total	·		> 3a	69,650				
b	Approved for future payment								
					0				
					0				
					0				
					0				
					0				
					0				
					0				
					0				
					0				
	Total	<u> </u>		. ► 3b	0				

Part XVI-A Analysis of Income-Producing Acti	Vities				
Enter gross amounts unless otherwise indicated.	Unrelated bus	siness income	Excluded by section	on 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
	-	0		0	C
a b	·	0		0	0
С		0		0	C
d		0		0	
e		0		0	
f		0		0	C
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	53	
4 Dividends and interest from securities					10 mil 11 mil 10 mil 1811 20
5 Net rental income or (loss) from real estate		**************************************	(為) (2) (2) (2) (2)	ACTIVITY AND	1 Table 10
Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property		ļ			
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			<u> </u>	0	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	-				
11 Other revenue a		0		0	
b	-	0	-	0	
c	-	0		0	
d	-	0	 	0	
<u> </u>	14.202000 0000.000 200000		4		
12 Subtotal Add columns (b) (d) and (e)	**************************************				
12 Subtotal Add columns (b), (d), and (e) 13 Total, Add line 12, columns (b), (d), and (e)	N. 18 18 18 18 18 18 18 18 18 18 18 18 18	<u>, </u>			
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc		1 0		13	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ad	culations)	t of Exempt P	urposes	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ad Line No. Explain below how each activity for which incon	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	53
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcompart XVI-B Relationship of Activities to the Action No. Explain below how each activity for which incompared the accomplishment of the foundation's exempt	culations) complishmen ne is reported in co	t of Exempt P	urposes VI-A contributed i	13	

11-3522310

Part XVII	Information Regarding	Transfers To and	Transactions and	l Relationships Wi	th Noncharitable
	Exempt Organizations				

1		old the organization directly or indirectly engage in any of the following with any other organization described is section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political								Yes	No
		anizations?									
а	Transfe	ers from the reporting	rs from the reporting foundation to a noncharitable exempt organization of								
	(1) Ca								1a(1)	ļ	X
		ner assets .		•					1a(2)	Š	<u>X</u>
þ		ransactions		4;4;					* 4 h /4 \		
		les of assets to a nonc rchases of assets fron				•			1b(1) 1b(2)		X
		ntal of facilities, equip							1b(2)		x
		imbursement arranger							1b(4)	 	X
		ans or loan guarantees							1b(5)	l	X
		rformance of services							1b(6)		X
С		g of facilities, equipme							1c		X
d	If the a	nswer to any of the ab	ove is "Yes,"	complete the follo	wing schedule	. Colum	n (b) should alw	ays show the	fair mar	ket	
	value o	of the goods, other ass in any transaction or sh	ets, or service	es aiven by the rei	porting foundat	tion If th	ne foundation red	eived less th	ıan faır n	narke	t d
(a) l	Line no	(b) Amount involved	(c) Name o	f noncharitable exempt	organization	(d) Des	scription of transfers, t	ransactions, and	sharing ar	rangem	ents
		0									
		0					 				
		0									
		0		<u></u>		 					
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		0									
		0									—
-		0				 					
	describ	foundation directly or in oed in section 501(c) o " complete the followi	of the Code (o	ated with, or relate ther than section t	d to, one or mo 501(c)(3)) or in	ore tax-	exempt organiza i 527?	tions	Yes X] No	
<u> </u>	11 168	(a) Name of organization	rig scriedule	(b) Type	of organization		(c) Des	cription of relatio	nship		
				(a) the analysis							
		· -									
		er penalties of perjury, I decla									
	belie	f, it is true, correct, and comp	lete Declaration of	of preparer (other than t	axpayer or fiducian	y) is based	on all information of	which preparer h	as any kno	wledge	ļ
1 (a) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							1/1				
ā	\ \rightarrow \frac{\rightarrow}{\sigma_{10}}	Signature of officer or trustee		18/16/10		D 24	f Funuel	gun			
운	y Sig	nature of officer of trustee			Data		1				
⊑	· ·		///	/	Date		Check if		s identifyin see Signat	-	
Sign Here	2 e c	Preparer's					self-employed ▶		of the instru		
V ,	Paid Preparer's Use Only	signature	///		8/2/201	0					
	£̃3	Firm's name (or yours if	Maryles &	Co.				EIN ►			
		self-employed), address, and ZIP code	1175 Buc	kwald Ct , Lakewo	od, NJ 08701			Phone no (7	⁷ 32) 730	-1 <u>93</u> 2	
									-		

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization			Employer identification number				
JIA Charitable Foundatio	n		11-3522310				
Organization type (chec	ck one):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1)	nonexempt charitable trust not treated as a pi	rivate foundation				
	527 politica	l organization					
Form 990-PF	X 501(c)(3) e	xempt private foundation					
	4947(a)(1)	nonexempt charitable trust treated as a privat	e foundation				
	501(c)(3) ta	exable private foundation					
	•	General Rule or a Special Rule. ganization can check boxes for both the Gene	ral Rule and a Special Rule See				
General Rule							
		90-EZ, or 990-PF that received, during the yearm Complete Parts I and II.	ar, \$5,000 or more (in money or				
Special Rules							
sections 509(a)(1) and 170(b)(1)(A)(vi	ling Form 990 or 990-EZ that met the 33 1/3 % i), and received from any one contributor, duri on (i) Form 990, Part VIII, line 1h or (ii) Form	ng the year, a contribution of the greater				
the year, aggrega	ate contributions of m	ganization filing Form 990 or 990-EZ that recentioner than \$1,000 for use exclusively for religion of cruelty to children or animals. Complete	ous, charitable, scientific, literary, or				
the year, contributing aggregate to more year for an exclusion.	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 <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> 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						
Caution. An organization	n that is not covered	by the General Rule and/or the Special Rules	does not file Schedule B (Form 990,				

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or

990-PF)

Schedule B	Earm agn	990-E7	or gan_DE)	(2000)
JOHEGGIE D	1 01111 330,	330°L2,	01 330-11	12000

chedule B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1 of 1 of Part I
ame of organization	Employer identification number
A Charitable Foundation	11-3522310

JIA Char	itable Foundation		11- <u>3522310</u>
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	GPM 48th St LLC 116 39th Street Brooklyn NY 11223 Foreign State or Province Foreign Country	\$30,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	G. Grossberger 116 39th Street Brooklyn NY 11223 Foreign State or Province Foreign Country	\$16,390	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	Foreign State or Province Foreign Country	\$0_	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
. 5	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
. 6	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Form	990PF - Part 1 - Line 1 - Contribution Revenues	Total:	46,390
1	George Grossberger	1	16,390
2	GPM 48th St LLC	2	30,000
3	***************************************	3	
4		4	
5	***************************************	5	

4:32 PM 08/02/10 **Accrual Basis**

JIA Charitable Foundation Transaction Detail By Account January through December 2009

Туре	Num	Name	Amount
Allocations to I		ont	
Assistance Check	1109	Cong Anshei Sfard	500 00
Check	1114	Oneg Shabbos	100 00
Check	1108		500 00
Check	1201	Cong Anshei Sfard Khal Blev Echod	360 00
	1322	Bonai Olam	
Check	1316	Cong Anshei Sfard	10,000 00
Check Check	1320	Sephardic Community Center	1,000 00 100 00
Total Assista			12,560 00
Congregation	onal Service	es	
Check	1111	Cong Ahavas Yıtzchok	1,200 00
Check	1113	Cong Bais Ephraim	250 00
Check	1112	Cong Bais Ephraim	2,000 00
Check	1115	Cong Bais Ephraim	600 00
Check	1033	Cong Bais Ephraim	1,000 00
Check	1223	Cong Vayedaber Dovid	1,500 00
Total Congre	egational Se		6,550 00
Religious E	ducation		
Check	1012	Masoras Bais Yaakov	675 00
Check	1026	Yeshiva Ketana of Long Island	2,000 00
Check	1013	Masoras Bais Yaakov	675 00
Check	1027	Yeshiva Ketana of Long Island	2,000 00
Check	1014	Masoras Bais Yaakov	675 00
Check	1028	Yeshiva Ketana of Long Island	1,000 00
Check	1037	Peninim of America	2,500 00
Check	1216	Yeshiva Toras Emes	1,000 00
Check	1210	Gateways	8,000 00
Check	1199	Yeshiva Ohr Reuven	360 00
Check	1200	Yeshiva Ohr Reuven	500 00
Check	1202	Yeshiva Madregas Haodom	500 00
	1198	Chabad	180 00
Check	1015	Masoras Bais Yaakov	675 00
Check Check			1,500 00
	1029 1220	Yeshiva Ketana of Long Island Toras Emes Academy	1,500 00
Check	1224	Yeshiva Ohr Reuven	2,000 00
Check		Masoras Bais Yaakov	675 00
Check	1016		2,000 00
Check	1031	Yeshiva Ketana of Long Island	· ·
Check	1017	Masoras Bais Yaakov	675 00
Check	1030	Yeshiva Ketana of Long Island	1,000 00
Check	1039	Peninim of America	2,250 00
Check	1040	Yeshiva Torah Vodaath	1,200 00
Check	1218	Yeshiva Torah Vodaath	3,000 00
Check	1204	Yeshiva Ketana of Long Island	5,000 00
Check	1318	Yeshiva Ohr Reuven	700 00
Check	1319	American Friends of Kollel Ohr	100 00
Check	1205	Yeshiva Ketana of Long Island	1,500 00
Check	1206	Yeshiva Ketana of Long Island	2,500 00
Check Check	1219 1214	Yeshiva Torah Vodaath Yeshiva Ketana of Long Island	3,000 00 1,200 00
Total Religio		v	50,540 00
Total Allocation	s to Institution	ons	69,650 00
TAL			69,650.00
IAL			

Form 8868

(Rev April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Part I unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Part I only Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www irs gowlefile and click on e-file for Chanties & Nonprofits. Type or print JiA Chantable Foundation IJA Chantable Foundation JIA Chantable Foundation Number, street, and room or suite no if a P O box, see instructions 2722 Avenue K City, town or post office, state, and ZIP code For a foreign address, see instructions Brooklyn Form 990-BL Form 990-T (corporation) Form 990-BL Form 990-T (corporation) Form 990-BL Form 990-T (rust other than above) Form 990-Form 6069 Form 990-Form 1041-A Telephone No. ► (718) 788-3733 FAX No. ► If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		•	filing for an Automatic 3-Month Extension, complete only Part I and check this box filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (his fo	►X		
Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns Electronics Filling (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868. For meeting of the form 890-T (1) you file Form 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T (noted to file Form 8868. For more details on the electronical filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Type or Tom red tealist on the electronical filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Type or Tom establist on the electronical filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Type or Tom establist on the electronical filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Type or Tom establist on the electronical filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Type or Tom establist on the electronical filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Type or Tom establist on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Type or Tom establist on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Type or Tom establist on the electronic filing of this form, visit www irs gov/efile and click on e-file for Chanties & Nonprofits. Type or Tom establist on the filing of this form, visit								
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Brooklyn	filing yo	ur						
Form 990				NY	112	210-3722		
Form 990-BL	Chec	k type	of return to be filed (file a separate application for each return).					
Form 990-EZ Form 990-T (trust other than above) Form 6069 X Form 990-PF Form 1041-A Form 8870 • The books are in the care of Mr. David Maryles 116 39th Street Brooklyn NY Brooklyn NY 11232 Telephone No. (718) 788-3733 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for the whole group, check this box If this is twith the names and ElNs of all members the extension will cover If request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time If the organization's return for If this tax year beginning If this tax year is for less than 12 months, check reason. Initial return If Final return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit If this enter If the organization is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit If the organization is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit If the organization is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment with this form, or, if required, deposit with FTD coupon or, if required,	□ ı	orm 99	Form 990-T (corporation)			Form 4720		
Form 990-EZ Form 990-T (trust other than above) Form 6069 X Form 990-PF Form 1041-A Form 8870 • The books are in the care of Mr. David Maryles 116 39th Street Brooklyn NY Brooklyn NY 11232 Telephone No. (718) 788-3733 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If this is for the whole group, check this box If this is twith the names and ElNs of all members the extension will cover If request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time If the organization's return for If this tax year beginning If this tax year is for less than 12 months, check reason. Initial return If Final return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit If this enter If the organization is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit If the organization is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit If the organization is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made include any prior year overpayment with this form, or, if required, deposit with FTD coupon or, if required,	Ħ,	Form 99	0-BL Form 990-T (sec. 401(a) or 408(a) trust)			Form 5227		
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