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#### Form 990-PF Department of the Treasury

Internal Revenue Service

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

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

OMB No 1545-0052

For calendar year 2011 or tax year beginning and ending Name of foundation A Employer identification number MIZZY JONAS FAMILY FOUNDATION, 27-4252394 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 42 ST. AUSTINS PLACE (718) 720-7728 City or town, state, and ZIP code C If exemption application is pending, check here STATEN ISLAND, NΥ 10310 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Uther taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 307046 . (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not for charitable purposes expenses per books income income necessarily equal the amounts in column (a)) (cash basis only) Contributions, gifts, grants, etc., received 100000. N/A Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 6 6. STATEMENT 12096 12096 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 39019. 6a Net gain or (loss) from sale of assets not on line 10 39019. 39019. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 151121 51121 0. 0. Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages 15 Pension plans, employee benefits STMT 3 0. 8481 0. 16a Legal fees 1900. **b** Accounting fees STMT 4 0. 0. RECEIVED c Other professional fees 30 17 Ó 18 Taxes 19 Depreciation and depletion 20 Occupancy (11-11-N 21 Travel, conferences, and meetings 22 Printing and publications STMT 5 48 0. 23 Other expenses 0 24 Total operating and administrative expenses. Add lines 13 through 23 10429 0 0. 24650 24650. Contributions, gifts, grants paid Total expenses and disbursements. 35079 0 24650. Add lines 24 and 25 27 Subtract line 26 from line 12: 116042 a Excess of revenue over expenses and disbursements 51121 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions.

For	m 99	00-PF (2011) MIZZY JONAS FAMILY FOUN			4252394 Page 2
P	art	Balance Sheets   Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	End of	(c) Fair Market Value
_	1	Cash - non-interest-bearing	(a) book value	(b) Book Value	(c) rail Market Value
	I	Savings and temporary cash investments	256743.	307046.	307046.
	ı	Accounts receivable	250745.	307040.	307040.
	"	Less; allowance for doubtful accounts		·	
		Pledges receivable			
	•	Less: allowance for doubtful accounts			
	5	Grants receivable			
	5	Receivables due from officers, directors, trustees, and other			
	"	disqualified persons		:	
	7	Other notes and loans receivable			<del></del>
Assets	′	Less: allowance for doubtful accounts			
	8	Inventories for sale or use			
	0	Prepaid expenses and deferred charges			
As	100	Investments - U.S. and state government obligations			
	!				
	ı	Investments - corporate stock Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
	''				
	40	Less accumulated depreciation			
	1	Investments - mortgage loans Investments - other			
	13	Land, buildings, and equipment: basis			
	14	Less accumulated depreciation			
	45	· · · · · · · · · · · · · · · · · · ·			
	13	Other assets (describe )			
	10	Total assets (to be completed by all filers)	256743.	207046	207046
_	1	Total assets (to be completed by all filers)  Accounts payable and accrued expenses	230743.	307046. 1275.	307046.
	1	·		14/5.	
	18	Grants payable Deferred revenue			
Liabilities	19				
Ē	20	Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable			
Ľ.	21	Other liabilities (describe			
	22	Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	1275.	
	20	Foundations that follow SFAS 117, check here	0.	14/5.	
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted	256743.	305771.	
SE.	25	Temporarily restricted	230743.	303771.	
391	26	Permanently restricted			
ᅙ	20	Foundations that do not follow SFAS 117, check here			
Ī		and complete lines 27 through 31.			
þ	27	Capital stock, trust principal, or current funds			
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ass	29	Retained earnings, accumulated income, endowment, or other funds			
et	30	Total net assets or fund balances	256743.	305771.	
Z	30	Total liet assets of fund balances	230743.	303771.	
	31	Total liabilities and net assets/fund balances	256743.	307046.	
				307040.	
LP	art	III Analysis of Changes in Net Assets or Fund B	salances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	256743.
2		r amount from Part I, line 27a		2	116042.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	372785.
		reases not included in line 2 (itemize) MARK-TO-MARKET	ADJUSTMENT	5	67014.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c		6	305771.
			***************************************		Form <b>990-PF</b> (2011)

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.

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<u>511.</u>

24650.

8 Enter qualifying distributions from Part XII, line 4

7 Add lines 5 and 6

123521 12-02-11

7

_	1 990-PF (2011) MIZZY JONAS FAMILY FOUNDATION, INC. 27		2523 see in			age 4
	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.	Ī				
14	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
h		1			5	11.
•	of Part I, line 27b	•				<u></u>
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
		2				0.
	The state of the s	3			5	11.
4		4		-		0.
5		5			5	11.
-	Credits/Payments:					
	2011 estimated tax payments and 2010 overpayment credited to 2011					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868)  6c 91.					
	Backup withholding erroneously withheld  6d					
		7				91.
-		8				13.
		9				33.
		10				<u> </u>
		11				
	art VII-A Statements Regarding Activities					—
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in				Yes	No
ıa	any political campaign?		ŀ	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		ŀ	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published of	or	<b> </b>	_ ייי		
	distributed by the foundation in connection with the activities.	0,	- 1			
_	Did the foundation file Form 1120-POL for this year?			1c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ŀ	16		<u> </u>
u	(1) On the foundation.  \$\[ \bigs_{					
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		ŀ			
e	managers. > \$		1		'	
•	Has the foundation engaged in any activities that have not previously been reported to the IRS?		ŀ	•		X
2	If "Yes," attach a detailed description of the activities.			2		
•	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or					
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			•		v
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		ŀ	3 4a		X
	of "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	N,	/ <b>7</b>			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	14 /	^^	4b 5		X
J	If "Yes," attach the statement required by General Instruction T.		t	-		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
0	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law</li> </ul>					
	remain in the governing instrument?	vv	t	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?		ŀ	7	X	
′	If "Yes," complete Part II, col. (c), and Part XV.					
0.	•					
oa	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NY If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		<del></del>			
0				0 F	v	
0	of each state as required by General Instruction G? If "No," attach explanation  Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendary.	ar.	}	8b_	X	
9	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	ai		^		v
10	Old any persons become substantial contributors during the tay year? It made a cabadula listing the responsible of the listing the tay year?		}	9_	-	X

	1 990-PF (2011) MIZZY JONAS FAMILY FOUNDATION, INC. 27-4252  art VII-A   Statements Regarding Activities (continued)	394	Pa	age <b>5</b>
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		<u>X</u> _
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1 1		
	If "Yes," attach statement (see instructions)	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X L	
	Website address ► N/A			
14	The books are in care of ► LYNN MIZZY JONAS  Telephone no. ► (718)	720-	<u> 772</u>	8
	Located at ► 42 ST. AUSTINS PLACE, STATEN ISLAND, NY ZIP+4 ►10	310		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<b>37</b>	, <b>,⊳</b> L	
40	and enter the amount of tax-exempt interest received or accrued during the year  15	N/		No
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	1 1	- 1	
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		/es	No
18	a During the year did the foundation (either directly or indirectly):	1 1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available		į	
	for the benefit or use of a disqualified person)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		- 1	
	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 X No			
	termination of government service, if terminating within 90 days.)  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)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	10		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2011?	1c	ļ	X
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)):		ŀ	
1	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		-	
	before 2011? Yes X No		1	
	If "Yes," list the years			
ı	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.) N/A	2b		
(	f the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
١	b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2011)	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
١	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		<u>X</u>

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Part VII-B   Statements Regarding Activities for Which I  5a During the year did the foundation pay or incur any amount to:  (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); or any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?  (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?  b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check in the answer is "Yes" to question 5a(4), does the foundation claim exemption for	Form 4720 May Be Form 4945(e))? In 4945(e))? In to carry on, directly or indirectly or educational purposes, or followed the exceptions described in indirectly or indirec	rectly,  Ye Ye Ye Ye Ye Ye Or Regulations	s X No s X No s X No s X No	94 Page 6
expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.494.  6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	5-5(d)	[/A	s No	
<ul> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a pif "Yes" to 6b, file Form 8870.</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax so if "Yes," did the foundation receive any proceeds or have any net income attribution.</li> <li>Information About Officers, Directors, Trust</li> </ul>	shelter transaction? utable to the transaction?		s X No N/A	7b X
Part VIII Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LYNN MIZZY JONAS 42 ST. AUSTINS PLACE	PRESIDENT		0	
STATEN ISLAND, NY 10310 PHILIP D. JONAS 42 ST. AUSTINS PLACE	15.00 VICE PRESIDEN	T AND TRE	ASUR	0.
STATEN ISLAND, NY 10310 DAVID JONAS	15.00 VICE PRESIDEN	0. T	0.	0.
1450 BROCKTON AVENUE # 1 LOS ANGELES, CA 90025 RACHEL JONAS	5.00 VICE PRESIDEN	0.	0.	0.
42 ST. AUSTINS PLACE STATEN ISLAND, NY 10310 2 Compensation of five highest-paid employees (other than those inc	5.00	O.	0.	0.
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				<del></del>
Total number of other employees paid over \$50,000			Form	0 9 <b>90-PF</b> (2011)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
<del></del>	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	<u>▶</u> 0
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 N/A	
2	_
	-
3	
4	
	_
Part IX-B   Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1N/A	
	_
2	
	-
	7
All other program-related investments. See instructions.	
3	_
	4
Total. Add lines 1 through 3	+
Total, Add lines 1 through 3	Form <b>990-PF</b> (2011)
	(2011)

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	24650.
þ	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	24650.
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	5	511.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	24139.
	Note. The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the four	ndation qualifies for the si	ection

4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	( <b>d)</b> 2011
1 Distributable amount for 2011 from Part XI,		· · · · ·		
line 7				0.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years:			- :	
,,		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
<b>b</b> From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 24650.				
a Applied to 2010, but not more than line 2a			0.	
<b>b</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 2011 distributable amount				0.
e Remaining amount distributed out of corpus	24650.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	24650.			
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 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	_			
section 170(b)(1)(F) or 4942(g)(3)	0.	<del></del>		
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	24650.			
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010				
e Excess from 2011 24650 .		·	<u> </u>	5 000 DE (01)

	JONAS FAMILY			27-42	52394 Page 10		
Part XIV Private Operating	Foundations (see in	structions and Part VI	I-A, question 9)	N/A			
1 a If the foundation has received a ruling	or determination letter tha	t it is a private operating					
foundation, and the ruling is effective	for 2011, enter the date of	the ruling	▶				
<b>b</b> Check box to indicate whether the fou	ınd <u>atıon is a private operati</u>	ng foundation described	in section	4942(j)(3) or 49	42(j)(5)		
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years				
income from Part I or the minimum	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total		
investment return from Part X for							
each year listed							
<b>b</b> 85% of line 2a		<del></del>					
c Qualifying distributions from Part XII,		<u> </u>					
line 4 for each year listed							
•	<del></del>	<del> </del>	<del> </del>				
d Amounts included in line 2c not							
used directly for active conduct of							
exempt activities	<del>-</del>		<del> </del>	<del></del>			
e Qualifying distributions made directly							
for active conduct of exempt activities	S.						
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(i)(3)(B)(i)							
<b>b</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			1				
securities loans (section 512(a)(5)), or royalties)		,					
(2) Support from general public			<del>                                       </del>	<del></del>			
and 5 or more exempt							
organizations as provided in							
section 4942(j)(3)(B)(III)							
(3) Largest amount of support from							
an exempt organization			<del></del>	<del></del>	<u> </u>		
(4) Gross investment income Part XV Supplementary In	formation (Comple	ata this mark and a	if the form det	ion bed \$5,000 on m			
	the year-see inst		if the foundat	ion nad \$5,000 or me	ore in assets		
		1 40010113.7					
1 Information Regarding Founda	-	. Aban 00/ - £4b - 4-4-1					
a List any managers of the foundation year (but only if they have contribute			tributions received by	y the foundation defore the cio	se of any tax		
	α πονο επαπ φοισσο <i>μ</i> ε (σσο π	000110111001 (4)(2).)					
NONE					- 4		
<ul> <li>b List any managers of the foundation other entity) of which the foundation</li> </ul>			(or an equally large p	portion of the ownership of a p	artnership or		
	nuo a 1070 or grouter intere	,,,,,					
NONE	<del> </del>						
2 Information Regarding Contrib			•				
	Check here Lifthe 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.						
				is, complete items 2a, b, c, and	J G.		
a The name, address, and telephone no	umber of the person to who	om applications should be	addressed:				
LYNN MIZZY JONAS							
12 ST. AUSTINS PLACE, STATEN ISLAND, NY 10301-1540							
<b>b</b> The form in which applications should	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 awa	d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:						
,	,	,	,	,			

**▶** 3b

Total

Form 990-PF (2011) MIZZY JONAS F2		·	ic.	<u>2</u> 7-4	1252394 Page 12
Part XVI-A Analysis of Income-Prod			1	py section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(a) (b) (c) Exclu-			(e) Related or exempt function income
1 Program service revenue:	code	7 anount	code	Amount	
b					
c			+ +-		
d	- <del>    -</del>		┼┼-		
e	- <del> </del>				
g Fees and contracts from government agencies					
2 Membership dues and assessments			-		
3 Interest on savings and temporary cash investments					6.
4 Dividends and interest from securities			+ +		12096.
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	-		1	•	
6 Net rental income or (loss) from personal					
property 7 Other investment income	-		+ +		
8 Gain or (loss) from sales of assets other					
than inventory					39019.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory 11 Other revenue:			<del>                                     </del>		
a					
b					
C					
d	_		-		
e	_	0 .	+	0.	51121
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		•1	13	
(See worksheet in line 13 instructions to verify calculations.)	)				
Part XVI-B Relationship of Activities	to the Accon	nplishment of E	xempt F	Purposes	_
		<u> </u>	-		
Explain below how each activity for which in the foundation's exempt purposes (other the			A contribute	d importantly to the accom	iplisnment of
					<del></del>
		<del></del>			
		_ <del>.</del>			
					<del></del>
	<del></del>	<del>-</del>			<del></del>
					<del></del>
		<u>-</u>			

		Exempt Organi	izations					
1	Did the org	janization directly or indir	ectly engage in any of the following	g with any other organization	described in section 501(c) of		Yes	No
	the Code (	other than section 501(c)	(3) organizations) or in section 52	7, relating to political organization	ations?			
а	Transfers f	from the reporting founda	ation to a noncharitable exempt org	ganization of:				
	(1) Cash					1a(1)		<u>X</u> _
	(2) Other	assets				1a(2)		<u>X</u> _
b	Other trans	sactions:						
	(1) Sales	of assets to a noncharitat	ble exempt organization			1b(1)		_X_
	(2) Purch	ases of assets from a nor	ncharitable exempt organization			1b(2)		<b>X</b> _
	(3) Renta	l of facilities, equipment, (	or other assets			1b(3)		X
	• -	oursement arrangements				1b(4)		X
	• •	or loan guarantees				1b(5)		X
	(6) Performance of services or membership or fundraising solicitations							
c	c Sharing of facilities, equipment, mailing lists, other assets, or paid employees							X
	_		•	•	ays show the fair market value of the good	<b>1c</b> is, other ass	ets.	
•					in any transaction or sharing arrangemen		,	
			other assets, or services received.		many danieronon or onaring arrangemen	.400		
a)ı		(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions,	and sharing an	angeme	nts
_			N/A	<u>,</u>	(2)			
			21/12					
_								
		<del></del> -	<del></del>					
	_			<del></del>	<del>                                     </del>			
			<del> </del>		<del>-</del>	_		
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				<u>-</u>				
		<del></del>				<del></del>		
						-		
_				<del></del>	<u> </u>			
2a		· ·	tly affiliated with, or related to, one		ations described	<b>—</b>		r
			r than section 501(c)(3)) or in sect	ion 527?		Yes	LX	No
b	If Yes, co	mplete the following scho		(1) T	( ) D			
		(a) Name of org	janization	(b) Type of organization	(c) Description of relation	onsnip		
		N/A						
	and he				tatements, and to the best of my knowledge tion of which preparer has any knowledge	May the IRS		
	gn   📐	Malan	and h			return with th shown below	(see ins	
He	ere 🕨	Prowiniza	if m	6/20/12	President	X Yes		] No
	Sign	ature of officer or trustee	///	Date	Title			
		Print/Type preparer's na	me Preparer's s	ignature /	Bate Check If PT	IN		
		CHRISTOPHE	RR. AL	Ala on 1/1/1/10	self- employed			
Pa	aid	SMITH, CPA		V-99, 0000	06/19/12   F	00627	281	
Pi	eparer	Firm's name ► C .		CPA'S, P.C.	Firm's EIN ▶ 13-			
	se Only			=, =				
	•	Firm's address ▶ 39	4 MANOR ROAD	<del>-</del>				
				10314	Phone no. 718	720-	267	3
						Form <b>990</b>		
								(-011)

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

**2011** 

Name of the organization

Employer identification number

	MIZZY JONAS FAMILY FOUNDATION, INC.	27-4252394				
Organization type (cl						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
Note. Only a section  General Rule  X For an organ	ation is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule and Rule and a Special Rule and Rule					
Special Rules						
For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.						
total contrib	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III					
contribution If this box is purpose Do	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.					
Caution. An organiza	ation 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),				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

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 Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

### MIZZY JONAS FAMILY FOUNDATION, INC.

27-4252394

			_4434334
Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PHILP AND LYNN JONAS  42 ST. AUSTINS PLACE  STATEN ISLAND, NY 10310	\$100000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<del></del>		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution.)

Name of organization

**Employer identification number** 

## MIZZY JONAS FAMILY FOUNDATION, INC.

27-4252394

art II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_   -			
(a) No. rom	(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

lame of orga	nization		Employer identification number								
AIZZY :	JONAS FAMILY FOUNDATION	N, INC.	27-4252394								
Part III	Exclusively religious, charitable, etc., individear Complete columns (a) through (e) and the	dual contributions to section 501	1(c)(7), (8), or (10) organizations that total more than \$1,000 for the ations completing Part III, enter for the year. (Enter this information once)								
	the total of exclusively religious, charitable, etc	., contributions of \$1,000 or less f	for the year. (Enter this information once)								
(a) No.	Use duplicate copies of Part III if additiona	il space is needed.									
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held								
.	·										
-		<del></del>									
	(e) Transfer of gift										
-	Transferee's name, address, an	Relationship of transferor to transferee									
-	<del></del>										
(a) No.			<del></del>								
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, ar	Id ZIP + 4	Relationship of transferor to transferee								
(a) No.			<del></del>								
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, ar	Relationship of transferor to transferee									
			<del></del>								
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held								
Part I	(b) i dipose of gift		(a) bescription of now gift is field								
	4) Transfer of the										
	(e) Transfer of gift										
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee								

BARCLAY'S J.P. MORGAN SECURITIES  TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A  FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT  SOURCE GROSS AMOUNT DIVIDENDS AMOUNT  BARCLAY'S J.P. MORGAN SECURITIES 6072. 0.  TOTAL TO FM 990-PF, PART I, LN 4 12096. 0. 1.  FORM 990-PF LEGAL FEES STATEMENT  CAPITAL GAINS AMOUNT  TOTAL TO FM 990-PF, PART I, LN 4 12096. 0. 1.  EXPENSES NET INVEST- ADJUSTED CHART' NET INCOME PURPORT OF THE PROPERTY OF THE PURPORT OF THE PROPERTY OF THE PURPORT O	т 1	STATEMENT	VESTMENTS	ASH IN	PORARY C	ND TEM	INGS A	ON SAV	INTEREST	RM ·990-PF
J.P. MORGAN SECURITIES  TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A  FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT  SOURCE GROSS AMOUNT DIVIDENDS AMOUNT  BARCLAY'S 6024. 0. 1.  J.P. MORGAN SECURITIES 6072. 0.  TOTAL TO FM 990-PF, PART I, LN 4 12096. 0. 1.  FORM 990-PF LEGAL FEES STATEMENT  (A) (B) (C) (D	т	AMOUNT								JRCE
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SOURCE         GROSS AMOUNT         DIVIDENDS         AMOUNT           BARCLAY'S J.P. MORGAN SECURITIES         6024. 6072. 0.         0. 0.         0. 0.         0. 0.           TOTAL TO FM 990-PF, PART I, LN 4         12096. 12096. 0.         0. 0.         0. 12096. 0.         0. 0.         0. 0.           FORM 990-PF         LEGAL FEES         STATEMENT         CAPTION         0. 0.         0. 0.         0. 0.           TO FM 990-PF, PG 1, LN 16A         8481. 8481. 0.         0. 0.         0. 0. 0.         0. 0. 0.         0. 0. 0. 0.         0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0	т 2	STATEMENT	ITIES	SECUR	ST FROM	INTERI	DS AND	IVIDENI	I	RM 990-PF
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DESCRIPTION  EXPENSES NET INVEST- ADJUSTED CHARICAL PER BOOKS MENT INCOME NET INCOME PURPORT OF THE PURPORT OF	<b>T</b> 3	STATEMENT			FEES	LEGAL				RM 990-PF
TO FM 990-PF, PG 1, LN 16A 8481. 0.  FORM 990-PF ACCOUNTING FEES STATEMENT  (A) (B) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	TABLE		ADJUSTED		NET INV	NSES	EXPE			SCRIPTION
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1900.	TABLE		ADJUSTED	EST-	NET INV	NSES	EXPE			SCRIPTION
	0 .			0.		1900.		_		
TO FORM 990-PF, PG 1, LN 16B 1900. 0.	0			0.		1900.		LN 16B	F, PG 1,	FORM 990-

FORM '990-PF	OTHER E	XPENSES	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
NYS FILING FEE BANK CHARGES	25. 23.	0.		0.		
TO FORM 990-PF, PG 1, LN 23	48.	0.		0.		

20

### Form **8868**

(Rev. January 2012)

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

• If you a	re filing for an Automatic 3-Month Extension, complet	te only Pa	irt I and check this box		ı	$\mathbf{x}$	
	re filing for an Additional (Not Automatic) 3-Month Ex	-		this form).			
Do not co	omplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed Fo	rm 8868.		
Electroni	c filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tin	ne to file (6	months for a cor	poration	
required t	o file Form 990-T), or an additional (not automatic) 3-moi	nth extens	sion of time. You can electronically f	ile Form 88	368 to request an	extension	
	file any of the forms listed in Part I or Part II with the exc		_				
	Benefit Contracts, which must be sent to the IRS in pap						
	rrs gov/efile and click on e-file for Charities & Nonprofits		(				
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded).			
A corpora	ation required to file Form 990-T and requesting an autor						
Part I only				•	ı	▶ 🔲	
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	ICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time		
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	identification nur	nber (EIN) or	
print	MIZZY JONAS FAMILY FOUNDATE	x	X 27-4252394				
File by the due date for	Number, street, and room or suite no. If a P O. box, s	ee instruc	tions.	Social se	cunty number (SS	SN)	
filing your return See	42 ST. AUSTINS PLACE						
instructions	City, town or post office, state, and ZIP code. For a for STATEN ISLAND, NY 10310	oreign add	lress, see instructions				
Catar tha			40 000 location for cook water			0 4	
	Return code for the return that this application is for (file	a separa	te application for each return)				
<b>Applicati</b>	on	Return	Application			Return	
Is For		Code	Is For			Code	
Form 990	)	01	Form 990-T (corporation)			07	
Form 990	P-BL	02	Form 1041-A			08	
Form 990	)-EZ	01	Form 4720			09	
Form 990	)-PF	04	Form 5227			10	
Form 990	)-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990	)-T (trust other than above)	06	Form 8870			12	
	LYNN MIZZY JONA						
	poks are in the care of $\blacktriangleright$ 42 ST. AUSTINS	PLAC	<u>E - STATEN ISLAND,</u>	<u>NY 1</u>	<u>0310</u>		
-	none No. ► <u>(718) 720-7728</u>		FAX No 🕨				
	organization does not have an office or place of business		•			▶ □	
	is for a Group Return, enter the organization's four digit	•	·				
box 🕨	. If it is for part of the group, check this box				ers the extension	ıs for	
1 I re	quest an automatic 3-month (6 months for a corporation						
		t organiza	tion return for the organization nam	ed above.	The extension		
	or the organization's return for:						
	X calendar year $2011$ or						
	tax year beginning	, an	id ending		·		
2 If ti	ne tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on: Initial return	Fınal retur	n		
	, and the same and						
	nrefundable credits. See instructions	<del></del>		3a	\$	91.	
	his application is for Form 990-PF, 990-T, 4720, or 6069,	-			_	•	
	imated tax payments made. Include any prior year over			3b	\$	<u> </u>	
	lance due. Subtract line 3b from line 3a Include your pa	-	· · · · · · · · · · · · · · · · · · ·				
	using EFTPS (Electronic Federal Tax Payment System)			3c	<u> </u>	91.	
	If you are going to make an electronic fund withdrawal v		**	orm 8879-			
LHA F	or Privacy Act and Paperwork Reduction Act Notice,	see Instr	uctions.		Form <b>8868</b>	(Rev. 1-2012)	

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