

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Go to www.irs.gov/Form990PF for instructions and the latest information.**

OMB No. 1545-0052
2020
Open to Public Inspection

For calendar year 2020, or tax year beginning 01-01-2020 , and ending 12-31-2020

Name of foundation MJS FOUNDATION INC		A Employer identification number 45-3826353	
Number and street (or P.O. box number if mail is not delivered to street address) 25 EAST 22ND STREET	Room/suite	B Telephone number (see instructions) (646) 362-0039	
City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10010		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>16,740,864</u>		J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	32,700,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-884,463			
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	0	-7,961			
12 Total. Add lines 1 through 11	31,815,537	-7,961	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0	0	0	0
	14 Other employee salaries and wages	144,025	0	0	142,334
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	2,435	0	0	2,435
	b Accounting fees (attach schedule)	5,538	0	0	5,233
	c Other professional fees (attach schedule)	123,195	0	0	67,515
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	926	2,275	0	0
	19 Depreciation (attach schedule) and depletion	783	0	0	
	20 Occupancy	75,458	0	0	77,051
	21 Travel, conferences, and meetings	4,898	0	0	5,035
	22 Printing and publications				
	23 Other expenses (attach schedule)	851	0	0	4,538
	24 Total operating and administrative expenses. Add lines 13 through 23	358,109	2,275	0	304,141
	25 Contributions, gifts, grants paid	24,384,282			36,596,684
26 Total expenses and disbursements. Add lines 24 and 25	24,742,391	2,275	0	36,900,825	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	7,073,146				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)			0		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	250,230	33,793	33,793
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ <u>15,000,000</u> Less: allowance for doubtful accounts ▶ _____	16,550,000	15,000,000	15,000,000
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	2,505,479	10,479	10,479
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	0	1,696,592	1,696,592
	14 Land, buildings, and equipment: basis ▶ <u>7,148</u> Less: accumulated depreciation (attach schedule) ▶ <u>7,148</u>	783	0	0
15 Other assets (describe ▶ _____)	2,442,567	0	0	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	21,749,059	16,740,864	16,740,864	
Liabilities	17 Accounts payable and accrued expenses	57,516	111,747	
	18 Grants payable	21,280,784	9,068,382	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	5,351	1,126	
	23 Total liabilities (add lines 17 through 22)	21,343,651	9,181,255	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions	405,408	7,559,609	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances (see instructions)	405,408	7,559,609		
30 Total liabilities and net assets/fund balances (see instructions) .	21,749,059	16,740,864		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	405,408
2 Enter amount from Part I, line 27a	2	7,073,146
3 Other increases not included in line 2 (itemize) ▶ _____	3	81,055
4 Add lines 1, 2, and 3	4	7,559,609
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	7,559,609

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a LT REALIZED GAIN FROM LP	P	2020-01-01	
b ST REALIZED LOSS FROM LP	P	2020-01-01	
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			193,990
b			-1,068,217
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			193,990
b			-1,068,217
c			
d			
e			

2 Capital gain net income or (net capital loss)	{	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	}	2	-874,227
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	{		}	3	-1,068,217

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE

1 Reserved	(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
2 Reserved				2
3 Reserved				3
4 Reserved				4
5 Reserved				5
6 Reserved				6
7 Reserved				7
8 Reserved				8

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and credits/payments. Total tax due is \$5,000.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, Yes, and No. Questions cover political activities, tax on political expenditures, and asset requirements.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A
14 The books are in care of MARINA SHMOUKLER Telephone no. (646) 362-0039
Located at 25 EAST 22ND STREET NEW YORK NY ZIP+4 10010
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -check here and enter the amount of tax-exempt interest received or accrued during the year. 15
16 At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year did the foundation (either directly or indirectly):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance check here.
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):
a At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? If "Yes," list the years 20, 20, 20, 20
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement-see instructions.)
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20, 20, 20, 20
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2020 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 2020.)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
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 2020?

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

5a During the year did the foundation pay or incur any amount to:		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		5b	No
Organizations relying on a current notice regarding disaster assistance check here. ▶	<input type="checkbox"/>		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<i>If "Yes," attach the statement required by Regulations section 53.4945-5(d).</i>			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No
<i>If "Yes" to 6b, file Form 8870.</i>			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(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
JAMES SIMONS 25 EAST 22ND STREET NEW YORK, NY 10010	CO-PRESIDENT 1.00	0	0	0
MARILYN SIMONS 25 EAST 22ND STREET NEW YORK, NY 10010	CO-PRESIDENT 1.00	0	0	0
JOSEPH COSMAI 25 EAST 22ND STREET NEW YORK, NY 10010	TREASURER & SECRETARY/DIRECTOR 0.25	0	0	0
JEFFREY WACKSMAN 25 EAST 22ND STREET NEW YORK, NY 10010	DIRECTOR 0.25	0	0	0

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

(a) Name and address of each employee paid more than \$50,000	(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				
Total number of other employees paid over \$50,000. ▶				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NEW HOUSE NEW YORK INC 316 WEST 84TH STREET NEW YORK, NY 10024	PHILANTHROPIC CONS.	54,244
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	2,135,259
b	Average of monthly cash balances.	1b	2,470,390
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	4,605,649
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	4,605,649
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	69,085
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,536,564
6	Minimum investment return. Enter 5% of line 5.	6	226,828

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	226,828
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	226,828
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	226,828
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	226,828

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	36,900,825
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	36,900,825
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	36,900,825

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				226,828
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2020:				
a From 2015.				
b From 2016.				
c From 2017.				
d From 2018.				
e From 2019.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ <u>36,900,825</u>				
a Applied to 2019, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2020 distributable amount.				226,828
e Remaining amount distributed out of corpus	36,673,997			
5 Excess distributions carryover applied to 2020. (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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	36,673,997			
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 2019. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	36,673,997			
10 Analysis of line 9:				
a Excess from 2016.				
b Excess from 2017.				
c Excess from 2018.				
d Excess from 2019.				
e Excess from 2020.	36,673,997			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					

3 Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test—enter:

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

c "Support" alternative test—enter:

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) See Additional Data Table

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	36,596,684
b <i>Approved for future payment</i> See Additional Data Table				
Total			▶ 3b	4,075,048

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

Part XVII

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

a Transfers from the reporting foundation to a noncharitable exempt organization of:

- (1)** Cash.
 - (2)** Other assets.
- b** Other transactions:
- (1)** Sales of assets to a noncharitable exempt organization.
 - (2)** Purchases of assets from a noncharitable exempt organization.
 - (3)** Rental of facilities, equipment, or other assets.
 - (4)** Reimbursement arrangements.
 - (5)** Loans or loan guarantees.
 - (6)** Performance of services or membership or fundraising solicitations.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

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

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

b If "Yes," complete the following schedule.

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

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here ▶

***** 2021-07-28 *****
 Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below (see instr.) Yes No

Paid Preparer Use Only

Print/Type preparer's name SCOTT THOMPSETT	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00741490
Firm's name ▶ GRANT THORNTON LLP				Firm's EIN ▶ 36-6055558
Firm's address ▶ 757 THIRD AVE 3RD FLOOR NEW YORK, NY 100172013				Phone no. (212) 599-0100

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

JAMES SIMONS

MARILYN SIMONS

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ACTION FOR AUTISM POCKET 78 JASOLA VIHAR NEW DEHLI 110 025 IN	NONE	NC	GIFT TO SUPPORT THE CHARITABLE ACTIVITIES OF ACTION FOR AUTISM FOR WORLD AUTISM AWARENESS DAY	10,000
ALL STAR CODE601 W 26TH ST RM 325 NEW YORK, NY 100011141	NONE	PC	PLEGGED GIFT FOR GENERAL OPERATING SUPPORT	150,000
AMERICAN BALLET THEATER 890 BROADWAY 3RD FL NEW YORK, NY 10003	NONE	PC	GENERAL OPERATING SUPPORT	1,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN FRIENDS OF CARDIO INFANTIL 11990 MARKET ST UNIT 402 RESTON, VA 201906001	NONE	PC	GIFT TO SUPPORT CARDIO INFANTIL IN RESPONSE TO COVID-19	250,000
AMERICAN MUSEUM OF NATURAL HISTORY CENTRAL PARK WEST AT 79TH ST NEW YORK, NY 100240000	NONE	PC	GENERAL OPERATING SUPPORT	500,000
AUTISM CARE NEPAL PO BOX 10918 LAZIMPAT KATHMANDU 44600 NP	NONE	NC	PLEGGED GIFT TO SUPPORT THE CHARITABLE ACTIVITIES OF AUTISM CARE NEPAL	20,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AUTISM SCIENCE FOUNDATION 106 W 32ND ST NEW YORK, NY 10001	NONE	PC	PROGRAM SUPPORT FOR THE DAY OF LEARNING EVENT	5,000
AUTISM SPEAKS1060 STATE RD STE 2 PRINCETON, NJ 085401446	NONE	PC	GENERAL OPERATING SUPPORT	150,000
BARD PRISON INITIATIVEPO BOX 5000 ANNANDALEONHUDSON, NY 12504	NONE	PC	PROGRAM SUPPORT FOR THE BARD PRISON INITIATIVE'S COLLEGE EDUCATION PROGRAM	100,000
Total				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BERKELEY LAB FOUNDATION 1111 FRANKLIN STREET 7TH FL OAKLAND, CA 94607	NONE	PC	PROGRAM SUPPORT FOR THE BERKELEY-TSINGHUA JOINT RESEARCH CENTER ON ENERGY AND CLIMATE CHANGE	500,000
CHANGING TIMES TAP 310 GREENWICH STREET NEW YORK, NY 100132708	NONE	PC	GENERAL OPERATING SUPPORT	60,000
CHILDREN & SCREENS INSTITUTE OF DIGITAL MEDIA AND CHILD DEVELOPMENT 125 JERICHO TPKE NO 300 JERICHO, NY 11753	NONE	PC	GENERAL OPERATING SUPPORT	250,000
Total				36,596,684



3a

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COLD SPRING HARBOR LABORATORY 1 BUNGTOWN RD COLD SPRING HARBOR, NY 11724	NONE	PC	GIFT TO SUPPORT THE WOMEN'S PARTNERSHIP FOR SCIENCE	7,500
COLUMBIA UNIVERSITY MEDICAL CENTER 1790 BROADWAY NEW YORK, NY 10019	NONE	PC	PLEDGE TO SUPPORT THE WHITAKER ADVANCED FELLOWSHIP IN DEVELOPMENTAL NEUROPSYCHIATRY	447,022
CONGREGATION BNAI JESHURUN 270 WEST 89TH STREET NEW YORK, NY 10024	NONE	PC	PLEDGED GIFT TO SUPPORT THE CENTER FOR SPIRITUALITY AND PRAYER	450,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DALTON SCHOOLS 108 E 89TH ST NEW YORK, NY 101281502	NONE	PC	PLEGGED GIFT TO SUPPORT THE CENTENNIAL: RAISE THE ROOF CAMPAIGN	500,000
EAST HARLEM TUTORIAL PROGRAM 2050 SECOND AVENUE NEW YORK, NY 10029	NONE	PC	GENERAL OPERATING SUPPORT	605,000
EAST HARLEM TUTORIAL PROGRAM 2050 SECOND AVENUE NEW YORK, NY 10029	NONE	PC	PLEGGED GIFT TO SUPPORT THE CHARTER SCHOOL FACILITY	5,000,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EAST HARLEM TUTORIAL PROGRAM 2050 SECOND AVENUE NEW YORK, NY 10029	NONE	PC	PROGRAM SUPPORT FOR THE YEAR-END FAMILY READING PROGRAM	33,000
FAMILY SERVICE LEAGUE 790 PARK AVENUE HUNTINGTON, NY 11743	NONE	PC	PLEGGED GIFT TO SUPPORT THE HEALTH AND WELLNESS CENTER	50,000
FELICITY HOUSE 25 E 22ND ST NEW YORK, NY 10010	NONE	POF	GENERAL OPERATING SUPPORT	1,000,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FIDELITY CHARITABLE 200 SEAPORT BLVD MAIL ZONE NCW4B BOSTON, MA 02210	NONE	PC	IN HONOR OF ELIZABETH SIMONS TO SUPPORT PUBLIC CHARITIES WHOSE MISSION ALIGN WITH THAT OF MJS FOUNDATION.	1,000,000
FOUNDATION FOR INDEPENDENT ARTISTS 75 BROAD ST RM 304 NEW YORK, NY 10004	NONE	PC	PLEGGED GIFT TO SUPPORT THE GENERAL OPERATIONS OF THE BARKIN/SELISSEN PROJECT	116,450
FUNDACION REINA SOFIA ZARZUELA PALACE MADRDID 28071 SP	NONE	NC	GIFT TO SUPPORT THE CHARITABLE ACTIVITIES OF FUNDACION REINA SOFIA	20,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HARLEM CHILDREN'S ZONE 35 EAST 125TH STREET NEW YORK, NY 10035	NONE	PC	GENERAL OPERATING SUPPORT	50,000
HUNTER COLLEGE FOUNDATION 695 PARK AVENUE HE 1304 NEW YORK, NY 10065	NONE	PC	PROGRAM SUPPORT FOR THE HUNTER SPEAKER SERIES	250,000
ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI PO BOX 4500 NEW YORK, NY 10029	NONE	PC	PLEGGED GIFT TO SUPPORT THE DR. MARTIN FEUER PULMONARY EDUCATIONAL FUND	500,000
Total				36,596,684

▶ **3a**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
INNOCENCE PROJECT 40 WORTH STREET SUITE 701 NEW YORK, NY 10013	NONE	PC	PROGRAM SUPPORT FOR THE CAMPAIGN FOR JUSTICE	100,000
LEARNINGSRING SCHOOL 247 E 20TH ST NEW YORK, NY 100031801	NONE	PC	GENERAL OPERATING SUPPORT	250,000
LIMROY LANE COMMUNITY FOUNDATION 27 WOODCREST DRIVE ST JAMES, NY 11780	NONE	PC	GENERAL OPERATING SUPPORT IN RESPONSE TO COVID-19	500,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LONG ISLAND COMMUNITY FOUNDATION 900 WALT WHITMAN ROAD SUITE 205 MELVILLE, NY 11747	NONE	PC	GENERAL OPERATING SUPPORT	50,000
LONG ISLAND COMMUNITY FOUNDATION 900 WALT WHITMAN ROAD SUITE 205 MELVILLE, NY 11747	NONE	PC	GENERAL OPERATING SUPPORT IN RESPONSE TO COVID-19	100,000
MAINE BEHAVIORAL HEALTHCARE 236 GANNETT DRIVE S PORTLAND, ME 04106	NONE	PC	GENERAL OPERATING SUPPORT THE CENTER FOR AUTISM AND DEVELOPMENTAL DISORDERS	200,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARLENE MEYERSON JCC MANHATTAN 334 AMSTERDAM AVE NEW YORK, NY 100238205	NONE	PC	PLEGGED GIFT TO SUPPORT THE WELLNESS PROGRAMMING	200,000
MARYMOUNT MANHATTAN COLLEGE DEVELOPMENT OFFICE 221 E 71ST ST NEW YORK, NY 100214532	NONE	PC	PROGRAM SUPPORT FOR THE STUDENT SCHOLARSHIP FUND	50,000
MAYOR'S FUND TO ADVANCE NEW YORK CITY 253 BROADWAY 6TH FLOOR NEW YORK, NY 10007	NONE	PC	PROGRAM SUPPORT FOR THE CONNECTION 2 CARE INITIATIVE	250,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
METROPOLITAN OPERA 30 LINCOLN CENTER NEW YORK, NY 100236922	NONE	PC	GENERAL OPERATING SUPPORT	3,500
MOREHOUSE COLLEGE 830 WESTVIEW DRIVE SW ATLANTA, GA 30314	NONE	PC	PLEGGED GIFT TO SUPPORT THE ADVANCEMENT OF MATH AND SCIENCE EDUCATION	500,000
NATIONAL MUSEUM OF MATHEMATICS 134 W 26TH ST RM 4S NEW YORK, NY 100016960	NONE	PC	GENERAL OPERATING SUPPORT	301,084
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW YORK COMMUNITY TRUST 909 THIRD AVE 22ND FLOOR NEW YORK, NY 10022	NONE	PC	GIFT TO SUPPORT THE EMERGENCY CASH ASSISTANCE PROGRAM (ECAP) IN RESPONSE TO COVID-19	500,000
NEW YORK PUBLIC LIBRARY 445 FIFTH AVENUE 8TH FL NEW YORK, NY 100160133	NONE	PC	PLEGGED GIFT TO SUPPORT THE LIBRARY'S CAPITAL CAMPAIGN	5,000,000
NEW YORK UNIVERSITY 105 EAST 17TH STREET 4TH FLOOR NEW YORK, NY 100032170	NONE	PC	PLEGGED GIFT TO SUPPORT THE DR. ALISON ESTABROOK FELLOWSHIP AT NYU	600,000
Total				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTH SHORE CHILD & FAMILY GUIDANCE CENTER 480 OLD WESTBURY RD ROSLYN HEIGHTS, NY 11577	NONE	PC	GENERAL OPERATING SUPPORT	100,000
NYC HEALTH HOSPITALSMETROPOLITAN 1901 FIRST AVENUE NEW YORK, NY 10029	NONE	PC	RESTRICTED GENERAL OPERATING SUPPORT TO UPGRADE THE BIOPSY SYSTEM FOR THE RADIOLOGY DEPARTMENT	490,700
PACE UNIVERSITYONE PACE PLAZA NEW YORK, NY 10038	NONE	PC	PROGRAM SUPPORT FOR THE SCHOLARSHIP FUND	200,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PARTNERSHIP FOR INNER-CITY EDUCATION 1011 FIRST AVENUE NO 1856 NEW YORK, NY 10022	NONE	PC	GIFT TO SUPPORT THE COVID FAMILY RELIEF FUND	250,000
PARTNERSHIP FOR INNER-CITY EDUCATION 1011 FIRST AVENUE NO 1856 NEW YORK, NY 10022	NONE	PC	GENERAL OPERATING SUPPORT	250,000
PIONEER WORKS159 PIONEER ST BROOKLYN, NY 112311263	NONE	PC	GENERAL OPERATING SUPPORT	100,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RESEARCH FOUNDATION FOR MENTAL HYGIENE 150 BROADWAY NO 301 MENANDS, NY 122042726	NONE	PC	PLEGGED GIFT TO SUPPORT THE WHITAKER FELLOWSHIP AT THE NYS PSYCHIATIC INSTITUTE.	152,095
ROBIN HOOD FOUNDATION 826 BROADWAY NEW YORK, NY 10003	NONE	PC	GIFT TO SUPPORT THE ROBIN HOOD RELIEF FUND IN RESPONSE TO COVID-19	5,000,000
ROBIN HOOD FOUNDATION 826 BROADWAY NEW YORK, NY 10003	NONE	PC	GENERAL OPERATING SUPPORT FOR RHF'S GRANTMAKING PROGRAMS	5,600,000
Total ▶ 3a				36,596,684

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RONALD MCDONALD HOUSE CHARITIES NEW YORK METRO 26707 76TH AVE NEW HYDE PARK, NY 11040	NONE	PC	GENERAL OPERATING SUPPORT	1,000,000
SETAUKET NEIGHBORHOOD HOUSE PO BOX 2192 SETAUKET, NY 11733	NONE	PC	GENERAL OPERATING SUPPORT	1,000
ST JOHN THE EVANGELIST RC CHURCH FOOD PANTRY C/O EASTERN FARM WORKERS 58 BEAVER DAM ROAD BELLPORT, NY 11713	NONE	PC	GENERAL OPERATING SUPPORT FOR THE EASTERN FARM WORKERS ASSOCIATION	15,000
Total				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STONY BROOK FOUNDATION 330 ADMINISTRATION BUILDING STONY BROOK, NY 117941601	NONE	PC	GENERAL OPERATING SUPPORT	1,500,000
STONY BROOK FOUNDATION 330 ADMINISTRATION BUILDING STONY BROOK, NY 117941601	NONE	PC	PROGRAM SUPPORT FOR THE WALTER J. HAWRYS RECREATIONAL CENTER	333,333
STONY BROOK FOUNDATION 330 ADMINISTRATION BUILDING STONY BROOK, NY 117941601	NONE	PC	GIFT TO SUPPORT THE STUDENT EMERGENCY FUND IN RESPONSE TO COVID-19	500,000
Total ▶ 3a				36,596,684

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNITED HOSPITAL FUND 1411 BROADWAY NEW YORK, NY 10018	NONE	PC	GENERAL OPERATING SUPPORT	25,000
UNIVERSITY OF CALIFORNIA LOS ANGELES 10889 WILSHIRE BOULEVARD SUITE 1100 LOS ANGELES, CA 90024	NONE	PC	PLEGGED GIFT TO SUPPORT A PH.D. TRAINING PROGRAM FOR CLINICAL PSYCHOLOGY RESEARCH IN AUTISM	450,000
Total ▶ 3a				36,596,684

TY 2020 Accounting Fees Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GRANT THORNTON LLP	4,800	0	0	4,800
FISCAL MANAGEMENT ASSOCIATES, LLC	738	0	0	433

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2020 Expenditure Responsibility Statement

Name: MJS FOUNDATION INC

EIN: 45-3826353

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
ACTION FOR AUTISM THE NATIONAL CENTRE FOR AUTISM	POCKET 7 AND 8 JASOLA VIHAR NEW DELHI 110 025 IN	2020-02-03	10,000	GIFT TO SUPPORT THE CHARITABLE ACTIVITIES OF ACTION FOR AUTISM FOR WORLD AUTISM AWARENESS DAY	5,063	NO	3/15/20, 5/19/21	2020-12-31	THE GRANTEE HAS CERTIFIED THAT IT HAS EXPENDED, FOR CHARITABLE AND EDUCATIONAL PURPOSES, AN AMOUNT EQUAL TO THE VALUE OF THE GRANT, IN ACCORDANCE WITH THE OUT-OF-CORPUS RULES OF SECTION 4942(G)(3) OF THE CODE.
FUNDACION REINA SOFIA	ZARZUELA PALACE MADRID 28071 SP	2020-06-08	20,000	GIFT TO SUPPORT THE CHARITABLE ACTIVITIES OF FUNDACION REINA SOFIA	10,000	NO	4/30/21	2020-12-31	THE GRANTEE HAS CERTIFIED THAT IT HAS EXPENDED, FOR CHARITABLE AND EDUCATIONAL PURPOSES, AN AMOUNT EQUAL TO THE VALUE OF THE GRANT, IN ACCORDANCE WITH THE OUT-OF-CORPUS RULES OF SECTION 4942(G)(3) OF THE CODE.
AUTISM CARE NEPAL	PO BOX 10918 LAZIMPAT KATHMANDU 44600 NP	2017-03-21	40,000	PLEGDED GIFT TO SUPPORT THE CHARITABLE ACTIVITIES OF AUTISM CARE NEPAL	30,000	NO	12/31/20, 12/31/21	2020-12-31	THE GRANTEE HAS CERTIFIED THAT IT HAS EXPENDED, FOR CHARITABLE AND EDUCATIONAL PURPOSES, AN AMOUNT EQUAL TO THE VALUE OF THE GRANT, IN ACCORDANCE WITH THE OUT-OF-CORPUS RULES OF SECTION 4942(G)(3) OF THE CODE.
FELICITY HOUSE	25 EAST 22ND STREET NEW YORK, NY 10010	2019-12-01	1,000,000	GIFT TO SUPPORT AUTISM PROGRAM FOR WOMEN	1,000,000	NO	1/31/21	2020-12-31	THE GRANTEE HAS CERTIFIED THAT IT HAS EXPENDED, FOR CHARITABLE AND EDUCATIONAL PURPOSES, AN AMOUNT EQUAL TO THE VALUE OF THE GRANT, IN ACCORDANCE WITH THE OUT-OF-CORPUS RULES OF SECTION 4942(G)(3) OF THE CODE.
FELICITY HOUSE	25 EAST 22ND STREET NEW YORK, NY 10010	2020-12-01	1,000,000	GIFT TO SUPPORT AUTISM PROGRAM FOR WOMEN	0	NO	1/31/22	2020-12-31	THE GRANTEE HAS CERTIFIED THAT IT HAS EXPENDED, FOR CHARITABLE AND EDUCATIONAL PURPOSES, AN AMOUNT EQUAL TO THE VALUE OF THE GRANT, IN ACCORDANCE WITH THE OUT-OF-CORPUS RULES OF SECTION 4942(G)(3) OF THE CODE.
YORK UNIVERSITY	4700 KEELE STREET TORONTO M3J1 CA	2016-10-06	1,000,000	TO SUPPORT THE ACTIVITIES OF THE FACULTY OF SCIENCE	1,000,000	NO	12/31/19, 12/31/20	2020-12-31	THE GRANTEE HAS CERTIFIED THAT IT HAS EXPENDED, FOR CHARITABLE AND EDUCATIONAL PURPOSES, AN AMOUNT EQUAL TO THE VALUE OF THE GRANT, IN ACCORDANCE WITH THE OUT-OF-CORPUS RULES OF SECTION 4942(G)(3) OF THE CODE.

TY 2020 General Explanation Attachment**Name:** MJS FOUNDATION INC**EIN:** 45-3826353**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1	DEPRECIATION	990-PF, PART I, LINE 19	FURNITURE & EQUIPMENT - DEPRECIATION - \$783

General Explanation Attachment

Identifier	Return Reference	Explanation	
2	FIXED ASSETS	FORM 990-PF, PART II, LINE 14	FURNITURE & EQUIPMENT - \$7,148 TOTAL COST BASIS - \$7,148 ACCUMULATED DEPRECIATION - \$7,148 NET FIXED ASSETS - \$0

TY 2020 Investments - Other Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
LIMITED PARTNERSHIP	FMV	1,696,592	1,696,592

TY 2020 Legal Fees Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LOEB, BLOCK & PARTNERS LLP	2,435	0	0	2,435

TY 2020 Other Assets Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DUE FROM INVESTMENT	2,442,567		

TY 2020 Other Expenses Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CHARITABLE EVENTS	0	0	0	3,124
EQUIPMENT RENTAL	350	0	0	350
OFFICE EXPENSES	203	0	0	741
POSTAGE & DELIVERY	198	0	0	223
FILING FEES	100	0	0	100

TY 2020 Other Income Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PORTFOLIO LOSS FROM INVESTMENT IN LIMITED PARTNERSHIP	0	-7,961	0

TY 2020 Other Increases Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353**Other Increases Schedule**

Description	Amount
UNREALIZED GAIN ON INVESTMENT	81,055

TY 2020 Other Liabilities Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353

Description	Beginning of Year - Book Value	End of Year - Book Value
DEFERRED EXCISE TAX LIABILITY	0	1,126
DEFERRED RENT	1,972	0
CURRENT TAX PAYABLE	3,379	0

TY 2020 Other Professional Fees Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PHILANTHROPIC MGMT. ADVISING	109,574	0	0	54,244
INFORMATION TECH SERVICES	13,271	0	0	13,271
OTHER CONSULTING	350	0	0	0

TY 2020 Taxes Schedule**Name:** MJS FOUNDATION INC**EIN:** 45-3826353**Taxes Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX PROVISION	926	0	0	0
FOREIGN TAXES	0	2,275	0	0

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.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2020

Name of the organization
MJS FOUNDATION INC

Employer identification number
45-3826353

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
MJS FOUNDATION INC

Employer identification number
45-3826353

Part I

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES & MARILYN SIMONS 25 EAST 22ND STREET NEW YORK, NY 10010	\$ 32,700,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization MJS FOUNDATION INC	Employer identification number 45-3826353
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____

Name of organization
MJS FOUNDATION INC

Employer identification number
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	