

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

2011

Department of the Treasury
Internal Revenue Service

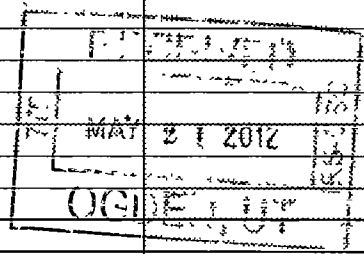
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2011 or tax year beginning

, and ending

| | | |
|---|--|--|
| Name of foundation FOCUS AUTISM INC | | A Employer identification number 27-3400299 |
| Number and street (or P O box number if mail is not delivered to street address) 776 MOUNTAIN BLVD | Room/suite 202 | B Telephone number 908-279-7881 |
| City or town, state, and ZIP code WATCHUNG, NJ 07069 | | 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) ▶ \$ 2,489,260. (Part I, column (d) must be on cash basis) | J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ | 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 <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))</small> | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---|------------------------------------|---------------------------|-------------------------|---|
| 1 Contributions, gifts, grants, etc., received | 1,280,000. | | N/A | |
| 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 | 2,269. | 2,269. | | STATEMENT 2 |
| 5a Gross rents | 418,804. | 418,804. | | STATEMENT 3 |
| b Net rental income or (loss) 271,696. | | | | STATEMENT 4 |
| 6a Net gain or (loss) from sale of assets not on line 10 | <4,028.> | | | STATEMENT 1 |
| b Gross sales price for all assets on line 6a 637,683. | | | | |
| 7 Capital gain net income (from Part IV, line 2) | | 924. | | |
| 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) | | | | |
| 11 Other income | | | | |
| 12 Total Add lines 1 through 11 | 1,697,045. | 421,997. | | |
| 13 Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| 14 Other employee salaries and wages | | | | |
| 15 Pension plans, employee benefits | | | | |
| 16a Legal fees | | | | |
| b Accounting fees STMT 5 3,500. | 3,500. | 0. | | 3,500. |
| c Other professional fees STMT 6 19,606. | 19,606. | 3,750. | | 15,856. |
| 17 Interest 181. | 181. | 181. | | 0. |
| 18 Taxes STMT 7 91,012. | 91,012. | 88,791. | | 0. |
| 19 Depreciation and depletion 52,317. | 52,317. | 52,317. | | |
| 20 Occupancy | | | | |
| 21 Travel, conferences, and meetings | | | | |
| 22 Printing and publications | | | | |
| 23 Other expenses STMT 8 16,341. | 16,341. | 2,399. | | 13,942. |
| 24 Total operating and administrative expenses Add lines 13 through 23 | 182,957. | 147,438. | | 33,298. |
| 25 Contributions, gifts, grants paid 580,400. | 580,400. | | | 580,400. |
| 26 Total expenses and disbursements Add lines 24 and 25 | 763,357. | 147,438. | | 613,698. |
| 27 Subtract line 26 from line 12 | 933,688. | | | |
| a Excess of revenue over expenses and disbursements | | | | |
| b Net investment income (if negative, enter -0-) | | 274,559. | | |
| c Adjusted net income (if negative, enter -0-) | | | N/A | |



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| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only | | |
|---|---|---|-------------------|-----------------------|
| | | Beginning of year | End of year | |
| | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 Cash - non-interest-bearing | 45,634. | 176,237. | 176,237. |
| | 2 Savings and temporary cash investments | | | |
| | 3 Accounts receivable ▶ | | | |
| | Less allowance for doubtful accounts ▶ | 9,833. | | |
| | 4 Pledges receivable ▶ | | | |
| | Less allowance for doubtful accounts ▶ | | | |
| | 5 Grants receivable | | | |
| | 6 Receivables due from officers, directors, trustees, and other disqualified persons | | | |
| | 7 Other notes and loans receivable ▶ | | | |
| | Less allowance for doubtful accounts ▶ | | | |
| | 8 Inventories for sale or use | | | |
| | 9 Prepaid expenses and deferred charges | 181. | | |
| | 10a Investments - U S and state government obligations | | | |
| | b Investments - corporate stock STMT 9 | 0. | 237,778. | 186,787. |
| | c Investments - corporate bonds | | | |
| 11 Investments - land, buildings and equipment basis ▶ | 2,674,459. | | | |
| Less accumulated depreciation ▶ | 303,764. | 1,743,012. | 2,370,695. | |
| 12 Investments - mortgage loans | | | | |
| 13 Investments - other | | | | |
| 14 Land, buildings, and equipment basis ▶ | | | | |
| Less accumulated depreciation ▶ | | | | |
| 15 Other assets (describe ▶) | | | | |
| 16 Total assets (to be completed by all filers) | 1,798,660. | 2,784,710. | 2,489,260. | |
| Liabilities | 17 Accounts payable and accrued expenses | 10,050. | 55,537. | |
| | 18 Grants payable | | | |
| | 19 Deferred revenue | | | |
| | 20 Loans from officers, directors, trustees, and other disqualified persons | | | |
| | 21 Mortgages and other notes payable | | | |
| 22 Other liabilities (describe ▶ SECURITY DEPOSITS) | 19,710. | 26,585. | | |
| 23 Total liabilities (add lines 17 through 22) | 29,760. | 82,122. | | |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> | | | |
| | 24 Unrestricted | | | |
| | 25 Temporarily restricted | | | |
| | 26 Permanently restricted | | | |
| | Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> | | | |
| | 27 Capital stock, trust principal, or current funds | 0. | 0. | |
| | 28 Paid-in or capital surplus, or land, bldg, and equipment fund | 0. | 0. | |
| 29 Retained earnings, accumulated income, endowment, or other funds | 1,768,900. | 2,702,588. | | |
| 30 Total net assets or fund balances | 1,768,900. | 2,702,588. | | |
| 31 Total liabilities and net assets/fund balances | 1,798,660. | 2,784,710. | | |

Part III Analysis of Changes in Net Assets or Fund Balances

| | | |
|--|----------|-------------------|
| 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) | 1 | 1,768,900. |
| 2 Enter amount from Part I, line 27a | 2 | 933,688. |
| 3 Other increases not included in line 2 (itemize) ▶ | 3 | 0. |
| 4 Add lines 1, 2, and 3 | 4 | 2,702,588. |
| 5 Decreases not included in line 2 (itemize) ▶ | 5 | 0. |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 2,702,588. |

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.) |
|--|--|--------------------------------------|----------------------------------|
| 1a PUBLICLY TRADED SECURITIES | P | 01/01/11 | 12/31/11 |
| b | | | |
| 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 637,683. | | 636,759. | 924. |
| b | | | |
| 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) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | |
| a | | | 924. |
| b | | | |
| 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 | 924. |
| 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) If (loss), enter -0- in Part I, line 8 | | 3 | N/A |

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (d) Distribution ratio (col (b) divided by col (c)) |
|---|---------------------------------------|---|--|
| 2010 | 146,378. | 1,767,556. | .082814 |
| 2009 | | | |
| 2008 | | | |
| 2007 | | | |
| 2006 | | | |

| | | |
|---|---|------------|
| 2 Total of line 1, column (d) | 2 | .082814 |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years | 3 | .082814 |
| 4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5 | 4 | 2,412,093. |
| 5 Multiply line 4 by line 3 | 5 | 199,755. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | 6 | 2,746. |
| 7 Add lines 5 and 6 | 7 | 202,501. |
| 8 Enter qualifying distributions from Part XII, line 4 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 | 8 | 613,698. |

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, credits/payments, and total tax due. Total tax due is 1,246.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, unrelated business income, and substantial contributors. Includes a Yes/No column and a 'Refunded' indicator.

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 WWW.FOCUSAUTISMINC.ORG
14 The books are in care of BARRY SEGAL Telephone no 908-279-7881 Located at 776 MOUNTAIN BLVD - SUITE 202, WATCHUNG, NJ ZIP+4 07069
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 N/A
16 At any time during calendar year 2011, 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 Form TD F 90-22 1 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 2011?
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 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? If "Yes," list the years
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
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 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)
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 2011?

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

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No
 Organizations relying on a current notice regarding disaster assistance check here N/A

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
 If "Yes," attach the statement required by Regulations section 53.4945-5(d) N/A

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No N/A

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.

| (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 |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 11 | | 0. | 0. | 0. |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

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

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

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

| | Expenses |
|-------|----------|
| 1 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 |
|--|-----------|
| 1 N/A | |
| 2 | |
| 3 All other program-related investments See instructions | |
| 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 | 185,983. |
| b | Average of monthly cash balances | 1b | 114,157. |
| c | Fair market value of all other assets | 1c | 2,148,685. |
| d | Total (add lines 1a, b, and c) | 1d | 2,448,825. |
| 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 | 2,448,825. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 36,732. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 2,412,093. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 120,605. |

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 | 120,605. |
| 2a | Tax on investment income for 2011 from Part VI, line 5 | 2a | 2,746. |
| b | Income tax for 2011 (This does not include the tax from Part VI) | 2b | |
| c | Add lines 2a and 2b | 2c | 2,746. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 117,859. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 117,859. |
| 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 | 117,859. |

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 | 613,698. |
| 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 | 613,698. |
| 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 | 2,746. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 610,952. |

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 2010 | (c) 2010 | (d) 2011 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2011 from Part XI, line 7 | | | | 117,859. |
| 2 Undistributed income, if any, as of the end of 2011 | | | | |
| a Enter amount for 2010 only | | | 0. | |
| b Total for prior years | | 0. | | |
| 3 Excess distributions carryover, if any, to 2011 | | | | |
| a From 2006 | | | | |
| b From 2007 | | | | |
| c From 2008 | | | | |
| d From 2009 | | | | |
| e From 2010 | 114,140. | | | |
| f Total of lines 3a through e | 114,140. | | | |
| 4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 613,698. | | | | |
| a Applied to 2010, 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 2011 distributable amount | | | | 117,859. |
| e Remaining amount distributed out of corpus | 495,839. | | | |
| 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: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 609,979. | | | |
| 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. | | | |
| 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 | 609,979. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2007 | | | | |
| b Excess from 2008 | | | | |
| c Excess from 2009 | | | | |
| d Excess from 2010 | 114,140. | | | |
| e Excess from 2011 | 495,839. | | | |

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling ▶

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

| | Tax year | | | | (e) Total |
|--|----------|----------|----------|----------|-----------|
| | (a) 2011 | (b) 2010 | (c) 2009 | (d) 2008 | |
| 2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | | | | | |
| 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))

BARRY SEGAL

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

NONE

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

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

a The name, address, and telephone number 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 Name and address (home or business) | 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 |
|---|---|--------------------------------|----------------------------------|----------|
| a Paid during the year | | | | |
| ALPINE LEARNING GROUP 777 PARAMUS RD PARAMUS, NJ 07652 | NONE | 501(C)(3) | SOCIAL WELFARE | 25,000. |
| ALPINE LEARNING GROUP - BIKE EVENT 777 PARAMUS RD PARAMUS, NJ 07652 | NONE | 501(C)(3) | SOCIAL WELFARE | 100. |
| AUTISM CONNECTS TANZANIA 10 COLDSTREAM LN UPPER SADDLE RIVER, NJ 07458 | NONE | 501(C)(3) | MEDICAL RESEARCH | 5,000. |
| AUTISM ESCAPES GOLF OUTING MAY 17TH, 2011 16 MT. BETHEL RD SUITE 203 WARREN, NJ 07059 | NONE | 501(C)(3) | MEDICAL RESEARCH | 1,800. |
| AUTISM SPEAKS 1 EAST 33RD ST 4TH FLOOR NEW YORK, NY 10016 | NONE | 501(C)(3) | MEDICAL RESEARCH | 51,000. |
| Total SEE CONTINUATION SHEET(S) ▶ 3a | | | | 580,400. |
| b Approved for future payment | | | | |
| NONE | | | | |
| | | | | |
| | | | | |
| Total ▶ 3b | | | | 0. |

Part XV Supplementary Information

| 3 Grants and Contributions Paid During the Year (Continuation) | | | | |
|---|--|--------------------------------------|-------------------------------------|-----------------|
| Recipient Name and address (home or business) | 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 |
| CHIP INTERNATIONAL - AUTISM SENEGAL 4024 AMBOY RD STATEN ISLAND, NY 10308 | NONE | 501(C)(3) | MEDICAL RESEARCH | 20,000. |
| COMPREHENSIVE AUTISM ASSESSMENT & TREATMENT CENTER OF NJ 15 DOWNINGTOWN COURT WARREN, NJ 07059 | NONE | 501(C)(3) | MEDICAL RESEARCH | 60,000. |
| EASTCHESTER SEPTA (PAUL KIM) 580 WHITE PLAINS RD EASTCHESTER, NY 10709 | NONE | 501(C)(3) | MEDICAL RESEARCH | 5,000. |
| FLYING PUP PRODUCTION 54 BURROUGHS WAY MAPLEWOOD, NJ 07040 | NONE | 501(C)(3) | SOCIAL WELFARE | 15,000. |
| GENERATION RESCUE 13836 VENTURA BLVD STE 259 SHERMAN OAKS, CA 91423 | NONE | 501(C)(3) | MEDICAL RESEARCH | 40,000. |
| HOLLYROD FOUNDATION 9250 WILSHIRE BLVD LI15 BEVERLY HILLS, CA 90212 | NONE | 501(C)(3) | SOCIAL WELFARE | 2,000. |
| KOMO AUTISM CENTER 3151 NORTH HILL FARM DR TUCSON, AZ 85712 | NONE | 501(C)(3) | SOCIAL WELFARE | 20,000. |
| M.I.N.D. INSTITUTE 2825 50TH ST SACRAMENTO, CA 95817 | NONE | 501(C)(3) | SOCIAL WELFARE | 50,000. |
| MARCUS AUTISM CENTER INC. 1920 BRIARCLIFF RD NE ATLANTA, GA 30329 | NONE | 501(C)(3) | MEDICAL RESEARCH | 50,000. |
| MYGOAL INC. AUTISM PO BOX 531 MONMOUTH JUNCTION, NJ 08852 | NONE | 501(C)(3) | MEDICAL RESEARCH | 12,000. |
| Total from continuation sheets | | | | 497,500. |

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

| Recipient Name and address (home or business) | 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 |
|--|---|--------------------------------|----------------------------------|---------|
| MWANGAZA PO BOX 10074 CHICAGO, IL 61610-0074 | NONE | 501(C)(3) | SOCIAL WELFARE | 10,000. |
| POAC (PARENTS OF AUTISTIC CHILDREN) 1999 ROUTE 88 BRICK, NJ 08724 | NONE | 501(C)(3) | MEDICAL RESEARCH | 45,000. |
| ROSES FOR AUTISM 929 BOSTON POST RD GUILFORD, CT 06437 | NONE | 501(C)(3) | MEDICAL RESEARCH | 10,000. |
| SAFEMINDS 16033 BOLSA CHICA #104-142 HUNTINGTON BEACH, CA 92649 | NONE | 501(C)(3) | SOCIAL WELFARE | 70,000. |
| ST. PETER'S FOUNDATION 254 EASTON AVE NEW BRUNSWICK, NJ 08901 | NONE | 501(C)(3) | MEDICAL RESEARCH | 50,000. |
| THE MIDLAND FOUNDATION BOX 5026 NORTH BRANCH, NJ 08876 | NONE | 501(C)(3) | SOCIAL WELFARE | 1,000. |
| THE NATIONAL VACCINE INFORMATION CENTER (NVIC) 407 CHURCH ST NE STE H VIENNA, VA 22180 | NONE | 501(C)(3) | MEDICAL RESEARCH | 37,500. |
| | | | | |
| | | | | |
| | | | | |
| Total from continuation sheets | | | | |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) Related or exempt function income |
|--|---------------------------|---------------|--------------------------------------|---------------|---|
| | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | |
| 1 Program service revenue | | | | | |
| a _____ | | | | | |
| b _____ | | | | | |
| c _____ | | | | | |
| d _____ | | | | | |
| e _____ | | | | | |
| f _____ | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| 4 Dividends and interest from securities | | | 14 | 2,269. | |
| 5 Net rental income or (loss) from real estate | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | 271,696. |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | 18 | <4,028.> | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue | | | | | |
| a _____ | | | | | |
| b _____ | | | | | |
| c _____ | | | | | |
| d _____ | | | | | |
| e _____ | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0. | | <1,759.> | 271,696. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 269,937. |

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) |
|----------|--|
| 5B | RENTAL INCOME IS GENERATED FROM THE FOUNDATION'S OWNERSHIP OF REAL ESTATE. THIS INCOME IS UTILIZED TO PROMOTE THE FOUNDATION'S MISSION. |
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Part XVII

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

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- | | Yes | No |
|---|-----|----|
| a Transfers from the reporting foundation to a noncharitable exempt organization of | | |
| (1) Cash | | X |
| (2) Other assets | | X |
| b Other transactions | | |
| (1) Sales of assets to a noncharitable exempt organization | | X |
| (2) Purchases of assets from a noncharitable exempt organization | | X |
| (3) Rental of facilities, equipment, or other assets | | X |
| (4) Reimbursement arrangements | | X |
| (5) Loans or loan guarantees | | X |
| (6) Performance of services or membership or fundraising solicitations | | X |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees | | X |
| 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 |
|-------------|---------------------|---|--|
| | | N/A | |
| | | | |
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2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
| N/A | | |
| | | |
| | | |
| | | |
| | | |
| | | |

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

Steve Kreinik
 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 | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
| | STEVE KREINIK, CPA | <i>Steve Kreinik</i> | 5/2/12 | | P00839914 |
| | Firm's name ▶ J.H. COHN LLP | Firm's EIN ▶ 22-1478099 | | | |
| | Firm's address ▶ 1212 6TH AVENUE NEW YORK, NY 10036 | | | Phone no | 212-297-0400 |

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

FOCUS AUTISM INC

Employer identification number

27-3400299

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 foundationCheck 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

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.
- 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.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on 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)

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)

| | |
|---|---|
| Name of organization FOCUS AUTISM INC | Employer identification number 27-3400299 |
|---|---|

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 | BARRY SEGAL 776 MOUTAIN BLVD WATCHUNG, NJ 07069 | \$ 600,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 2 | BAS PROPERTIES LLC 776 MOUTAIN BLVD WATCHUNG, NJ 07069 | \$ 680,000. | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| | | \$ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |

Name of organization

Employer identification number

FOCUS AUTISM INC

27-3400299

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|------------------------------|--|--|----------------------|
| 2 | LAND AND BUILDING - SPRINGFIELD, MA | \$ 680,000. | 05/31/11 |
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | |
| | | \$ | |

| | |
|---|---|
| Name of organization FOCUS AUTISM INC | Employer identification number 27-3400299 |
|---|---|

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) ▶ \$ _____
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 | |
| | | | |

FORM 990-PF GAIN OR (LOSS) FROM SALE OF ASSETS STATEMENT 1

| (A) DESCRIPTION OF PROPERTY | (B) GROSS SALES PRICE | (C) COST OR OTHER BASIS | (D) EXPENSE OF SALE | (E) MANNER ACQUIRED PURCHASED | (F) DATE ACQUIRED 01/01/11 | (F) DATE SOLD 12/31/11 | (F) GAIN OR LOSS |
|---------------------------------------|-----------------------------|-------------------------------|---------------------------|--|-------------------------------------|------------------------------|---------------------|
| PUBLICLY TRADED SECURITIES | 637,683. | 641,711. | 0. | | | | <4,028.> |
| CAPITAL GAINS DIVIDENDS FROM PART IV | | | | | | | 0. |
| TOTAL TO FORM 990-PF, PART I, LINE 6A | | | | | | | <4,028.> |

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDENDS | COLUMN (A) AMOUNT |
|----------------------------------|--------------|----------------------------|----------------------|
| TD AMERITRADE | 2,269. | 0. | 2,269. |
| TOTAL TO FM 990-PF, PART I, LN 4 | 2,269. | 0. | 2,269. |

FORM 990-PF RENTAL INCOME STATEMENT 3

| KIND AND LOCATION OF PROPERTY | ACTIVITY NUMBER | GROSS RENTAL INCOME |
|---------------------------------------|--------------------|------------------------|
| RENTAL PROPERTY - COLUMBUS, OH | 1 | 353,048. |
| RENTAL PROPERTY - SPRINGFIELD ADMIRAL | 2 | 65,756. |
| TOTAL TO FORM 990-PF, PART I, LINE 5A | | 418,804. |

| FORM 990-PF | RENTAL EXPENSES | | STATEMENT | 4 |
|---|-----------------|---------|-----------|---|
| DESCRIPTION | ACTIVITY NUMBER | AMOUNT | TOTAL | |
| APPRAISAL FEES | | 3,750. | | |
| DEPRECIATION EXPENSE | | 52,317. | | |
| REAL ESTATE TAXES | | 75,203. | | |
| FILING FEES | | 1,385. | | |
| INSURANCE EXPENSE | | 996. | | |
| OFFICE SUPPLIES | | 18. | | |
| - SUBTOTAL - | 1 | | 133,669. | |
| REAL ESTATE TAXES | | 13,439. | | |
| - SUBTOTAL - | 2 | | 13,439. | |
| TOTAL RENTAL EXPENSES | | | 147,108. | |
| NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B | | | 271,696. | |

| FORM 990-PF | ACCOUNTING FEES | | | | STATEMENT | 5 |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|-----------|---|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | | |
| ACCOUNTING FEES | 3,500. | 0. | | 3,500. | | |
| TO FORM 990-PF, PG 1, LN 16B | 3,500. | 0. | | 3,500. | | |

| FORM 990-PF | OTHER PROFESSIONAL FEES | | | | STATEMENT | 6 |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|-----------|---|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES | | |
| CONSULTING FEES | 15,856. | 0. | | 15,856. | | |
| APPRAISAL FEES | 3,750. | 3,750. | | 0. | | |
| TO FORM 990-PF, PG 1, LN 16C | 19,606. | 3,750. | | 15,856. | | |

FORM 990-PF TAXES STATEMENT 7

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| FOREIGN TAXES | 149. | 149. | | 0. |
| 2010 BALANCE DUE | 701. | 0. | | 0. |
| 2011 ESTIMATES | 1,520. | 0. | | 0. |
| REAL ESTATE TAXES | 75,203. | 75,203. | | 0. |
| REAL ESTATE TAXES | 13,439. | 13,439. | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | 91,012. | 88,791. | | 0. |

FORM 990-PF OTHER EXPENSES STATEMENT 8

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| TRAVEL AND MEETINGS | 4,452. | 0. | | 4,452. |
| APPRAISAL FEES | 2,500. | 0. | | 2,500. |
| NJ FILING FEES | 250. | 0. | | 250. |
| BOOKS & PERIODICALS | 291. | 0. | | 291. |
| REGISTRATION FEES | 50. | 0. | | 50. |
| OFFICE EXPENSE | 345. | 0. | | 345. |
| OPERATIONS EXPENSE | 3,655. | 0. | | 3,655. |
| OTHER EXPENSE | 2,399. | 0. | | 2,399. |
| FILING FEES | 1,385. | 1,385. | | 0. |
| INSURANCE EXPENSE | 996. | 996. | | 0. |
| OFFICE SUPPLIES | 18. | 18. | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 16,341. | 2,399. | | 13,942. |

FORM 990-PF CORPORATE STOCK STATEMENT 9

| DESCRIPTION | BOOK VALUE | FAIR MARKET VALUE |
|---|------------|----------------------|
| TD AMERITRADE - SECURITIES | 237,778. | 186,787. |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 237,778. | 186,787. |

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT 10

NAME OF CONTRIBUTOR

ADDRESS

BARRY SEGAL

C/O FOCUS AUTISM INC, 776 MOUNTAIN BLVD,
NO 202
WATCHUNG, NJ 07069

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 11

| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
|---|----------------------------|-------------------|------------------------------|--------------------|
| BARRY SEGAL 776 MOUNTAIN BLVD, NO 202 WATCHUNG, NJ 07069 | PRESIDENT 2.00 | 0. | 0. | 0. |
| MARTIN SEGAL 776 MOUNTAIN BLVD, NO 202 WATCHUNG, NJ 07069 | VICE PRESIDENT 2.00 | 0. | 0. | 0. |
| RICHARD SEGAL 776 MOUNTAIN BLVD, NO 202 WATCHUNG, NJ 07069 | SECRETARY 0.50 | 0. | 0. | 0. |
| LOUISE KUO HABAKUS 776 MOUNTAIN BLVD, NO 202 WATCHUNG, NJ 07069 | EXECUTIVE DIRECTOR 0.50 | 0. | 0. | 0. |
| LISA GREEN 776 MOUNTAIN BLVD, NO 202 WATCHUNG, NJ 07069 | BOARD MEMBER 0.50 | 0. | 0. | 0. |
| GARY WEITZEN 776 MOUNTAIN BLVD, NO 202 WATCHUNG, NJ 07069 | BOARD MEMBER 0.50 | 0. | 0. | 0. |
| KATIE WRIGHT 776 MOUNTAIN BLVD, NO 202 WATCHUNG, NJ 07069 | BOARD MEMBER 0.50 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII | | 0. | 0. | 0. |