

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form	9	9	0	-P	F

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

OMB No 1545-0052

De	partme emal R	ent of the T	reasury ruce	Note:	The foundation may	be a	Treat	ed as a l	Priv	ate F	ound	dation to sat	isfy state	e repo	ortii	ng requirem	ents	20	09	
Fo	or ca	lendar			x year beginning								ind end	_					, 20	
G	Che	ck all t	hat apply		Initial return			Initial ret	urn	of a f	orme	er pul	blic cha	rity				Final ret	urn	
		· _	•		Amended return			Ac	idre	ss ch	ange	<u> </u>	[	<u></u>	٧a	me change	•			
		,	Name of fou	ındat	ion										Ā	Employer lo	lentifi	cation numbe	or	
ι	Jse t	he IRS													1					
		oei.	THE DEB	S F	OUNDATION			<del></del>							L		13-	3639449	<del>)</del>	
•		rwise,	Number and	stre	et (or PO box number	if mail	is not o	delivered to	stree	t addre	SS)	1	Room/si	uite	B	Telephone num	ber (see	page 10 of the m	structions)	
	•	int ype.											_		l					
S		pecific	ONE BEE										7A		Ļ		(		- ———-	
li	nstru	ctions.	City or town	, stat	e, and ZIP code										۱c	If exemption pending, che	applica ck here	ation is	▶	_
			NEW YOR	,	NV 10000										╻	1. Foreign or	ganızat	tions, check here	. ▶[	
_				_	NY 10022										ļ			tions meeting the nere and attach	e r	_
H			-		X Section 50	I(c)(3	_								1				▶١	
1					mpt charitable trust			er taxabl							E	If private fou	ndatio	n status was tem	ninated [	$\neg$
1			t value of all				-	ethod	<u>~</u> ] C	asn [		Accru	ıaı		l	under section	n 507(b	)(1)(A), check he	re. ► [	
		ear (#o	m Part II, coi 2 <b>,</b> 4				(spe	d) must b		n cash	has				F			in a 60-month te		$\neg$
•					and Expenses (The			<u> </u>		T		,,,,			_	under section	1307(6	(d) Disbu		
•	art	total of	f amounts in c	olum	ns (b), (c), and (d)	٦		venue and enses per	i	(b)		invest	ment	۱ ۱	(c)	Adjusted ne	et	for ch	arıtable	
		may n	ot necessarily n (a) (see nao	equ	al the amounts in of the instructions))			ooks			ın	come				ıncome			oses asis only)	١
٦	1				eceived (attach schedule)	+-		293,4	59	┼─				_		_ <del></del>		Casirba	asis offig	L
	2	Check	If the t	found	ation is not required to			<del></del>		_				_						-
	3		attach		B		-	1	08	-			108.		-			ATCH	1	
	4				om securities			35,6	46			35	,646.					ATCH		
	5 a																			
												1								
9					of assets not on line 10		R	ECE	<b>V</b> 5.	ţU.										
ne	b		ales price for all		222,256	·L					18									
Revenue	7			me (	from Part IV, line 2) .	유	M/	1Y 2 4	20	110		208	,061.							
~	8	Net sho	ort-term capita	al gai	n	11 000	<u> </u>			<u> </u>	18									
	9			s·		$\perp$	<del></del>				<u></u>	<u> </u>		<u> </u>						
l	1 U a		les less returns wances • • •	$\cdot \cdot \mid$		₩.	Q	GDE	Υ,	<u>UI</u>		<u> </u>	_							
			st of goods sold	-		-														
					ch schedule)			1,7	Ω /	<u> </u>			0.					7.0011		
	11				edule)			333,8		<del> </del> —		2/13	,815.					ATCH	3	
$\dashv$					<u>h 11</u>	$\overline{}$		10,0				243	, 013.						10,0	200
ŀ	13				ectors, trustees, etc			10,0		1			_						10,0	
Sa	14		, ,		and wages					├			_					<u> </u>		
ŠĽ	15				benefits		_			<del> </del>			_				_			_
×	10a	Accoun	ees (allach sc	neau	le) schedule) <sup>ATCH</sup> 4	-	_	15,0	00.			7	,500.				0.		7,	500
اي					attach schedule)					<del> </del>								<del>                                     </del>		
اڇ	17	-								$\vdash$				_						
Str	18				* * * * * * * * * * * * * * * * * * *	*		2,2	94.	-			0.				0.			0
اَقِ	19		· ·		edule) and depletion.			<u> </u>		1							_			
튀	20		-													·		· ·		
틝	21	-	•		meetings					T					_					
	22																			
힏	23				chedule) ATCH 6			4	63.	Ī			0.				0.			278
퍨	24				inistrative expenses	. 🗀														
<u>ē</u>						1		27,7				7	,500.				0.		17,	
이	25		· -		ts paid	1		530,5											530,	_
	26				nts. Add lines 24 and 25	1		558,3	07.			7	,500.				0.		548,3	328
ſ	27	Subtrac	t line 26 fron	n line	12			_	_	]	_									
	а	Excess of	revenue over ex	pense	s and disbursements	<u> </u>		-224,4	95.	<u> </u>										
ı	h	Not Inv	estment inco	ma (	if negative enter -0-)	l				Į		236	,315.	l				l		

c Adjusted net income (if negative, enter -0-). .

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

9E1410 1 0000 513328 M028 5/13/2010 9:53:12 AM V 09-6.1

ATCH 5

Form 990-PF (2009)

CRR#7009 2250 0003 9174 43820

13-3639449

P	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year	
_		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	51,683.	43,181.	43,181.	
	2	Savings and temporary cash investments				
-	3	Accounts receivable				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable			<u></u> -	
		Less allowance for doubtful accounts ▶				
Ì	5	Grants receivable				
١	6	Receivables due from officers, directors, trustees, and other	···			
	٠	disqualified persons (attach schedule) (see page 16 of the instructions)				
ŀ	7	Other notes and loans receivable (attach schedule)		-		
	′					
	_	Less: allowance for doubtful accounts ▶				
ş	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges			<del></del>	
لخ		Investments - U S and state government obligations (attach schedule)	131 140			
ı		Investments - corporate stock (attach schedule) ATCH .7.	131,142.	205,149.	1,129,828.	
	11 C	Investments - corporate bonds (attach schedule)				
		Less accumulated depreciation (attach schedule)				
- 1	12	Investments - mortgage loans Investments - other (attach schedule) ATCH 8			<del> </del>	
	13		1,386,400.	1,386,400.	1,240,463.	
	14	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)				
	15	Other assets (describe				
ļ	16	Total assets (to be completed by all filers - see the				
	. •	instructions Also, see page 1, item l)	1,569,225.	1,634,730.	2,413,472.	
┪	17	Accounts payable and accrued expenses				
	18	Grants payable				
ies	19	Deferred revenue				
Ę۱	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)	0.			
-	22	Other liabilities (describe ► ATCH_9)	0.	290,000.		
4	23	Total liabilities (add lines 17 through 22)	0.	290,000.		
		Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31.				
ces	24	Unrestricted				
ă	25	Temporarily restricted				
32	26	Permanently restricted				
힏		Foundations that do not follow SFAS 117,				
틧		check here and complete lines 27 through 31.				
닐	27	Capital stock, trust principal, or current funds	1,569,225.	1,344,730.		
9	25 26 27 28 29 30	Paid-in or capital surplus, or land, bldg, and equipment fund				
se	20		0.	0.		
¥,	20	Retained earnings, accumulated income, endowment, or other funds	<del></del>	<del></del>		
5	30	Total net assets or fund balances (see page 17 of the	1,569,225.	1,344,730.		
z		instructions)	1,309,223.	1,344,730.		
	31	Total liabilities and net assets/fund balances (see page 17	1 560 335	1 624 720		
		of the instructions)	1,569,225.	1,634,730.		
		Analysis of Changes in Net Assets or Fund E		<del></del>		
1		I net assets or fund balances at beginning of year - Part II,				
	end-	of-year figure reported on prior year's return)			1,569,225.	
2	Ente	r amount from Part I, line 27a		2	-224,495.	
3	Othe	er increases not included in line 2 (itemize)		3		
		lines 1, 2, and 3			1,344,730.	
				5		
		I net assets or fund balances at end of year (line 4 minus li	ine 5) - Part II. column (b)		1,344,730.	
<u>-</u>		stoots of tona salanoos at one of year (mic + minus)	o), oolullii (b),		- 000 BE	

(a) List and	and Losses for Tax on describe the kind(s) of property strick warehouse, or common stock,	sold (e g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a SEE PART IV SCHE	DULE				
<u>b</u>					
<u>c</u>			ļ <u>.</u>		
<u>d</u>	<del></del>				<del></del>
<u>e</u>		(x) Cost or other book	<del>                                      </del>	1	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_a	<del> </del>		<del> </del> -		
<u>b</u>					
C d			<del> </del> -		<del></del>
d e		<del></del>	<del></del>	·	
	howing gain in column (h) and	owned by the foundation on 12/31/69	(1)	Cours (Col. (b) o	
(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	٠٠/	Gains (Col. (h) g (k), but not less t Losses (from co	than -0-) <b>or</b>
a					
b					
С			ļ		
d			<del> </del> _		
_e			<del></del>		
2 Capital gain net income or	(net capital loss)	If gain, also enter in Part I, line 7			200 061
	· · · · · · · · · · · · · · · · · · ·	If (loss), enter -0- in Part I, line 7	2	<del></del>	208,061.
• •	or (loss) as defined in section				
•	line 8, column (c) (see pages				
Part V Qualification Ur	oder Section 4940(e) for E		3_  come		
		stributable amount of any year in the b	ease period	d? [	Yes X No
		year, see page 18 of the instructions b	efore mak	ing any entries	
(a)	(b)	(c)	1	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2008	585,358	2,912,812.			0.200960
2007	771,768	4,717,181.			0.163608
2006	548,666				0.113558
2005	912,737				0.191481
2004	792,613	5,419,633.	ļ		0.146248
2 Total of line 1, column (d)			2		0.815855
<del>-</del>	The state of the s	ivide the total on line 2 by 5, or by the less than 5 years	3		0.163171
4 Enter the net value of non	charitable-use assets for 2009	9 from Part X, line 5	4	2,	062,754.
5 Multiply line 4 by line 3	5		336,582.		
6 Enter 1% of net investmen	nt income (1% of Part I, line 27	b)	6		2,363.
7 Add lines 5 and 6			7		338,945.
8 Enter qualifying distribution if line 8 is equal to or great VI instructions on page	eater than line 7, check the b	ox in Part VI, line 1b, and complete	8 that part		548,328. x rate See the

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	structi	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)			
b	Domestic_foundations that meet the section 4940(e) requirements in Part V, check		2,3	363.
	here $\blacktriangleright X$ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		2,3	363.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on Investment income. Subtract line 4 from line 3 if zero or less, enter -0-		2,3	363.
6	Credits/Payments:			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 2,294.			
b	Exempt foreign organizations-tax withheld at source 6b 0.			
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
d				
7	Total credits and payments Add lines 6a through 6d		2,2	294.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			69.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 0 · Refunded ▶ 11			
Pai	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1 b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities	Ì		
С	Did the foundation file Form 1120-POL for this year?	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation ►\$ (2) On foundation managers ►\$		ĺ	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			İ
	on foundation managers. ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions)			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			,.
	27)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			,,
	names and addresses	10		X

Form	9 <b>9</b> 0-PF (20	09) 13-3639449			Pogo <b>5</b>
		Statements Regarding Activities (continued)			Page 5
		me during the year, did the foundation, directly or indirectly, own a controlled entity within the			Τ
		of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12		oundation acquire a direct or indirect interest in any applicable insurance contract before			<del>                                     </del>
		7, 2008?	12		Х
13	Did the f	oundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Moherto	address N/A			
14	The boo	ss are in care of RICHARD A. DEBS  at NONE BEEKMAN PLACE, NEW YORK, NY  ZIP + 4 10022  1947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	2-56	07	
	Located	ONE BEEKMAN PLACE, NEW YORK, NY ZIP+4 > 10022		- <b></b> -	
15	Section and ente	1947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here · · · · · · · · · · · · · · · r the amount of tax-exempt interest received or accrued during the year · · · · · · · · · · · · · · · · ► 15	• • •	▶	•
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required			
	File For	m 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During th	e year did the foundation (either directly or indirectly)			İ
	(1) Enga	ge in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
		w money from, lend money to, or otherwise extend credit to (or accept it from) a			
		alified person?			
		sh goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay	compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
		sfer any income or assets to a disqualified person (or make any of either available for			
		criteric of data of a disqualified person/*			
	-	e to pay money or property to a government official? (Exception. Check "No" if			
		oundation agreed to make a grant to or to employ the official for a period after			
		The state of the s			
D		swer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations 3 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1 b		
		tions relying on a current notice regarding disaster assistance check here			
С		bundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
_		corrected before the first day of the tax year beginning in 2009?	1c		Х
2		failure to distribute income (section 4942) (does not apply for years the foundation was a private			
		foundation defined in section 4942(j)(3) or 4942(j)(5))			
а		d of tax year 2009, did the foundation have any undistributed income (lines 6d and		İ	
		(III) for tax year(s) beginning before 2009?		<b>!</b> ,	
	If "Yes," I	st 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	o incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all yea	's listed, answer "No" and attach statement - see page 20 of the instructions )	2 b		
C		visions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
		rundation hold more than a 2% direct or indirect interest in any business			
		e at any time during the year?			
		did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			
		ed persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
		oner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse			
		l-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	3 b		
		had excess business holdings in 2009)	4a		X
		undation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	7.0		
	charitable	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4 b		Х

					-
Form 990-PF (2009)		13-363	39449		Page 6
Part VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
Part VII-B Statements Regarding Activities for 5a During the year did the foundation pay or incur any amout (1) Carry on propaganda, or otherwise attempt to influer (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or oth (4) Provide a grant to an organization other than a charm section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charital purposes, or for the prevention of cruelty to children of bill fany answer is "Yes" to 5a(1)-(5), did any of the trans Regulations section 53 4945 or in a current notice regard	int to nce legislation (section n (see section 4955), her similar purposes? Itable, etc., organization (see page 22 of the in ble, scientific, literary, or animals? actions fail to qualif	or to carry on, on described in structions) or educational	Yes X Yes X Yes X Yes X Yes X Yes X Yes X Gescribed in	No No No No	
Organizations relying on a current notice regarding disast	ter assistance check t	nere	▶ X		
c If the answer is "Yes" to question 5a(4), does the foundation because it maintained expenditure responsibility for the giff "Yes," attach the statement required by Regulations section.	rant?		. Yes	No	
6a Did the foundation, during the year, receive any funds, do on a personal benefit contract?			Yes X	No	
b Did the foundation, during the year, pay premiums, direct				6Ь	Х
If "Yes" to 6b, file Form 8870		•			
7a At any time during the tax year, was the foundation a pa					
b If yes, did the foundation receive any proceeds or have a					X
Part VIII Information About Officers, Directors and Contractors		•	_ ,	•	
1 List all officers, directors, trustees, foundation m	anagers and their (b) Title, and average		e page 22 of the ins		
(a) Name and address	hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense other allo	
ATTACHMENT 10		10,000.	С	).	
2 Compensation of five highest-paid employees (ot if none, enter "NONE."	her than those inc	luded on line 1 - se		nstructions).	
(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 other allo	account, wances
NONE					
Total number of other employees paid over \$50,000 .				<u> </u>	

3 Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If no	ne. enter "No	ONE "
, two mgn	(a) Name and address of each person paid more than \$50,000 (b) Type of service		pensation
NONE			
		1	
_			
		ì	
otal numb	er of others receiving over \$50,000 for professional services	▶	NON
Dart IV.A	Summary of Direct Charitable Activities		
rait in-A	Summary of Direct Chartable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number and other beneficianes served, conferences convened, research papers produced, etc.	Еф	enses
1 NOT A	PPLICABLE	<del></del>	-
'			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)		
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Am	ount
1 NONE			
2			
All other prog	ram-related investments. See page 24 of the instructions		
3 NONE			
		1	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the instructions.)	gn foundation	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	purposes		
а	Average monthly fair market value of securities	1a	2,000,101.
b	Average of monthly cash balances	1b	94,066.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d		1d	2,094,167.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,094,167.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	31,413.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,062,754.
6	Minimum investment return. Enter 5% of line 5	6	103,138.
Pa	Tart XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ and do not complete this privation.	ate operating part )	
1	Minimum investment return from Part X, line 6	1	103,138.
2 a			,,,,,,
b	Income tax for 2009 (This does not include the tax from Part VI)	1	
С		2c	2,363.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	100,775.
4	Recoveries of amounts treated as qualifying distributions	4	7.00
5	Add lines 3 and 4	5	100,775.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	100,775.
Pa	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	548,328.
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	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
þ	Cash distribution test (attach the required scriedule)	3 b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	548,328.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	2,363.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	545,965.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w qualifies for the section 4940(e) reduction of tax in those years	hether the fo	undation

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		<del></del>
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	line 7				100,775.
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only				
- h	Total for pnor years 20 07 ,20 06 ,20 05				
3		· · · · · · · · · · · · · · · · · · ·			
	From 2004				
	From 2005 703, 313.				
	From 2006				
ن					
	110111 2000	2,581,990.			
	Total of lines 3a through e	2/301/330.			
4	Qualifying distributions for 2009 from Part XII, line 4 > \$ 548,328.				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				100,775.
	Remaining amount distributed out of corpus	447,553.			
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a) )				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,029,543.			
þ	Prior years' undistributed income Subtract	ļ			
	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions				
e	Undistributed income for 2008. Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				<u> </u>
	Undistributed income for 2009 Subtract lines				İ
•	4d and 5 from line 1. This amount must be				
	distributed in 2010				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8	Excess distributions carryover from 2004 not				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	applied on line 5 or line 7 (see page 27 of the instructions)	560,153.			
9	Excess distributions carryover to 2010.				
•	Subtract lines 7 and 8 from line 6a	2,469,390.			
10	Analysis of line 9				
	Excess from 2005				
	Excess from 2006		ļ		
	Excess from 2007				
	Excess from 2008				
	Excess from 2009 447,553.				
					1

	m 990-PF (2009)				639449	Page <b>10</b>
Pa	art XIV Private Op	perating Foundations	(see page 27 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABL
1 a		s received a ruling or o				
	foundation, and the ru	ling is effective for 2009, e	enter the date of the ruling	)	. <b>&gt;</b>	
b	Check box to indicate	whether the foundation is	a private operating found	dation described in section	4942(յ	)(3) or 4942(j)(5)
2 a	Enter the lesser of the a	Tax year		Prior 3 years		
2 a	justed net income from Pa		(b) 2008	(c) 2007	(d) 2006	(e) Total
	I or the minimum investmentum from Part X for ea					
	year listed					
h	85% of line 2a	-				
_						
С	Qualifying distributions from F XII, line 4 for each year listed					
d	Amounts included in line 2c i					
	used directly for active cond					
	of exempt activities			<del> </del>		
•	directly for active conduct	•				
	exempt activities Subtract I	l l				
3	2d from line 2c Complete 3a, b, or c for t					
-	alternative test relied upon					
а	"Assets" alternative test - enter	-				
	(1) Value of all assets					
	(2) Value of assets qualifying under section	119				
L	4942(j)(3)(B)(i)					
Ь	"Endowment" alternative to enter 2/3 of minimum inve					
	ment return shown in Part					
	line 6 for each year listed	•				
С	"Support" alternative test - ent	ег				
	(1) Total support other th					
	gross investment incoi (interest, dividends, ren					
	payments on securit	1				
	foans (section 512(a)(5 or royalties)				•	
	(2) Support from gene	ral				
	public and 5 or mo exempt organizations					
	provided in section 49 (j)(3)(B)(iii)					
	(3) Largest amount of su					
	port from an exemorganization					
	(4) Gross investment income					
Pa	rt XV Suppleme	ntary Information (C	omplete this part	only if the founda	ation had \$5.000	or more in assets
	at any time	e during the year - se	e page 28 of the in	structions.)	· · · · · · · · · · · · · · · · · · ·	
1	Information Regard	ing Foundation Manage	rs:		<del></del>	<del></del>
а	List any managers of	of the foundation who h	nave contributed mor	e than 2% of the total	contributions receive	ed by the foundation
	before the close of a	ny tax year (but only if th	hey have contributed i	more than \$5,000). (Se	ee section 507(d)(2))	•
	MR. RICHA	RD A. DEBS				
b	List any managers of	of the foundation who	own 10% or more o	f the stock of a corno	ration (or an equally	large portion of the
		ership or other entity) o				go portion or tile
	•	• • • • • • • • • • • • • • • • • • • •		<b>5</b>		
	N/A					
2	Information Regard	ing Contribution, Grant	, Gift, Loan, Scholarsi	nip, etc., Programs:		
	Check here ► X if	the foundation only i	makes contributions	to preselected charit	able organizations ai	nd does not accept
	unsolicited requests	for funds If the foun	dation makes gifts, o	rants, etc (see page	28 of the instruction	ns) to individuals or
		other conditions, comple				,
а	The name, address	and telephone number	of the person to whor	n applications should be	addressed	
_		and tereprising manifest	2. 3.0 pc.3011 to 11101	applications of loads be	,	
	The form in which ar	pplications should be su	bmitted and information	on and materials they	should include	
	o ioiiii iii wiiioii ap	phoduono onodia pe su	omitted and information	on and materials tiley :	anodia malade	
-	Any submission dea	dlines				
•	, casimosion doa					
Ч	Any restrictions or	limitations on awards,	such as by geogra	anhical areas charitat	ale fields kinds of i	netitutions or other
-	factors		, Justi as by geogra	apriloui alcas, Cliaillat	ZIO NONOS NINOS UL II	isatutions, or other

3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient  Recipient  Name and address (home or business)  Recipient  If recipient is an individual, show any relationship to any foundation manager or substantial contribution  Purpose of grant or contribution  Amount  Amount									
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A					
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount					
a Paid during the year									
ATTACHMENT 11									
i									
Total			▶ 3a	530,550.					
b Approved for future payment									
, ,									
		i							
	İ								
Total			▶ 3b	· · · · · ·					

Part XVI-A Analysis of Income-Produ	cing Activ	vities			
oter gross amounts unless otherwise indicated   Unrelated business income   Evoluded by section 512, 513, or 514   (e)					
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income (See page 28 of the instructions)
a			<del> </del>		
b					<del></del>
c					
d					
е					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	108.	
4 Dividends and interest from securities			14	35,646.	
5 Net rental income or (loss) from real estate					
a Debt-financed property			ļ <u>.</u>		
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income	<u> </u>		1	0.005	
8 Gain or (loss) from sales of assets other than inventory			18	2,805.	<del></del>
9 Net income or (loss) from special events	<u> </u>				<del></del>
10 Gross profit or (loss) from sales of inventory	<u> </u>	<u> </u>			
11 Other revenue a				1 704	
b 2008 TAX OVERPAYMENT				1,794.	
с					
d	<u> </u>		<del>                                      </del>		<del></del>
e	<u> </u>		<del>                                     </del>	40,353.	
12 Subtotal Add columns (b), (d), and (e)				·	40,353.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions on page 28					40,333.
Part XVI-B Relationship of Activities			rempt Purn	0000	
Explain below how each active the accomplishment of the formage 29 of the instructions.)					
			····		
				<del></del>	<del></del>
					<del>-</del>
	<del></del>				
		NOT APPLICABI			
		NOT APPLICABL	<u> </u>		
				<del></del>	
			<del></del> -		
				<del></del>	
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			· · · · · · · · · · · · · · · · · · ·	<del></del>	
				<del></del>	
					<del></del>
	<del></del>				

Form	990-PF						3-3639449				age 13
Par	t XVII	Information Exempt Orga	Regarding anizations	Transfers To and	Transac	tions a	and Relation	ships With	Nonc	harit	able
1	in se	ne organization directle	ode (other than	n section 501(c)(3) o	rganizations)	with ar	ny other organi ection 527, rela	zation described	-	Yes	No
а	organı Transi	zations? fers from the reporting f	foundation to a n	oncharitable exempt org	anization of						
	(1) Ca	ash							<u>1a(1)</u>		Х
	(2) 01	ther assets							. <u>1a(2)</u>		X
b		transactions	h t - h t t								l ,
		ales of assets to a nonc								_	X
		irchases of assets from ental of facilities, equipm									X
		eimbursement arrangem									X
		ans or loan guarantees									Х
		erformance of services									Х
¢	Sharin	ig of facilities, equipme	nt, mailing lists, c	ther assets, or paid empl	oyees				1c		Х
d	If the	answer to any of	the above is	Yes," complete the	following so	hedule C	Column ( <b>b)</b> sho	ould always sho	w the	fair r	narket
		of the goods, other									
	value	in any transaction o	r sharing arran	gement, show in col	umn (d) th	e value o	of the goods,	other assets, or	service	es rec	ceived
(a) L	ine no	(b) Amount involved	(c) Name of	noncharitable exempt orga	nization	(d) Desci	ription of transfers	transactions, and sh	anna arra	naeme	nte
(-, -		N/A	(5)			N/A	inputor or adminiore,	transactions, and on	anny ana	ingenie	
				· · · · · · · · · · · · · · · · · · ·							
											· ·
								<del></del>			
							<del></del>		-		
-					-						
							<del>-</del> -				
2 a	is the	foundation directly or	indirectly affilia	ited with, or related to	o, one or m	ore tax-ex	empt organizati	ons described in		_	_
		n 501(c) of the Code (otl		501(c)(3)) or in section (	527?				Ye	s <u>□</u>	∐ No
b	If "Yes	," complete the following		41-							
		(a) Name of organizatio	<u>n</u>	(b) Type of on	ganization		(c) L	escription of relation	nship		
		· · -									
		<del></del>									-
						<del></del>			••		
	Under	penaltise of perjury, I decl	are that I have ex	amined this return, includ	ng accompan	ying schedu	ules and statement	s, and to the best	of my kr	nowled	ge and
	belief, i	t is true, correct, and com	plete Declaration	of preparer (other than tax	payer or fiduo	iary) is bas: سب	ed on all informati	on of which prepar	er has ar	ny knov	wledge
	_	I would				7 / 14	(10 M	want /Tren	-Aca		
a L	Sig	nature of officer or trustee	<b></b>			Date	Tit	le /			
Sign Here	nid arer's Only	Preparer's signature	L A	-/h	Date /	3/10	Check if self-employed	Preparer' number (\$ page 30 of	ee Signa	ture or	

DORIAN A VERGOS & COMPANY, LLC

352 7TH AVE - SUITE 1501

Form 990-PF (2009)

13-3965068

Phone no 212-307-4800

EIN ▶

10001

Paid Preparer's Use Only

and ZIP code

Firm's name (or yours if

self-employed), address,

NEW YORK,

## Schedule B

(Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

Name of the organization		Employer identification number
THE DEBS FOUNDATION		13-3639449
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 f	oundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	dation
	501(c)(3) taxable private foundation	
Note. Only a section 501(c)(7) instructions	overed by the <b>General Rule</b> or a <b>Special Rule.</b> , (8), or (10) organization can check boxes for both the General Rule and a	a Special Rule See
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II	) or more (in money or
Special Rules		
sections 509(a)(1) a	(3) organization filing Form 990 or 990-EZ that met the 331/3% support t nd 170(b)(1)(A)(vi), and received from any one contributor, during the ye 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, li	ar, a contribution of the greater
the year, aggregate	(7), (8), or (10) organization filing Form 990 or 990-EZ that received fror contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitas, or the prevention of cruelty to children or animals. Complete Parts I, II,	ible, scientific, literary, or
the year, contributior aggregate to more the year for an exclusively applies to this organi	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from some for use exclusively for religious, charitable, etc., purposes, but these contains \$1,000. If this box is checked, enter here the total contributions that by religious, charitable, etc., purpose. Do not complete any of the parts unization because it received nonexclusively religious, charitable, etc., contains the contains and the contains	ontributions did not were received during the less the General Rule
990-EZ, or 990-PF), but it <b>mus</b> or on line 2 of its Form 990-PF 990-PF)	s not covered by the General Rule and/or the Special Rules does not file t answer "No" on Part IV, line 2 of its Form 990, or check the box on line , to certify that it does not meet the filing requirements of Schedule B (Fo	H of its Form 990-EZ,
For Privacy Act and Paperwork Reduction Form 990, 990-EZ, or 990-PF.	ction Act Notice, see the Instructions Schedul	e B (Form 990, 990-EZ, or 990-PF) (2009)

JSA

Name of organization

THE DEBS FOUNDATION

Employer identification number 13-3639449

Part I Contributors (see instructions
---------------------------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	RICHARD A. DEBS REVOCABLE TRUST 6/28/95  ONE BEEKMAN PLACE  NEW YORK, NY 10022	\$ 67,351.	Person X Payroll X  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	RICHARD A. DEBS REVOCABLE TRUST 6/28/95  ONE BEEKMAN PLACE  NEW YORK, NY 10022	\$19,568.	Person   X   X   X   X   X   X   X   X   X   X
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	BARBARA K. DEBS REVOCABLE TRUST 6/28/95  ONE BEEKMAN PLACE  NEW YORK, NY 10022	\$118,475.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			(d) Type of contribution  Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
No.	Name, address, and ZIP + 4  BARBARA K. DEBS REVOCABLE TRUST 6/28/95  ONE BEEKMAN PLACE	Aggregate contributions	Person X Payroll X Noncash (Complete Part II if there is
No. 4	Name, address, and ZIP + 4  BARBARA K. DEBS REVOCABLE TRUST 6/28/95  ONE BEEKMAN PLACE  NEW YORK, NY 10022  (b)	\$ 88,065.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
No. 4	Name, address, and ZIP + 4  BARBARA K. DEBS REVOCABLE TRUST 6/28/95  ONE BEEKMAN PLACE  NEW YORK, NY 10022  (b)	\$ 88,065.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)  (d) Type of contribution  Person Payroll Noncash  (Complete Part II if there is

ge of ofPartI

Name of organization

THE DEBS FOUNDATION

Employer identification number 13-3639449

Part II Noncash Property (see instructions)

		<del></del>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1,520 SHARES ROSS STORES INC.	\$\$.	12/01/2009
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	840 SHARES XILINX INC.		12/01/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	5,000 SHARES CISCO SYSTEMS INC.	\$\$118,475.	12/01/2009
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	4,500 SHARES INTEL CORP.		12/01/2009
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	

JSA 9E1254 1 000

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

# ATTACHMENT 1

# PART I - INTEREST ON TEMPORARY CASH INVESTMENTS FORM 990PF,

THE DEBS FOUNDATION

NET INVESTMENT INCOME	88.	108.
REVENUE AND EXPENSES PER BOOKS	88.	108.
		TOTAL
DESCRIPTION	MORGAN STANLEY & CO J.P. MORGAN	

DIVIDENDS AND INTEREST FROM SECURITIES ı PART I FORM 990PF,

NET INVESTMENT INCOME	12,380. 5,347. 4,251. 4,583. 1,761. 1,993. 1,385. 1,368.	35,646.
REVENUE AND EXPENSES PER BOOKS	12,380. 5,347. 4,251. 4,583. 1,761. 1,993. 1,385. 1,598.	35,646.
DESCRIPTION	MORGAN STANLEY & CO DIAMONDS TST SERI US ETFS COMSTK HEALTHCARE SELECT SECTOR SPDR TR INDUSTRIAL SELECT SECTOR SPDR US ETFS POWERSHARES QQQ DISCOVER FINANCIAL SERVICES ROSS STORES INC. ISHARES DJ US TECHNOLOGY ISHARES MSCI GR ISHARES MSCI EMERGING MARKETS ISHARES TR S&P /TOPIX 150 IDX FD	TOTAL

- OTHER INCOME PART I FORM 990PF,

DESCRIPTION 2008 TAX OVERPAYMENT

1,794. PER BOOKS AND EXPENSES REVENUE

NET INVESTMENT INCOME

.

6

1,794.

TOTALS

FEES
ACCOUNTING
- I I
, PART
1 990PF
FORM

CHARITABLE	7,500.	7,500.
ADJUSTED NET INCOME	.0	0.
NET INVESTMENT INCOME	7,500.	7,500.
REVENUE AND EXPENSES PER BOOKS	15,000.	15,000.
		TOTALS
DESCRIPTION	ACCOUNTING FEE	

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TAXES
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Н
PART
990PF,
FORM

THE DEBS FOUNDATION

CHARITABLE PURPOSES		0
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME		0
REVENUE AND EXPENSES PER BOOKS	500.	2,294.
DESCRIPTION	2009 ESTIMATED TAX PAYMENTS 2008 TAX OVERPAYMENT	TOTALS

OTHER EXPENSES ı PART I FORM 990PF,

ΠЦ	1 }
	(-1 ()
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PT	E X
7. 7.R.J	ING
ESCRIPTION	FILINOTHER
Q	[Fr O

TOTALS

		Н				
REVENUE	AND	EXPENSES	PER BOOKS	278.	185.	

ADJUSTED	NET	INCOME			
NET	INVESTMENT	INCOME	0.	.0	•

. .

CORPORATE STOCK

1

PART II

FORM 990PF,

7
ENT
TACHM
AT

	ENDING
DESCRIPTION	BOOK VAI
2,000 SHS FEDERAL HOME LOAN MT	130
28,350 SHS MORGAN STANLEY	
14,675 SHS DISCOVER FIN SVCS	
1,520 SHS ROSS STORES INC.	19
100 SHS CISCO SYSTEMS INC.	2
100 SHS INTEL CORP.	
100 SHS XILINX INC.	2

ENDING FMV	839, 215, 64, 2,	7 7
ENDING BOOK VALUE	130,829. 260. 53. 67,351. 2,370.	.67612

940. 160. 919. 394. 506.

1,129,828.

205,149.

TOTALS

THE DEBS FOUNDATION

1,240,463.

1,386,400.

TOTALS

ω

FORM 990PF, PART II - OTHER LIABILITIES

ATTACHMENT 9

DESCRIPTION

ENDING BOOK VALUE

LOAN FROM DEBS INVESTMENT REVOCABLE TRUST

290,000.

TOTALS

290,000.

FORM 990PF,

PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

<u></u>	>	
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		0
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NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
RICHARD A. DEBS ONE BEEKMEN PLACE NEW YORK, NY 10022	PRESIDENT 1.00	0.	0.	<b>.</b>
BARBARA K. DEBS ONE BEEKMEN PLACE NEW YORK, NY 10022	VICE PRESIDENT 1.00	.0		°O
ELIZABETH A. DEBS 140 BROWN STREET PROVIDENCE, RI 02906	DIRECTOR 1.00	.0	.0	· o
NICHOLAS A. DEBS 140 PERRY STREET NEW YORK, NY 10014	DIRECTOR 11.00	10,000.	.0	.0
	GRAND TOTALS =	10,000.	0	.00

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CA	PITAL GA	INS AND LC	<u>ISSES FOI</u>	R TAX ON	<u>INVEST</u>	M	ENT INCOM	IE
Kind of P		· ·			OL D	Date acquired	Date sold	
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
115,576.		4,900 SHS C PROPERTY TY 7,639.				D	VARIOUS	12/22/2009
88,293.		4,400 SHS I PROPERTY TY 6,445.		CIES		D	VARIOUS 81,848.	12/22/2009
18,387.		740 SHS XIL PROPERTY TY 111.		CIES		D	VARIOUS	12/22/2009
TOTAL GAIN(LO	oss)		• • • • • • • • • • • • • • • • • • • •				208,061.	
JSA		L			<del></del>	Ш		

THE DEBS FOUNDATION
FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Recipient Name	Recipient Address	Relationship to Substantial Contributor And Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Ackerman Institute for the Family	New York, NY	None Tax Exempt	For the Organization's Chantable Use	1,000 00
Amenca-Mid East Educational & Training Services	Washington, DC	None Tax Exempt	For the Organization's Charitable Use	250 00
American Frends of Luceme Festival	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
American Task Force for Lebanon	Washington, DC	None Tax Exempt	For the Organization's Charitable Use	3,000 00
American University of Beirut	New York, NY	None Tax Exempt	For the Organization's Charitable Use	50,000 00
Appleseed Foundation	Washington, DC	None Tax Exempt	For the Organization's Chantable Use	1,000 00
Artist's Blacksmith Assoc. of North America	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Association to Preserve Cape Cod	Bamstable, MA	None Tax Exempt	For the Organization's Charitable Use	200 00
Bard College	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Bard Graduate Center	New York, NY	None Tax Exempt	For the Organization's Charitable Use	2,000 00

FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR THE DEBS FOUNDATION

		Relationship to Substantial Contributor		
Recipient Name	Recipient Address	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Barenboim Said Foundation	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Bretton Woods Commitee	Washington, DC	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Brooklyn Histoncal Society	Brooklyn, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Brooklyn Museum of Art	Brooklyn, NY	None Tax Exempt	For the Organization's Charitable Use	125,000 00
Butter Hospital	Providence, RI	None Tax Éxempt	For the Organization's Charitable Use	3,000 00
Cape Cod Hospital	Hyannıs, MA	None Tax Exempt	For the Organization's Chantable Use	5,000 00
Cape & Islands Chamber Music Festival	Chatam, MA	None Tax Exempt	For the Organization's Chantable Use	100.00
Camegie Hall	New York, NY	None Tax Exempt	For the Organization's Chantable Use	25,000 00
Center for Creative Resources	New York, NY	None Tax Exempt	For the Organization's Charitable Use	300 00
Center for Study of Responsive Law	Washington, DC	None Tax Exempt	For the Organization's Charitable Use	1,000 00

FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR THE DEBS FOUNDATION

Contributor	
Substantial	
Relationship to	

		Relationship to Substantial Contributor		
Recipient Name	Recipient Address	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Cerebral Palsy International Research FDN	Washington, DC	None Tax Exempt	For the Organization's Charitable Use	15,000 00
Chamber Music Society Lincoln Center	New York, NY	None Tax Exempt	For the Organization's Chantable Use	2,500 00
Children's Storefront	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
City Futures, Inc.	New York, NY	None Tax Exempt	For the Organization's Charitable Use	800 00
Colgate University	Hamilton, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Columbia University	New York, NY	None Tax Exempt	For the Organization's Charitable Use	25,000.00
Danspace Project	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Democracy Now	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Doe Fund, The	New York, NY	None Tax Exempt	For the Organization's Charitable Use	200 00
Economic Club of New York	New York, NY	None Tax Exempt	For the Organization's Chantable Use	10,000 00

THE DEBS FOUNDATION FORM SOUTRIBUTIONS PAID DURING THE YEAR

Recipient Name	Recipient Address	Relationship to Substantlal Contributor And Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Evan B. Donaldson Adoption Institute	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Federation of Protestant Welfare Agencies	New York, NY	None Tax Exempt	For the Organization's Charitable Use	10,000 00
Financial Services Volunteer Corps	New York, NY	None Tax Exempt	For the Organization's Charitable Use	200 00
Giddy Hall School	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Gilder Lehrman Institute of Amencan Hist	New York, NY	None Tax Exempt	For the Organization's Charitable Use	5,000 00
Group Of Thurty	Washington, DC	None Tax Exempt	For the Organization's Charitable Use	5,000 00
Grow Smart Rhode Island	Providence, RI	None Tax Exempt	For the Organization's Charitable Use	200 00
Harlem School of the Arts	New York, NY	None Tax Exempt	For the Organization's Charitable Use	200 00
Harvard Law School	Boston, MA	None Tax Exempt	For the Organization's Charitable Use	15,000 00
Hospital for Special Surgery	New York, NY	None Tax Exempt	For the Organization's Chantable Use	5,000 00

FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR THE DEBS FOUNDATION

	<b>L</b>	Relationship to Substantial Contributor		
Recipient Name	Recipient Address	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Institute of International Education	New York, NY	None Tax Exempt	For the Organization's Charitable Use	10,000 00
International House	New York, NY	None Tax Exempt	For the Organization's Charitable Use	2,500 00
Isabel Gotzkowsky and Fnends	New York, NY	None Tax Exempt	For the Organization's Charitable Use	100.00
Kaufman Center	New York, NY	None Tax Exempt	For the Organization's Chantable Use	1,000 00
Manhattanville College	Purchase, NY	None Tax Exempt	For the Organization's Charitable Use	10,000 00
Martina Arroyo Foundation, Inc.	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Memorial Sloan Kettering Cancer Center	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Metropolitan Museum of Art	New York, NY	None Tax Exempt	For the Organization's Charitable Use	4,000 00
Middle East Institute	Washington, DC	None Tax Exempt	For the Organization's Charitable Use	100 00
Morgan Library	New York, NY	None Tax Exempt	For the Organization's Charitable Use	5,000 00

THE DEBS FOUNDATION
FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Recipient Name	Reciplent Address	Relationship to Substantial Contributor And Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Morgan Stanley Annual Appeal	New York, NY	None Tax Exempt	For the Organization's Charitable Use	4,000 00
Moses Brown School	Providence, RI	None Tax Exempt	For the Organization's Chantable Use	2,500 00
Museum of the City of New York	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
National Association for the Advancement of Colored People	Baltmore, MD	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Neighborhood Housing Services	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
New York Landmarks Conservancy	New York, NY	None Tax Exempt	For the Organization's Charitable Use	2,000 00
New York Historical Society	New York, NY	None Tax Exempt	For the Organization's Charitable Use	00 000'06
New York Presbyterian Hospital	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Open Space Institute	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Orleans Conservation Trust	Orleans, MA	None Tax Exempt	For the Organization's Chantable Use	1,000 00

FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR THE DEBS FOUNDATION

	-	Relationship to Substantial Contributor		
Recipient Name	Recipient Address	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Orpheus Chambers Orchestra	New York, NY	None Tax Exempt	For the Organization's Chantable Use	1,000 00
Outer Cape Health Services, Inc.	Eastham, MA	None Tax Exempt	For the Organization's Charitable Use	200 00
Palestine Children's Relief Fund	Kent, OH	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Park Avenue Armory	New York, NY	None Tax Exempt	For the Organization's Charitable Use	3,000 00
Planned Parenthood Federation of America	New York, NY	None Tax Exempt	For the Organization's Charitable Use	200 00
Poly Prep Country Day School	Brookiyn, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Prep for Prep	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Princeton University	Princeton, NJ	None Tax Exempt	For the Organization's Chantable Use	1,000.00
Providence Public Library	Providence, RI	None Tax Exempt	For the Organization's Charitable Use	4,000 00
Rehabilitation Hospital of Cape & Islands	East Sandwich, MA	None Tax Exempt	For the Organization's Charitable Use	3,000 00

FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR THE DEBS FOUNDATION

		Relationship to Substantial Contributor		
Recipient Name	Recipient Address	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Rockefeller University	New York, NY	None Tax Exempt	For the Organization's Charitable Use	200 00
Rogosın İnstitute	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Sılk Road Project, Inc.	New York, NY	None Tax Exempt	For the Organization's Chantable Use	10,000 00
St. Anthony's Orthodox Church	Tenafly, NJ	None Tax Exempt	For the Organization's Charitable Use	1,200 00
St. George Orthodox Cathedral	Worcester, MA	None Tax Exempt	For the Organization's Charitable Use	1,000 00
Synergos Institute	New York, NY	None Tax Exempt	For the Organization's Charitable Use	2,000 00
Third Street Music School Settlement	New York, NY	None Tax Exempt	For the Organization's Charitable Use	2,000 00
Treatment Action Group (TAG)	New York, NY	None Tax Exempt	For the Organization's Charitable Use	2,000 00
Twilight Theatre Company	New York, NY	None Tax Exempt	For the Organization's Charitable Use	500.00
United Negro College Fund	New York, NY	None Tax Exempt	For the Organization's Charitable Use	1,000 00

THE DEBS FOUNDATION

# FORM 990 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Recipient Name	Recipient Address	Relationship to Substantial Contributor And Foundation Status of Recipient	etionship to Substantial Contributor And Foundation Status of Recipient  Purpose of Grant or Contribution	Amount
U.S. / Middle East Project, Inc.	New York, NY	None Tax Exempt	For the Organization's Charitable Use	25,000 00
Vassar College	Poughkeepsie, NY	None Tax Exempt	For the Organization's Chantable Use	5,000.00

530,550.00

### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

Employer identification number

	THE DEBS FOUNDATION				13-363944	9	
	e: Form 5227 filers need to complete only Pa				<u> </u>		
Pa	rt I Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other ba (see page 4 of the instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1 a							
		<del> </del>	_			$\rightarrow$	
				-	-		
						_	
b	Enter the short-term gain or (loss), if any, fi	rom Schedule D	-1, line 1b			1b	
_	Object to any country and a second country of the second	. 1001 0050	0704   000				
2	Short-term capital gain or (loss) from Form	is 4684, 6252,	6781, and 882	4	• • • • • • • • • •	2	<del> </del>
3	Net short-term gain or (loss) from partners	hips, S corporat	tions, and other	estates or trusts		3	
4	Short-term capital loss carryover Enter the						
	Carryover Worksheet					4 (	()
5	Net short-term gain or (loss). Combine line	-			•	_	
Pa	column (3) on the back	s - Assets Held	More Than On			5	
	(a) Description of property	(b) Date acquired	(c) Date sold	(d) Sales price	(e) Cost or other ba		(f) Gain or (loss) for the entire year
	(Example 100 shares 7% preferred of "Z" Co )	(mo , day, yr )	(mo , day, yr )	(u) Sales price	instructions)	_	Subtract (e) from (d)
6a							
					<u>                                     </u>		
					<u> </u>		
						+	
							000 001
b	Enter the long-term gain or (loss), if any, from	om Schedule D-	1, line 6b		• • • • • • • • • • • • • • • • • • • •	6b	208,061.
7	Long-term capital gain or (loss) from Form	s 2439, 4684, 6	3252, 6781, an	nd 8824		7	
8	Net long-term gain or (loss) from partnersh	ips, S corporati	ons, and other	estates or trusts		8	
9	Capital gain distributions					9	
10	Gain from Form 4707 Post I					.	
1 U 1 1	Gain from Form 4797, Part I Long-term capital loss carryover Enter the	amount if any	from line 14 o	f the 2008 Capital Los		10	···
-	Carryover Worksheet					11 (	)
12	Net long-term gain or (loss). Combine lines	6a through 11	ın column (f)	Enter here and on lin	e 14a,		
	column (3) on the back				<u></u> 1	12	208,061.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

chedule	• D (F	orm 10	411	2009

	dule D (Form 1041) 2009				Page <b>2</b>	
Pai	t     Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(2) T-4-1	
	Caution: Read the instructions before completing this p	art	(see page 5)	or trust's	(3) Total	
13	Net short-term gain or (loss)	13				
14	3 , ,					
а		14a			208,061.	
		14b				
С		14c				
15	• • • • • • • • • • • • • • • • • • • •	15			208,061.	
Note	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form	m 990	-T, Part I, line 4a) If line	s 14a and 15, colum	n (2), are net gains, go	
	rt V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV	an IV 8	and the Capital Loss Can	yover worksneet, as	necessary	
	t IV Capital Loss Limitation		<del></del>	· <del>-</del> ,,		
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of					
a	The loss on line 15, column (3) or b \$3,000					
Carry	Carryover Worksheet on page 7 of the instructions to figure your capital loss carryover					
_	Tax Computation Using Maximum Capital Gains Rates		<del></del>	······		
	n 1041 filers. Complete this part only if both lines 14a and 15 in colui		) are gains or an am	iount is entered in	Part I or Part II and	
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more	e thai	n zero		r dittroir r dit ir dila	
Caution: Skip this part and complete the worksheet on page 8 of the instructions if						
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
Forn	n 990-T trusts. Complete this part only if both lines 14a and 15 are	gair	s, or qualified divide	nds are included	in income in Part I	
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this par	t and	complete the works	sheet on page 8 c	of the instructions if	
- IIII	er line 14b, col (2) or line 14c, col (2) is more than zero		<del></del>			
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34	4) .	17			
18	Enter the smaller of line 14a or 15 in column (2)		1			
	but not less than zero		_			
19	Enter the estate's or trust's qualified dividends					
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) 19		_			
20	Add lines 18 and 19			ľ		
21	If the estate or trust is filing Form 4952, enter the					
	amount from line 4g, otherwise, enter -0 ▶ 21		_			
22	Subtract line 21 from line 20 If zero or less, enter -0		· ·			
23	Subtract line 22 from line 17 If zero or less, enter -0-		23			
24	Enter the smaller of the amount on line 17 or \$2,300		24			
25	Is the amount on line 23 equal to or more than the amount on line 24'	?				
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
	No. Enter the amount from line 23		25			
26	Subtract line 25 from line 24		26			
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31	e 22	27			
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			
29	Subtract line 28 from line 27					
30	Multiply line 29 by 15% ( 15)			30		
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rate Schedule for Estates and Trusts					
	(see the Schedule G instructions in the instructions for Form 1041)					
32	Add lines 30 and 31			32	<del> </del>	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rate					
_	(see the Schedule Ginstructions in the instructions for Form 1041)					
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 h		· · · · · · · · · · · · · · · · · · ·			
	G, line 1a (or Form 990-T, line 36)					

Employer identification number

THE DEBS FOUNDATION 13-3639449 Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (see page 4 of the instructions) (d) Sales price (see page 4 of the (b) Date (f) Gain or (loss) Subtract (e) from (d) (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold acquired (mo , day, yr ) (mo , day, yr ) instructions) 6a 4,900 SHS CISCO SYSTEMS VARIOUS 12/22/2009 INC. 115,576. 7,639 107,937. 4,400 SHS INTEL CORP. VARIOUS 12/22/2009 88,293. 6,445 81,848. 740 SHS XILINX INC. VARIOUS 12/22/2009 18,387. 111. 18,276. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b . . . . . . . . . . . . 208,061. Schedule D-1 (Form 1041) 2009

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side