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### 990-PF Department of the Treasury

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

OMB No 1545-0052

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service 2011, and ending 20 For calendar year 2011 or tax year beginning Name of foundation A Employer identification number 55-0823121 THE DEBORAH & RONALD EISENBERG FOUNDATION B Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite (908) 688-4815 C/O ROCKDALE CAPITAL-650 LIBERTY AVE. City or town, state, and ZIP code C If exemption application is pending, check here • • UNION, NJ 07083 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation . . . . . . X | Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust under section 507(b)(1)(A), check here . J Accounting method | X Cash | Fair market value of all assets at end If the foundation is in a 60-month termination of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . > 195,331. (Part I, column (d) must be on cash basis ) *16)* ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per income income may not necessarily equal the amounts in purposes books column (a) (see instructions) ) (cash basis only) 212,658 Contributions, gifts, grants, etc., received (attach schedule) ... if the foundation is **not** required to 1 2 attach Sch B 31. 31 ATCH 1 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities b Net rental income or (loss) -5,590 Net gain or (loss) from sale of assets not on line 10 Revenue Gross sales price for all 207,067 assets on line 6a 206,780. Capital gain net income (from Part IV, line 2) . Net short-term capital gain . . . . . . . . . 2 S Income modifications . 10 a Gross sales less returns and allowances · · · b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 207,099. 206.811Total. Add lines 1 through 11 . . . . 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages . . . . . 14 Pension plans, employee benefits . . . . . . 15 16a Legal fees (attach schedule) . . . . b Accounting fees (attach schedule) ATCH 2 1,750. 875 c Other professional fees (attach schedule). . . 17 7,666. Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion. Travel, conferences, and meetings 22 Printing and publications . . . . . 55. 25. <del>30</del>. Other expenses (attach schedule) ATCH 4. 23 Total operating and administrative expenses. 900 905. 9,471 Add lines 13 through 23 . . . . . . . . . . . . 139,530. 139,530. Contributions, gifts, grants paid . . . . . . 25 149,001. 900. 140,435 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 58,098 a Excess of revenue over expenses and disbursements 205,911 b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-).

Page 2

Р	art II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	f year
			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing		<u>-</u> .	
	2	Savings and temporary	cash investments	137,233.	195,331.	195,331.
	3	Accounts receivable ▶				
		Less <sup>c</sup> allowance for dou	btful accounts ▶			
	4					
		Less allowance for dou	btful accounts ▶			
	5		· · · · · · · · · · · · · · · · · · ·			
	6		officers, directors, trustees, and other		78.1	
		disqualified persons (at	tach schedule) (see instructions)			
	7		receivable (attach schedule)			
			btful accounts ▶			
40	8		se			
ssets	9	Prepaid expenses and d	leferred charges	,		
Ass	10 a		e government obligations (attach schedule)			
			e stock (attach schedule)			
			bonds (attach schedule)	i		
	11	Investments - land, buildings and equipment basis Less accumulated deprecia	s,			
		(attach schedule)				
	12		loans			<del></del>
	13 14	Land, buildings, and	ach schedule)			
		equipment basis	ation b			
		(attach schedule)	ation			
	13	Other assets (describe	<b></b> /-			
	16		completed by all filers - see the age 1, item I)	137,233.	195,331.	195,331.
	17		accrued expenses			
	18					
Ś	19	Deferred revenue				
Liabilities	20		ors, trustees, and other disqualified persons			
jpi	21		otes payable (attach schedule)			
Ë	22		e ►)			
			·/			
	23	Total liabilities (add line	es 17 through 22)			
			low SFAS 117, check here ▶			
			24 through 26 and lines 30 and 31.			
es	24	Unrestricted				
nc	25					
3al;	26					
d E			not follow SFAS 117,	-		
Fur			plete lines 27 through 31.   X			
or l	27		cipal, or current funds			
ts (	28		r land, bldg , and equipment fund			
sse	29		ulated income, endowment, or other funds	137,233.	195,331.	
As	24 25 26 27 28 29 30 31		balances (see instructions)	137,233.	195,331.	
Net	31		net assets/fund balances (see	· · · · · · · · · · · · · · · · · · ·		
				137,233.	195,331.	
P	art II	Analysis of Cha	anges in Net Assets or Fund E			
			alances at beginning of year - Part I		must agree with	
-			d on prior year's return)			137,233.
2	Ente	r amount from Part I	line 27a		2	58,098.
3	Othe	er increases not includ	line 27a ed in line 2 (itemize) ▶ATTACH	MENT 5	3	
						195,331.
		reases not included in	line 2 (itemize)	• • • • • • • • • • • • • • • • • • • •		
			alances at end of year (line 4 minus li	ne 5) - Part II column (b)		195,331.
<u>~</u>	. 010	added of fully be	and the state of t	inco, raith, column (b)	, 0	5em 990 PE (2044)

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P	art IV Capital Gains	and Losses for Tax on Inve	estment Income			
		d describe the kind(s) of property sold (	- <del>-</del>	(b) How acquired P-Purchase	(c) Date acquired	(d) Date sold
_	CEE DADE THE COUR	rick warehouse, or common stock, 200	shs MLC Co)	D-Donation	(mo , day, yr )	(mo , day, yr )
<u>1a</u>	<del></del>	POOPE			<del>-</del>	
_ <u>b</u>						
_ <u>.</u>	··			<del> </del>		
e		9				
	(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) minu	
а						
_b	· · · · · · · · · · · · · · · · · · ·					
		Al				
d						
<u>e</u>					<del></del> -	
	Complete only for assets	showing gain in column (h) and owner			Gains (Col (h) g (k), but not less t	
	(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	COI	Losses (from co	
_a		<del>,,</del>				
_ <u>b</u>						
_ <u>c</u> _d		****				
e						
	Capital gain net income or		gain, also enter in Part I, line 7 }	2		206,780.
3	Net short-term capital gair	'' ) or (loss) as defined in sections 12	· · · · · · · · · · · · · · · · · · ·	_		2007.001
		t I, line 8, column (c) (see insti				
	D. (1.1.)	· · · · · · · · · · · · · · · · · · ·	(	3		0
P		Jnder Section 4940(e) for Red		ncome		
W		leave this part blank the section 4942 tax on the distrib not qualify under section 4940(e)		ase period	ı,	Yes X No
_		ount in each column for each year.		anv entri	es	
	(a)  Base period years salendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c)  Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	atio
_	2010	103,735.	181,584.			0.571278
	2009	105,150.	52,169.			2.015565
	2008	127,914.	38,034.			3.363149
	2007	140,170.	45,100.			3.107982
	2006	73,498.	55,584.	,		1.322287
2	Total of line 1, column (d)			2	1	0.380261
3		for the 5-year base period - divide dation has been in existence if less		3		2.076052
4	Enter the net value of nor	ncharitable-use assets for 2011 fro	m Part X, line 5	4		193,880.
5	Multiply line 4 by line 3			5		402,505.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		2,059.
7	Add lines 5 and 6			7		404,564.
8	Enter qualifying distribution of the street	ons from Part XII, line 4	n Part VI, line 1b, and complete t	8 hat part	using a 1% ta	140,435. k rate See the

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

9

x

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3 b

4a

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise

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

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?

Х

					1			
2	Compensation of fiv "NONE."	e highest-paid employees	(other than th	ose included o	n line 1 - se	e instructions).	If none, er	ite
					(d) Cont	ubutions to		

(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				

Form 990-PF (2011) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE 0 Total number of others receiving over \$50,000 for professional services **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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 1 NONE Part IX-B Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments. See instructions 3 NONE Total. Add lines 1 through 3.

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Pa	see instructions )	in foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	İ	
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	196,832.
С	Fair market value of all other assets (see instructions)	1 c	
d	Total (add lines 1a, b, and c)	1d	196,832.
е	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	3	196,832.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	4	2,952.
5		5	193,880.
6	Minimum investment return. Enter 5% of line 5	6	9,694.
Pa	rt 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 p	art)	
1	Minimum investment return from Part X, line 6	1	9,694.
2 a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI)  2b		
	Add lines 2a and 2b	2c	4,118.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	5,576.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5,576.
6	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	5,576.
Pa	rt XII Qualifying Distributions (see 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	140,435.
b	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	140,435.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	140,435.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years	culating wh	ether the foundation

Form 990-PF (2011) Page 9 Undistributed Income (see instructions) Part XIII (a) (b) (c) (d) Years prior to 2010 2010 2011 Corpus Distributable amount for 2011 from Part XI, 5,576. Undistributed income, if any, as of the end of 2011 Enter amount for 2010 only . . Total for pnor years 20 09 ,20 08 .20 07 Excess distributions carryover, if any, to 2011 71,553 From 2006 . . . . . . 140,201 From 2007 . . . . . . 126,012. From 2008 . . . . . . 103,728. From 2009 . . . . . . 98,796 From 2010 . . . . . . 540,290 Qualifying distributions for 2011 from Part XII. 140,435. line 4 ▶ \$ a Applied to 2010, but not more than line 2a . . . Applied to undistributed income of prior years (Election required - see instructions)..... Treated as distributions out of corpus (Election required - see instructions) . . . . . . . . . . . . 5,576. d Applied to 2011 distributable amount . . . . . 134,859. Remaining amount distributed out of corpus . . Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: 675,149. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b 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 4a from line 2a Taxable amount - see instructions f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012 . . . . . . . . . . . . . . . . Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2006 not 71,553. applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2012. 603,596. Subtract lines 7 and 8 from line 6a . . . . . . Analysis of line 9 140,201 Excess from 2007 . . . 126,012 Excess from 2008 . . . 103,728 Excess from 2009 . . . 98,796 d Excess from 2010 . . . 134,859. e Excess from 2011 .

N/A

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

Check here ▶ X 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

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

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

N/A

c Any submission deadlines

N/A

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

N/A

factors

1E1490 1 000

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Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or Appi	roved for F	uture Payment	
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	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or occupantion of interest	1		
SEE SCHEDULE ATTACHED				139,530.
				100,000.
	1	1		
	ļ			
		1		
		Ĭ	1	
Total	<u> </u>		▶ 3a	139,530.
b Approved for future payment				
		Į.		
		Ï		
			1	1
		1		
	1	J		
<u> Total</u>		<u> </u>	▶ 3b	<u> </u>

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Part XVI-A Analysis of Income-Produ	cing Activ	/ities			
nter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a	<u> </u>				(occ mandonoris )
b			-		
С					
d					
е					
f _					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash investments			14	31.	
Dividends and interest from securities			14		
Net rental income or (loss) from real estate					
a Debt-financed property			ļ	<u> </u>	
<b>b</b> Not debt-financed property			<del> </del>		
Net rental income or (loss) from personal property		<u> </u>			
Other investment income			<del> </del>	5 500	
Gain or (loss) from sales of assets other than inventory	<u> </u>		18	-5,590.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory	<u> </u>		<del> </del>		
Other revenue a					
b	ļ		ļ		
	-	<u> </u>	ļ		
c			ŀ		
d		<del></del>			<del></del>
d				-5 550	
e 2 Subtotal Add columns (b), (d), and (e)				-5,559.	
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calc	ulations)			13	
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calc Part XVI-B Relationship of Activities	ulations) s to the Ac	complishment of Ex	cempt Purp	ooses e) of Part XVI-A contrib	-5,559
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calc Part XVI-B Relationship of Activities Line No. Explain below how each activities	ulations) s to the Ac	complishment of Ex	cempt Purp	ooses e) of Part XVI-A contrib	-5,559
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calc 2 art XVI-B Relationship of Activities -ine No. Explain below how each activities	ulations) s to the Ac	complishment of Ex	cempt Purp	ooses e) of Part XVI-A contrib	-5,559
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e  Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calc  art XVI-B Relationship of Activities  Line No. Explain below how each activities	ulations) s to the Ac	complishment of Ex	cempt Purp	ooses e) of Part XVI-A contrib	-5,559
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc art XVI-B Relationship of Activities Line No. Explain below how each activities	ulations) s to the Ac	complishment of Ex	cempt Purp	ooses e) of Part XVI-A contrib	-5,559
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e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calc Part XVI-B Relationship of Activities Line No. Explain below how each activities	ulations) s to the Ac	complishment of Ex	cempt Purp	ooses e) of Part XVI-A contrib	-5,559
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calc Part XVI-B Relationship of Activities  Line No. Explain below how each activity	ulations) s to the Ac	complishment of Ex	cempt Purp	ooses e) of Part XVI-A contrib	-5,559
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calc Part XVI-B Relationship of Activities Line No. Explain below how each activity	ulations) s to the Ac	complishment of Ex	cempt Purp	ooses e) of Part XVI-A contrib	-5,559

JSA 1E1492 1 000

Pait /	VVII	Exempt Organ		ansiers to and th	ansacu	ons and	Relation	snips with Non	cnan	table	3
1 D	ıd the			engage in any of the	following	with any	other orga	nization described		Yes	No
				section 501(c)(3) org	_		_				
or	ganız	ations?						- ,			
a Tr	ransfe	ers from the reportin	g foundation to	a noncharitable exem	npt organ	zation of					
(1	) Cas	h							1a(1)		X
									1a(2)		Х
		ransactions									
(1	) Sale	es of assets to a no	ncharitable exe	mpt organization					1b(1)	<u> </u>	Х
(2	!) Pur	chases of assets fro	om a noncharita	able exempt organizatio	n				1b(2)	<u> </u>	X
(3	) Rer	ntal of facilities, equi	pment, or other	assets					1b(3)		Х
(4	l) Rei	mbursement arrange	ements						1b(4)		X
(5	i) Loa	ins or loan guarantee	∍s						1b(5)		X
(6	) Per	formance of service	s or membersh	nip or fundraising solici	tations .				1b(6)		X
				its, other assets, or pai						<u> </u>	X
				es," complete the follo							
				ices given by the repo							
				gement, show in colu							
(a) Line	по	(b) Amount involved N/A	(c) Name of r	noncharitable exempt organiz	tation	N/A	ription of transf	ers, transactions, and sha	nng arra	ngeme	nts
	-	N/A			-	N/A		<del></del>			
	-	- · <del></del>							-		
	+							<del></del>	_		
		<u> </u>									
	-			-11-1							
	_										
	-			<del>-</del>							
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	-			<del></del>							
	<u> </u>	formalation discatly		Shakad wakh an aslaka	<u> </u>						
				filiated with, or relate ther than section 501(				organizations [		es X	7 N.
		"_complete the follo		ther than section 50 it	C)(3)) UI	in section	5217			38 <u>r</u>	_] IAO
<u> </u>	165,	(a) Name of organization		(b) Type of orga	nization	··		c) Description of relations	ehin.		
		(a) Traine of organization		(b) Type of orga			<u>'</u>	b) Description of relations	or in p		
		. /									
							<u>.</u> , <u>.</u> .				
	Under	penalties of penury I decla	l are that I have exam	ined this return, including acco	mnanvino sc	hedules and s	statements and t	o the hest of my knowledge	t hee an	nelief it	is true
Sign	correct	t, and complete Declaration of	f preparer (other than t	axpayer) is based on all informat	ion of which p	reparer has an	y knowledge	o the best of my knowledg	ge and i	7CIICI, II	13 1100,
Here				7 5/7/12		JKF5	. 9 TREAS	May the IR			
Hele	Sign	ature of officer or trustee		Date		Title	• • • • • • • • • • • • • • • • • • • •	with the pi		shown Yes	
	J.g	diare or emocres are acces		Date		1100		(see instruction	is) /	Yes	No
		Print/Type preparer's	name	Preparer's signature	7		Date	Chook	PTIN		
Paid		David Eis	či.				4/23/12	Check If self-employed	pበበፍ	.37በ.	48
Prepa	rer		VID EISIG	CAP	1		1/24/2	Firm's EIN ▶ 20-2			10
Use O	nly	Firm's address > 99			TITE 40	00	· · · · · · · · · · · · · · · · · · ·	FIIIIS EIN P 20-2	5,51		
	•		ALLEY STREA			115	80	Phone no 516-5	93_7	700	
		· · · · · · · · · · · · · · · · · · ·							om 99		/2011
								Г	UIII 33	/U-FF	(ZVII)

### 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

Name of the organization		Employer identification number
THE DEBORAH & RONALD	EISENBERG FOUNDATION	55 0000101
Organization type (check one)		55-0823121
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private fou	ndation
	527 political organization	
Form 990-PF .	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ion
	501(c)(3) taxable private foundation	
<b>Note.</b> Only a section 501(c)(7), instructions	vered 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 S	pecial Rule See
General Rule		
	ing 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		
under sections 509(a)	B) organization filing Form 990 or 990-EZ that met the 33 1/3 % support to (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 200 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form I	e year, a contribution of
during the year, total	7), (8), or (10) organization filing Form 990 or 990-EZ that received from a contributions of more than \$1,000 for use <i>exclusively</i> for religious, charital es, or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary,
during the year, contr not total to more than year for an exclusively applies to this organiz	7), (8), or (10) organization filing Form 990 or 990-EZ that received from a butions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the \$1,000 If this box is checked, enter here the total contributions that were religious, charitable, etc., purpose. Do not complete any of the parts unless tation because it received nonexclusively religious, charitable, etc., contributions.	ese contributions did be received during the sisthe <b>General Rule</b> butions of \$5,000 or
Caution. An organization that is 990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file So answer "No" on Part IV, line 2, of its Form 990, or check the box on line F F, to certify that it does not meet the filing requirements of Schedule B (For	chedule B (Form 990, I of its Form 990-EZ or on

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 THE DEBORAH & RONALD EISENBERG FOUNDATION Employer iden

Employer	identification numbe
	55-0823121

Part I	Contributors (see instructions) Use duplicate copies of	of Part I if additional space is need	ded
(a) No.	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	RONALD EISENBERG  105 BLUEBERRY DRIVE  WOODCLIFF LAKE, NJ 07677	\$212,658.	Person X Payroll X Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization THE DEBORAH & RONALD EISENBERG FOUNDATION

Employer identification number 55-0823121

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) 3,700 SHS BED BATH & BEYOND 1 212,658. 04/27/2011 (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Name of organization THE DEBORAH & RONALD EISENBERG FOUNDATION

Employer identification number 55-0823121

Use I	duplicate copies of Part III if addition	year. (Enter this information onc onal space is needed.	e See instructions ) > \$
lo. m t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_   _			
-		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4 F	Relationship of transferor to transferee
No. m t I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_		(e) Transfer of gift	
		-	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
No. m ti	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<del></del>		<del></del>	
		(e) Transfer of gift	
	Transferee's name, address, a	.,	Relationship of transferor to transferee
	Transferee's name, address, a	.,	Relationship of transferor to transferee
	Transferee's name, address, a	.,	Relationship of transferor to transferee
No.	Transferee's name, address, and the state of	.,	
No.		nd ZIP + 4	Relationship of transferor to transferee  (d) Description of how gift is held
No.		nd ZIP + 4	
No.		nd ZIP + 4	
No.		(c) Use of gift  (e) Transfer of gift	

ATTACHMENT 1 PAGE 21

ATTACHMENT 1

INVESTMENTS	
CASH	
I ON TEMPORARY	
NO	
INTEREST	
ı	
PART I	
990PF,	
FORM	

THE DEBORAH & RONALD EISENBERG FOUNDATION

REVENUE	AND	PER BOOKS INCOME	.6	. 4.	18. 18.
		DESCRIPTION	BANK OF AMERICA	MORGAN STANLEY	JPMORGAN

TOTAL

-	(1	ľ
	ATTACHMENT	

M 990PF, PART I - ACCOUNTING FEES
Ю
Ю
Ю
Ю
ART I - ACCOUNTING
ART I -
ART
P.
RM 990PF,
FORM

THE DEBORAH & RONALD EISENBERG FOUNDATION

CHARITABLE	PURPOSES	875.	875.
ADJUSTED NET	INCOME		
NET INVESTMENT	INCOME	875.	875.
REVENUE AND EXPENSES	PER BOOKS	1,750.	1,750.
			TOTALS
	DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT 3

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER BOOKS

DESCRIPTION

\_ \_ \_ \_

TAXES

7,666.

TOTALS

7,666.

# FORM 990PF, PART I - OTHER EXPENSES

NET INVESTMENT INCOME	25.
REVENUE AND EXPENSES PER BOOKS	55.
DESCRIPTION NJ DIV. OF CONSUMER AFFAIRS	DIVISION OF REV

30.	

CHARITABLE PURPOSES 30.

ATTACHMENT 5

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

ROUNDING

TOTAL

### ATTACHMENT 6

### FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

RONALD EISENBERG WARREN EISENBERG

### SCHEDULE D -(Form 1041)

**Capital Gains and Losses** 

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). Name of estate or trust

Employer identification number 55-0823121

	THE DEBORAH & RONALD EISENBER		ON		55-08231	.21	
	: Form 5227 filers need to complete only Pa						
Par	t 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 (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1 a	-						
	* · · · · · · · · · · · · · · · · · · ·						
				_			
		+			-		
h	Enter the short-term gain or (loss), if any, f	from Cohodulo D	1 limo 1h			4.	206,780.
D	The the short-term gain or (loss), if any, if	Irom Schedule D	-1, IIITE 1D			1b	200,700.
2	Short-term capital gain or (loss) from Forn	ns 4684, 6252,	6781, and 882	4		2	
	Not also discourse and a Notice of					_	
3 4	Net short-term gain or (loss) from partners					3_	
•	Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2010 Capital Loss Carryover Worksheet						( )
5	Net short-term gain or (loss). Combine	lines 1a through	gh 4 in colum	n (f) Enter here an	id on line 13,		-
Day	column (3) on the back	Accete	Laid Mara T		▶	5	206,780.
Par	(a) Description of property	(b) Date acquired	(c) Date sold	nan One Year	(a) Coat or other	haasa	(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)  (b) Date acquired (c) Date sold (mo, day, yr) (mo, day, yr) (d) Sales price (e) Cost or other by (see instructions)						the entire year Subtract (e) from (d)
6a							
		-					
	-				<del>                                     </del>		
		0.1.1.5					
D	Enter the long-term gain or (loss), if any, fr	rom Schedule D-	1, line 6b			6b	-
7	Long-term capital gain or (loss) from Form	ns 2439, 4684,	6252, 6781, ar	nd 8824		7	
8	Net long-term gain or (loss) from partners	hips, S corporat	ons, and other	estates or trusts		8	
9	Capital gain distributions					9	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover Enter	the amount, if	any, from lir	ne 14 of the 2010	Capital Loss		
4.0	Carryover Worksheet					11	( )
12	Net long-term gain or (loss). Combine is column (3) on the back	_		• •	•	12	
For F	Paperwork Reduction Act Notice, see the Instru			<u></u>			e D (Form 1041) 2011

Schedule D (Form 1041) 2011

Schedule D (Form 1041) 2011						_	Page
Part III Summary of Parts I and II			(1) Beneficia		(2) Est		(3) Total
Caution: Read the instructions before compl	<del></del>		(see instr	)	or tru	st's	
3 Net short-term gain or (loss)		13					206,780
		4 -					
<ul><li>a Total for year</li><li>b Unrecaptured section 1250 gain (see line 18 of the wrksh</li></ul>		4a					<del></del>
c 28% rate gain	· · · · · · - —				·· <del>·····</del> ·		
5 Total net gain or (loss). Combine lines 13 and 14a	• • • • • • • • • • • • • • • • • • •	15					206,780
Note: If line 15, column (3), is a net gain, enter the gain on Form 1			m 990-T. Part I,	line 4a	a) If lines 1	4a and	<del>-                                    </del>
nains, go to Part V, and do not complete Part IV If line 15, column (3), is	a net loss, com	plet	e Part IV and the	Capita	Loss Carryo	ver Wo	orksheet, as necessary
Part IV Capital Loss Limitation							
6 Enter here and enter as a (loss) on Form 1041, line 4 (or F							
a The loss on line 15, column (3) or b \$3,000.  Note: If the loss on line 15, column (3), is more than \$3,000, or if Fon		: :		٠٠ <del>-</del> ٠ ،٠		16	(
Note: If the loss on line 15, column (3), is more than \$3,000, <b>or</b> if Fon Carryover Worksheet in the instructions to figure your capital loss carryo	m 1041, page 1 ver	ı, ıın	e 22 (or Form 99	0-1, 111	ne 34), is a	oss, co	omplete the Capital Loss
Part V Tax Computation Using Maximum Capital C							
Form 1041 filers. Complete this part only if both lines 14a and	d 15 ın colum	n (2	) are gains, or a	an am	ount is en	tered i	ın Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line							
Caution: Skip this part and complete the Schedule D Tax Works.  Either line 14b, col (2) or line 14c, col (2) is more than zero, or		struc	ctions if				
<ul> <li>Both Form 1041, line 2b(1), and Form 4952, line 4g are more</li> </ul>							
form 990-T trusts. Complete this part only if both lines 14a		aaın	s, or qualified	dıvıde	ends are in	clude	d in income in Part
of Form 990-T, and Form 990-T, line 34, is more than zero. Skij	p this part and	d co	mplete the Sch	edule	D Tax Wo	rkshe	et in the instructions
feither line 14b, col (2) or line 14c, col (2) is more than zero							
7 Enter taxable income from Form 1041, line 22 (or Form 9	990-T, line 34)		17				
8 Enter the smaller of line 14a or 15 in column (2)							
but not less than zero			l i				
9 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			<b>→</b>				
20 Add lines 18 and 19 20			<b>→</b>				
21 If the estate or trust is filing Form 4952, enter the						Ì	
amount from line 4g, otherwise, enter -0 <b>21</b>							
Subtract line 21 from line 20 If zero or less, enter -0		• •	22				
Subtract line 22 from line 17 If zero or less, enter -0		• •	23			1	
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			• •   2-7				
Yes. Skip lines 25 and 26, go to line 27 and check t							
No. Enter the amount from line 23			25				
Subtract line 25 from line 24							
Are the amounts on lines 22 and 26 the same?							
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smalls	er of line 17 or line 2	22	27				
Enter the amount from line 26 (If line 26 is blank, enter -0-	-)		28				
Subtract line 28 from line 27							
Multiply line 29 by 15% (15)						30	
Figure the tax on the amount on line 23. Use the 20°							
(see the Schedule G instructions in the instructions for Fo	rm 1041)					31	<del></del>
32 Add lines 30 and 31						, ,	
32 Add lines 30 and 31						32	
(see the Schedule G instructions in the instructions for Fo						33	
Tax on all taxable income. Enter the smaller of line 32							W-
G, line 1a (or Form 990-T, line 36)						34	

JSA 1F1220 2 000 Schedule D (Form 1041) 2011

### **SCHEDULE D-1** (Form 1041)

Department of the Treasury Internal Revenue Service

# Continuation Sheet for Schedule D (Form 1041)

► See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. OMB No 1545-0092

Name of estate or trust

Employer identification number

THE DEBORAH & RONALD EISENBERG FOUNDATION 55-0823121  Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less							
(a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)		
3,700 SHS BED BATH & BEYOND	04/27/2011	05/09/2011	207,067.	287.	206,780		
		-					
		-					
			<u> </u>				
			<u> </u>				

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

Schedule D-1 (Form 1041) 2011

206,780.

Organization		Amount	Purpose
Sunnse Day Camp	\$	1,500	General
15 Neil Court			
Oceanside, NY 11572-			
	<b>a</b>	250	
Charley's Fund	\$	250	General
P.O. Box 297			
South Egremont, MA 01258			
My Sisters' Place	\$	2,500	General
One Water Street			
White Plains, NY 10601			
Roscop County VICC	•	11 500	General
Bergen County YJCC 605 Pascack Rd	\$	11,500	General
Township of Washington, NJ 07676			
Township of washington, 19 07070			
The Leukemia & Lymphoma Society	\$	500	General
475 Park Avenue South 8th Flr			
New York, NY 10016			
Bergen County YJCC	\$	2,750	General
605 Pascack Rd	₩	<b>2,</b> 730	General
Township of Washington, NJ 07676			
Feinstein Institute for Medical Research	\$	2,500	General
125 Community Drive			
Great Neck, NY 11021			
Project Renewal	\$	2,500	General
200 Varick St, 9th Fl		•	
New York, NY 10014			
Intropid Follow Horoca Franch	¢	250	Comonal
Intrepid Fallen Heroes Fund Avenue	\$	250	General
New York, NY 10036			
Israel Children's Centers	\$	5,000	General
3275 West Hillsboro Blvd, Suite 102			
Deerfield Beach, FL 33442			

Organization		Amount	Purpose
One Family Fund	\$	250	General
PO Box 822732			
Philadelphia, PA 19182-2732			
UJA Federation of Northern New Jersey	\$	15,000	General
50 Eisenhower Drive	4	13,000	General
Paramus, NJ 07652			
1 1111111111111111111111111111111111111			
UJA Federation of Northern New Jersey	\$	23,730	General
50 Eisenhower Drive			
Paramus, NJ 07652			
Cife of Life Bone Manners Form Jaking	<b>c</b> r	2 500	C1
Gift of Life Bone Marrow Foundation 800 Yamato Road, Ste 101	\$	2,500	General
Boca Raton, FL 33431			
Boca Raton, 1 L 33431			
Bergen County YJCC	\$	10,000	General
605 Pascack Rd			
Township of Washington, NJ 07676			
Israel Children's Centers	\$	2,500	General
3275 West Hillsboro Blvd, Suite 102	₽	2,300	General
Deerfield Beach, FL 33442			
Secretary 12 33 112			
Pan Massachusets Challenge	\$	250	General
77 4th Avenue			
Needham, MA 02494			
Pan Massachusets Challenge	\$	250	General
77 4th Avenue	₩	250	General
Needham, MA 02494			
,			
United States Holocaust Museum	\$	300	General
PO Box 90988			
Washington, DC 20090-0988			

Organization	A	Purpose	
Bergen County YJCC	\$	10,000	General
605 Pascack Rd			
Township of Washington, NJ 07676			
The Charles & Lynn Schusterman Center	\$	3,600	General
800 8th Street NW			
Washington, DC 20001			
GHRR-BBYO	\$	1,800	General
411A North Wood Avenue		·	
Linden, NJ 07036			
IHAD - Plainfield Project	\$	2,500	General
c/o Rockdale Capital 650 Liberty Avenue			
Union, NJ 07083			
Israel Children's Centers	\$	500	General
3275 West Hillsboro Blvd, Suite 102			
Deerfield Beach, FL 33442			
New Museum of Contemporary Art	\$	5,000	General
235 Bowery			
New York, NY 10002			
Meaningful Movements, Inc	\$	1,000	General
6 Godwin Plaza			
Midland Park, NJ 07432-0294			
Melanoma Research Foundation	\$	2,500	General
c/o Powered by Powerhouse			
1375 Broadway, 3rd Flr.			
New York, NY 10018			
Bergen County YJCC	\$	25,000	General
605 Pascack Rd			
Township of Washington, NJ 07676			

Organization		Amount	Purpose	
Syracuse University School of Education	\$	500	General	
820 Comstock Avenue				
Syracuse, NY 13244				
Chai Lifeline	\$	200	General	
151 W 30th Street 3rd Flr.				
New York, NY 10001				
Valley Chabad	\$	2,500	General	
100 Overlook Drive				
Woodcliff Lake, NJ 07677				
Valley Chabad	\$	400	General	
100 Overlook Drive		•		
Woodcliff Lake, NJ 07677				
	Total \$	139,530		

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

	II II AL OAI	INO AND LO	OSSES FOI	Y IAX OIN	HAAFSII	<u>И III II</u> Pl		
Kınd of P		Description			or Date Date		Date sold	
Gross sale frice 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)	
207,067.	unowasię		BED BATH & I		auj vasis	C	04/27/2011 206,780.	05/09/2011
TOTAL GAIN(L	oss)		· • • • • • • • • • • • • • • • • • • •			-	206,780.	
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