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

# Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2011

<u>F</u>	or ca	lendar year 2011 or tax year beginning		<u>, 2011, and endir</u>	ng		, 20		
	Name	e of foundation		<del></del>	A	Employer identifi	ication number		
	JEF	FREY & DEBRA FEINSTEIN FOUND	DATION			80-0063654			
_		ber and street (or P O box number if mail is not delive		Room/suit	ев	Telephone numb	er (see instructions)		
			,		-	· ·	08) 688-4815		
	C/O	ROCKDALE CAPITAL-650 LIBER	TY AVE.			, , ,	,		
_		or town, state, and ZIP code							
	Oity (	or town, state, and 211 code			l c	f exemption applica	etion is		
	TINIT	ON NT 07002				f exemption application application for the control of the control			
_		ON, NJ 07083	<del>-                                    </del>				. $\Box$		
G	Che	ck all that apply. Initial return		of a former public chari	ty p	foreign organiza	tions, check here		
		Final return	Amended re		1	2. Foreign organiza 85% test, check h			
_		Address change	Name chang		_				
H	_Che	eck type of organization X Section 501	(c)(3) exempt private t	foundation	_ ,	f nrivate foundation	n status was terminated		
1	s	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr	ivate foundation	4	-	o)(1)(A), check here		
ı	Fair	market value of all assets at end JAcco	ounting method X C	ash Accrual		-	in a 60-month termination		
	of y	ear (from Part II, col (c), line	ther (specify)	<u> </u>			)(1)(B), check here		
	16)	▶ \$ 83,582. (Part I,	column (d) must be or	r cash basıs )					
	art	Analysis of Revenue and Expenses (The	(a) Danisani and				(d) Disbursements		
		total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net investment		ljusted net	for charitable		
		may not necessarily equal the amounts in column (a) (see instructions) )	books	income	11	ncome	purposes (cash basis only)		
_	1		153,343.				(Cash Dasis Offiy)		
	'	Contributions, gifts, grants, etc., received (attach schedule) .  Check if the foundation is not required to	200,000	-		<del></del>			
	2	Check ▶ attach Sch B	27.	27.			ATCH 1		
	3	Interest on savings and temporary cash investments		21.			MICU I		
	4	Dividends and interest from securities				<del></del>			
		Gross rents							
	b	Net rental income or (loss)	2.504						
ne	6a	Net gain or (loss) from sale of assets not on line 10	-3,594.			F	RECEIVED—		
en	ן ו	Gross sales price for all 149, 750 assets on line 6a				ا ایران	10 CO CIALD		
Revenue	7	Capital gain net income (from Part IV, line 2) .		149,543.		25	8		
Œ	8	Net short-term capital gain				1-1	MAY 1 4 2012		
	9	Income modifications				ΙΨ	RS		
	10 a	Gross sales less returns and allowances · · · · ·					CDENTITE		
	ь	Less Cost of goods sold .					UDLIN, UI		
		Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
		Total. Add lines 1 through 11	149,776.	149,570.					
_		Compensation of officers, directors, trustees, etc.	0						
		Other employee salaries and wages							
es							<del></del>		
Š	15	Pension plans, employee benefits					<del></del>		
and Administrative Expenses	тба	Legal fees (attach schedule)	1,750.	875.			875.		
Щ		Accounting fees (attach schedule) ATCH 2	1,,30.				0/5.		
ξĬ		Other professional fees (attach schedule)							
tra	17	Interest	0.000						
įs	18	Taxes (attach schedule) (see instructions)	9,880.						
Ē	19	Depreciation (attach schedule) and depletion.							
Ą	20	Occupancy							
Ď	21	Travel, conferences, and meetings							
ā	22	Printing and publications							
ing	23	Other expenses (attach schedule) ATCH 4.	50.				50.		
Operating	24	Total operating and administrative expenses.							
pel		Add lines 13 through 23	11,680.	875.			925.		
0	25	Contributions, gifts, grants paid	273,563.	_			273,563.		
	26	Total expenses and disbursements Add lines 24 and 25	285,243.	875.		C			
_	27	Subtract line 26 from line 12	· · · · · · · · · · · · · · · · · · ·			<del>_</del>			
		Excess of revenue over expenses and disbursements	-135,467.						
		Net investment income (if negative, enter -0-)		148,695.			<del></del>		
		Adjusted net income (if negative, enter -0-).							
	, "	majasted het mouthe (ii heydlive, chich -U-)	į.	,			1		

For Paperwork Reduction Act Notice, see instructions.

\*\* ATCH 3

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6	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
_	a 1 C 1	- balance oncess	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ng			
	2		cash investments	219,049.	83,582.	83,582.
	3	Accounts receivable ▶				
		Less allowance for doub	btful accounts ▶			
	4					-
		Less allowance for doul	btful accounts ▶			
	5					
	6		officers, directors, trustees, and other			
			ach schedule) (see instructions)			
	7		eceivable (attach schedule)			-
	•		btful accounts >			
	8	Inventories for sale or us				
Assets	9		e			
SS	-					
⋖			e government obligations (attach schedule).		· <del></del> -	<del></del>
			stock (attach schedule)		<del></del>	
	11	Investments - corporate Investments - land, buildings	bonds (attach schedule)			
		and equipment basis Less accumulated deprecia (attach schedule)				
	12	•	loans			
	13	<b>5 5</b>	ich schedule)			1.0.8
		Land, buildings, and	▶			
		Less accumulated deprecia	tion 💺			
			<b>&gt;</b> )		·	
	16	Total assets (to be	completed by all filers - see the			
			age 1, item I)	219,049.	83,582.	83,582.
	17		ccrued expenses			
	18	0		· · · · · · · · · · · · · · · · · · ·		
S	19					
Liabilities		• • •	rs, trustees, and other disqualified persons	,	-	
ıbil			tes payable (attach schedule)			
Lia			tes payable (attach scriedule)			
		Other habilities (describe	·/			
	23	Total liabilities (add line	s 17 through 22)			
			ow SFAS 117, check here ▶			
			24 through 26 and lines 30 and 31.			
S		•	-			
ŭ	24		• • • • • • • • • • • • • • • • • • • •			
ala	25			-		
or Fund Balances	20					
Ē			not follow SFAS 117, plete lines 27 through 31. ► X			
ř	27					
S	28		cipal, or current funds			
Net Assets			land, bldg , and equipment fund	219,049.	83,582.	
As			lated income, endowment, or other funds	219,049.	83,582.	
et			balances (see instructions)	215,045.	05,502.	
~			· 1	219,049.	83,582.	
Б			nges in Net Assets or Fund I		03,302.	
			alances at beginning of year - Part		must agree with	
•						219,049.
2	Entai	r amount from Dort L	l on prior year's return)			-135, 467.
		r amount from Part I, I				-135,467.
						02.500
_	Door	lines 1, 2, and 3				83,582.
5	Decr	eases not included in	line 2 (itemize) ▶ lances at end of year (line 4 minus l			02.500
<u>6</u>	rotal	net assets of fund ba	nances at end of year (line 4 minus l	ine 5) - Paπ II, column (b)	, line 30 6	83,582.

D	

Part IV	<b>Capital Gains</b>	and Losses for Tax on Inve	estment Income	(b) How		
(a) List and describe the kind(s) of property sold (e.g., real estate,					(c) Date acquired	(d) Date sold
2-story brick warehouse, or common stock, 200 shs. MLC Co )  SEE PART IV SCHEDULE					(mo , day, yr )	(mo , day, yr )
<u>1a SEE</u>	PART IV SCHE	DOLE		ļ		
_ <u>b</u>						
<u>c</u>				<u> </u>		
_d						
_e						<u> </u>
(e) Gro 	ss sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>				<u> </u>	<del></del>	
<u>b</u>					<u> </u>	
_C				<u> </u>		
<u>d</u>						
<u>e</u>			<u> </u>		<del></del>	
Comp	lete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69		Gains (Col (h) g	
(i) F M V	as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	col	(k), but not less t Losses (from co	
a						
b						
С						
d						
е						
2 Capital g	ain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		149,543.
Net short	t-term capital gain	or (loss) as defined in sections 12	,		<del></del>	<del> </del>
		t I, line 8, column (c) (see instr				
_		· · · · · · · · · · · · · · · · · · ·		3		0
Part V	Qualification L	Inder Section 4940(e) for Rec	duced Tax on Net Investment I	ncome		
Nas the fou	ındatıon liable for	leave this part blank the section 4942 tax on the distrib not qualify under section 4940(e)	outable amount of any year in the ba	ase period	32 _	Yes X No
			, see the instructions before making	any entri		
1 Lintoi tii	(a)	(b)	(c)	arry Chiri	(d)	
Base Calendar year i	period years or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2010	179,099.	217,206.		<del></del>	0.824558
	2009	159,263.	184,819.			0.861724
	2008	191,917.	258,279.			0.743061
	2007	242,085.	418,721.			0.578153
_	2006	129,651.	92,733.			1.398111
2 Total of	line 1, column (d)	, . <u></u>		2		4.405607
3 Average	distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
number	of years the found	dation has been in existence if less	than 5 years	3 _		0.881121
4 Enter th	e net value of non	charitable-use assets for 2011 fro	m Part X, line 5	4	···-	134,488.
5 Multiply	line 4 by line 3			5		118,500.
6 Enter 19	% of net investme			6		1,487.
7 Add line	s 5 and 6			7		119,987.
8 Enter qu If line 8 Part VI in	ualifying distribution is equal to or great ristructions	eater than line 7, check the box	n Part VI, line 1b, and complete t	8 hat part	using a 1% ta	274,488. x rate See th

Х

8 b

and addresses

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

**b** If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete

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

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Form	990-PF (2011) JEFFREY & DEBRA FEINSTEIN FOUNDATION 80-006	3654		Page 5
Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► LINDA KAO C/O ROCKDALE CAP. Telephone no. ► 908-688	-48	Ī5 <sup></sup>	
	Located at ▶650 LIBERTY AVE UNION, NEW JERSEY ZIP+4 ▶ 07083		- <b></b> -	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	- <i></i>	•	$\mathbf{II}$
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of			
	the foreign country			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	•		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		Х
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	•		
	were not corrected before the first day of the tax year beginning in 2011?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2011?			
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	2 b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2011)	3 Ь		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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?	4 b		X

b If "Yes," did the foundation receive any proceeds or have	e any net income attrib	outable to the transaction	on?	7Ь    Х
Part VIII Information About Officers, Directors and Contractors	, Trustees, Found	dation Managers,	Highly Paid Empl	oyees,
1 List all officers, directors, trustees, foundation m	nanagers and their	compensation (see	instructions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATTACHMENT 5		(	0	
			_	
2 Compensation of five highest-paid employees "NONE."	(other than thos	e included on lin	e 1 - see instructi	ons). If none, ente
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expense account,

NONE

Total number of other employees paid over \$50,000

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Form 990-PF (2011) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, 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 Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc NONE Summary of Program-Related Investments (see instructions) Part IX-B Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount NONE All other program-related investments. See instructions 3 NONE

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Total. Add lines 1 through 3.

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Pa	rt X Minimum Investment Return (All domestic foundations must complete this part Foreignsee instructions.)	gn foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1 b	136,536.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and	1d	136,536.
е	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	
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	136,536.
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	2,048.
		5	134,488.
6	Minimum investment return. Enter 5% of line 5	6	6,724.
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	6,724.
2 a	Tax on investment income for 2011 from Part VI, line 5 2a 1,487.		
b	Income tax for 2011 (This does not include the tax from Part VI) 2b		
	Add lines 2a and 2b	2c	1,487.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,487. 5,237.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	5,237.
6	Deduction from distributable amount (see instructions)	6	
7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	5,237.
Pa	rt XII Qualifying Distributions (see instructions)	<u> </u>	
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	274,488.
b	Program-related investments - total from Part IX-B	1b	
2	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	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	<del></del>
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	274,488.
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	1,487.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	273,001.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when call		
	qualifies for the section 4940(e) reduction of tax in those years	g ///	

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Form 990-PF (2011). Page 9 Part XIII Undistributed Income (see instructions) (b) (d) (c) (a) Corpus Years prior to 2010 2010 2011 Distributable amount for 2011 from Part XI, 5,237. Undistributed income, if any, as of the end of 2011 Enter amount for 2010 only Total for prior years 20 09 20 08 20 07 Excess distributions carryover, if any, to 2011 128,582 From 2006 . . . . . . 225,295 From 2007 . . . . . . 179,003. From 2008 . . . . . . 153,544 **d** From 2009 . . . . . . 174,360. From 2010 . . . . . . 860,784. Total of lines 3a through e . . . . . . . . . . . Qualifying distributions for 2011 from Part XII, 274,488. line 4 ▶ \$ 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) . . . . . . . . . . . -5,237. Applied to 2011 distributable amount 269,251. e 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: 1,130,035 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 . . . . . . . . . . . . Subtract line 6c from line 6b Taxable amount - see instructions Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see 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 128,582 applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2012. 1,001,453. Subtract lines 7 and 8 from line 6a . . . . . . . Analysis of line 9 10 225,295. a Excess from 2007 . . . 179,003. b Excess from 2008 . . . 153,544. c Excess from 2009 . . .

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d Excess from 2010 . . .

e Excess from 2011 . . .

174,360.

269,251.

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Pa	rt XIV Private Oper	ating Foundations (	see instructions and	d Part VII-A, question	n 9)	NC	OT APPLICABL
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private oper	atıng	-	-
	foundation, and the ruling	g is effective for 2011, e	nter the date of the ruling		. ▶		
b	Check box to indicate wh	ether the foundation is a	private operating found	ation described in section		4942(j)(3) or	r 4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years			(e) Total
	justed net income from Part	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008		(e) rotal
	I or the minimum investment return from Part X for each		, <u> </u>				
	year listed					1	
b	85% of line 2a						
c	Qualifying distributions from Part						
_	XII, line 4 for each year listed .						
d	Amounts included in line 2c not used directly for active conduct of exempt activities						.,
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line						
,	2d from line 2c				<u> </u>		
3	Complete 3a, b, or c for the alternative test relied upon						
а	"Assets" alternative test - enter						
	(1) Value of all assets						
	(2) Value of assets qualifying under section					ļ.	
	4942(j)(3)(B)(i)						·
b	"Endowment" alternative test- enter 2/3 of minimum invest-						
	ment return shown in Part X,						
	line 6 for each year listed						
С	"Support" alternative test - enter						
	(1) Total support other than gross investment income						
	(interest, dividends, rents,						
	payments on secunties loans (section 512(a)(5)),						
	or royalties)						
	(2) Support from general public and 5 or more						
	exempt organizations as provided in section 4942						
	(j)(3)(B)(III)	· · · - · · · - · · · · · · · · · ·					···
	(3) Largest amount of sup- port from an exempt organization						
	(4) Gross investment income						
Pa		ary Information (C		only if the found	ation had \$5	,000 or n	nore in assets
	at any time o	during the year - se	e instructions.)				
1	Information Regarding						
а	List any managers of before the close of any						y the foundation
	ATTACHME			***			
b	List any managers of					equally large	e portion of the
	ownership of a partner	ship or other entity) of	which the foundation	inas a 10% or greater	mieresi		
	NT / 70						
	N/A Information Regarding	a Cantribution Crant	Cift Loon Coholorek	in etc. Dressensu			
2		=		-			
	Check here ► X if t unsolicited requests for other conditions, comp	or funds If the found	ation makes gifts, gra	to preselected chari ints, etc (see instruct	table organizati ions) to individi	ions and duals or orga	oes not accept anizations under
	The name, address, a			n applications should b	e addressed		<del></del>
						=	
b	The form in which app	lications should be sul	omitted and information	on and materials they	should include		
	N/A						
С	Any submission deadli	ines					
	N/A	<del></del>			<del></del>		<del>,</del>
d	Any restrictions or li factors	mitations on awards,	, such as by geogra	apnical areas, charita	ible fields, kind	is of institu	utions, or other
	37 / 7						

Page **11** 

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Dur	ing the Year or Appr	roved for F	tuture Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
Recipient Name and address (home or business)  a Paid during the year SEE STATEMENT ATTACHED	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose or grant or contribution	- 273,563
Total				273,563
Total				

Page **12** 

ter gross amounts unless otherwise indicated	Unrel	ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a b					
b					
d					<del> </del>
e					
f					
g Fees and contracts from government agencies					·
Membership dues and assessments					
Interest on savings and temporary cash investments	·		14	27.	
Dividends and interest from securities			14		<u> </u>
Net rental income or (loss) from real estate					
a Debt-financed property					••••
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income			10	2 504	
Gain or (loss) from sales of assets other than inventory			18	-3,594.	
Net income or (loss) from special events			+		
Gross profit or (loss) from sales of inventory				· · · · · · ·	
Other revenue a					
<b>b</b>			+		
<u> </u>			+		
d			+		
e					
0.14.1.4.11.443.4814.3				-3 567	
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calc	ulations)				0 5 6 6
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ne No. Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ne No.  Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56°
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ne No. Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,567
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calconant XVI-B Relationship of Activities ne No.  Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56
Total. Add line 12, columns (b), (d), and (e) . e worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities ne No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56°
Total. Add line 12, columns (b), (d), and (e) .  e worksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities  ne No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ne No. Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ine No.  Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ine No. Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56°
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ine No.  Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56°
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ine No. Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56°
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ne No. Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56°
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ine No. Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56°
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ine No. Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities ine No. Explain below how each activities	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56°
ine No. Explain below how each activity	ulations) to the Ac	complishment of Ex	cempt Purp	oses e) of Part XVI-A contribu	-3,56

Part	XVII	Information Re Exempt Organ		nsfers To and Tran	sactio	ons and	I Relations	ships With Non	chari	table	)
				ngage in any of the fo						Yes	No
		• •	de (other than s	ection 501(c)(3) organ	ızatıons	) or in se	ection 527, re	elating to political			
	•	ations?	na foundation to :	a noncharitable exemp	t organiz	zation of					
			_		_				1a(1)		х
									1a(2)		Х
		ansactions									
(	1) Sale	es of assets to a no	ncharitable exem	pt organization					1b(1)		Х
				le exempt organization					1b(2)		Х
				issets					1b(3)		Х
									1b(4)		X
									1b(5)		X
				or fundraising solicitat					1b(6)		<u>^</u>
				s, other assets, or paid on the follow ."					1c	four m	
		•		, complete the follow es given by the report	-						
				ement, show in columi							
(a) Line		(b) Amount involved		ncharitable exempt organizati				rs, transactions, and shar			
<del></del>		N/A		· · ·		N/A	<del></del>				
									·		
				•							
				<u> </u>							
		<u>.</u>									
			·	<del></del>							
							"				
			ļ								
				liated with, or related				organizations	_		7
				ner than section 501(c)	(3)) or II	n section	5277	l	Ye	es X	J No
b li	"Yes,	" complete the follo		(h) Tuno of omone	-at-an			e) Description of relations	hin		
		(a) Name of organization		(b) Type of organiz	auon			J Description of relations			
				·				<del></del>			
									-		
							•	•			
•	Under	penalties of perjury, I declar	are that I have examine	ed this return, including accomp payer) is based on all informations	anying sch	edules and	statements, and to	the best of my knowledg	ge and b	elief, it	ıs true,
Sign	Loneci		11111	Cayer) is based on all illioning library	, a	Mary and the same of the same		May the IRS	discus	s this	retum
Here		Prr	1114	5/3/	2_ !	P PKES	9 TREAS		eparer	shown	
	Sign	ature of officer or trustee		Date / /	7	Title		(see instruction	s)? X	Yes	No
		Print/Type preparer's	s name	Preparen's signature	7		Date		PTIN		
Paid		David Eisi		1 7 7 2	<i>'</i>			Checkif		370	1Ω
Prepa	arer		WID EISIG,	CPA CPA			4/23/12	self-employed Firm's EIN ▶ 20-2			
Use (				HORNE AVE., SUI	TE 40	0		THITIS EIN > 20-2	3,31		
			+16377 1/			~					

Phone no 516-593-7700

11580

NY

VALLEY STREAM,

#### Schedule B.

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545-0047

2011

Name of the organization  JEFFREY & DEBRA FE	INSTEIN FOUNDATION	Employer identification number
		80-0063654
Organization type (check or	ıe)·	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
Note. Only a section 501(c)(instructions  General Rule  X For an organization	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General R  on filing Form 990, 990-EZ, or 990-PF that received, during the yea	
	y one contributor Complete Parts I and II	
Special Rules		
under sections 50	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % 9(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, and II	r, during the year, a contribution of
during the year, to	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that recental contributions of more than \$1,000 for use exclusively for religious poses, or the prevention of cruelty to children or animals. Complete	us, charitable, scientific, literary,
during the year, co not total to more t year for an <i>exclusi</i>	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that recentributions for use <i>exclusively</i> for religious, charitable, etc., purpos han \$1,000. If this box is checked, enter here the total contribution <i>vely</i> religious, charitable, etc., purpose. Do not complete any of the anization because it received nonexclusively religious, charitable, ear.	ses, but these contributions did ns that were received during the e parts unless the <b>General Rule</b> etc , contributions of \$5,000 or
990-EZ, or 990-PF), but it m	at is not covered by the General Rule and/or the Special Rules doe ust answer "No" on Part IV, line 2, of its Form 990, or check the bo 0-PF, to certify that it does not meet the filing requirements of Sche	ox on line H 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 JEFFREY & DEBRA FEINSTEIN FOUNDATION

Employer identification number 80-0063654

Part I	Contributors (see instructions) Use duplicate copies of Par	t I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	JEFFREY FEINSTEIN  11 GRACE LANE  OYSTER BAY COVE, NY 11771	\$153,343.	Person X Payroll X Noncash X  (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)

ame of organization JEFFRE	Y & DEBRA FEINSTEIN FOUNDATION	Employer identification number				
•		80-0063654				
art II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed.						
-	***					

	s of Part II if additional space is nee	aca.
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2,668 SHS BED BATH & BEYOND		
	\$\$	04/27/2011
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given .	(c) FMV (or estimate) (see instructions)	(d) Date received
	<b>\$</b>	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given  (b) Description of noncash property given  (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (d) FMV (or estimate) (see instructions)  (e) FMV (or estimate) (see instructions)  (f) FMV (or estimate) (see instructions)  (g) FMV (or estimate) (see instructions)  (h) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (d) FMV (or estimate) (see instructions)  (e) FMV (or estimate) (see instructions)  (f) FMV (or estimate) (see instructions)  (g) FMV (or estimate) (see instructions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Name of organization JEFFREY & DEBRA FEINSTEIN FOUNDATION Employer identification number 80-0063654 Part III. Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions) ▶\$ Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I

(5) 113113131 31 9112					
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee				

(a) Transfer of giff

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

JEFFREY & DEBRA FEINSTEIN FOUNDATION

80-0063654

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

Kınd of	Property		Desc	ription		or	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)	
149,750.	allowable	2,668 SHS B 207.			auj vasis		04/27/2011 149,543.	05/06/201
OTAL GAIN(	loss)		• • • • • • • • • • • • • • • • • • • •		•••••		149,543.	
						i	:	
							:	
			•					
								·
							•	
	o							
							:	

-	
	INVESTMENTS
	CASH
	TEMPORARY
	NO
	· INTEREST
	PART
	990PF,
	FORM

JEFFREY & DEBRA FEINSTEIN FOUNDATION

NET INVESTMENT INCOME	11. 14. 2.	27.
REVENUE AND EXPENSES PER BOOKS	11. 14. 2.	27.
		TOTAL
DESCRIPTION	BANK OF AMERICA INTEREST JPMORGAN INTEREST MORGAN STANLEY INTEREST	

	CHARITABLE PURPOSES	875.	875.
	ADJUSTED NET INCOME		
	NET INVESTMENT INCOME	875.	875.
II	REVENUE AND EXPENSES PER BOOKS	1,750.	1,750.
FORM 990PF, PART I - ACCOUNTING FEES			TOTALS
FORM 990PF, PART	DESCRIPTION	ACCOUNTING FEES	

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER BOOKS

DESCRIPTION

TAXES

9,880.

TOTALS

9,880.

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION NYS DEPT OF LAW

REVENUE AND EXPENSES PER BOOKS

S

TOTALS

CHARITABLE PURPOSES 50.

50.

EXPENSE ACCT AND OTHER ALLOWANCES	0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0	0	0
COMPENSATION	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR	PRESIDENT & TREAS.	SECRETARY	GRAND TOTALS
NAME AND ADDRESS	RICHARD FEINSTEIN 15 POUND HOLLOW ROAD OLD BROOKVILLE, NY 11545	JEFFREY FEINSTEIN 11 GRACE LANE OYSTER BAY COVE, NY 11771	DEBRA FEINSTEIN 11 GRACE LANE OYSTER BAY COVE, NY 11771	

4/17/2012

ATTACHMENT 5 PAGE 25

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

JEFFREY FEINSTEIN LEONARD FEINSTEIN

### SCHEDULE D • (Form 1041)

**Capital Gains and Losses** 

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

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

OMB No 1545-0092

2011

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

JEFFREY & DEBRA FEINSTEIN FOUNDATION

Employer identification number

80-0063654

	e: Form 5227 filers need to complete only Pa		Hald One Ve					
Par	Short-Term Capital Gains and Los (a) Description of property	(b) Date acquired	(c) Date sold		(e) Cost or other basis	(f) Gain or (loss) for		
	(Example 100 shares 7% preferred of "Z" Co)	(mo , day, yr )	(mo , day, yr )	(d) Sales price	(see instructions)	the entire year Subtract (e) from (d)		
1 a								
						<del> </del>		
b	Enter the short-term gain or (loss), if any, fi	rom Schedule D	)-1 line 1b		1ь	149,543.		
-	Enter the short term gam or (1888), if any, if	om conoddio B	1,					
2	Short-term capital gain or (loss) from Form	ıs 4684, 6252,	6781, and 882	4	2			
•	Net short-term gain or (loss) from partners	hine Coorners	tions and other	costatos or trusts	3			
3 4	Short-term capital loss carryover Enter							
•	Carryover Worksheet					( )		
5	Net short-term gain or (loss). Combine	lines 1a throug	gh 4 ın colum	n (f) Enter here and	d on line 13,	140 540		
Bar	column (3) on the back		Held More T		<u> ▶   5</u>	149,543.		
Ган	(a) Description of property	(b) Date acquired			(e) Cost or other basis	(f) Gain or (loss) for		
	(Example 100 shares 7% preferred of "Z" Co )	(mo , day, yr )	(mo , day, yr )	(d) Sales pnce	(see instructions)	the entire year Subtract (e) from (d)		
6a								
						-		
b	Enter the long-term gain or (loss), if any, from	om Schedule D	-1, line 6b		<u>6b</u>			
7	Long-term capital gain or (loss) from Form	s 2439, 4684.	6252, 6781, ar	nd 8824	7			
						**		
8	Net long-term gain or (loss) from partnersh	nips, S corporat	ions, and other	estates or trusts	8			
^	Capital agin distributions							
9	Capital gain distributions			• • • • • • • • • • • • • • • • • • • •	9	<del> </del>		
10	Gain from Form 4797, Part I							
11	Long-term capital loss carryover Enter t	the amount, if	any, from lir	ne 14 of the 2010	Capital Loss	<u></u>		
4.5	Carryover Worksheet					<u>(</u> )		
12	Net long-term gain or (loss). Combine lin							
For I	column (3) on the back							

Part III	Summary of Parts I and II	, , ,	eneficiaries'	(2) Est		(3) Total
3 Nets	Caution: Read the instructions before completing this part	(5)	ee instr )	or tru		149,543
	hort-term gain or (loss)	-				149,543
	ong-term gain or (loss):					
a lotal	for year			_		
		<b>-</b>				
5 Total	rate gain 14c net gain or (loss). Combine lines 13 and 14a 15					149,543
	e 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or For	m 000 T	Port I line 4a	A If lines 1	10 and 11	
	Part V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complet					
Part IV	Capital Loss Limitation					
	here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, I					
a The l	oss on line 15, column (3) or b \$3,000 loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, lin			إ إ	16 (	
ote: If the arryover W	loss on line 15, column (3), is more than \$3,000, <b>or</b> if Form 1041, page 1, lin <b>orksheet</b> in the instructions to figure your capital loss carryover	e 22 (or	Form 990-T, lin	ne 34), is a l	oss, comp	lete the Capital Loss
Part V	Tax Computation Using Maximum Capital Gains Rates					
	filers. Complete this part only if both lines 14a and 15 in column (2	) are da	ıns oran am	ount is ent	ered in F	Part I or Part II and
	entry on Form 1041, line 2b(2), and Form 1041, line 22, is more that			ount to one		are ror rare ir and
	kip this part and complete the Schedule D Tax Worksheet in the instruc					
	ne 14b, col (2) or line 14c, col (2) is more than zero, or					
	rm 1041, line 2b(1), and Form 4952, line 4g are more than zero					
orm 990-	T trusts. Complete this part only if both lines 14a and 15 are gair	is, or qu	alified divide	nds are in	cluded 11	n income in Part I
	0-T, and Form 990-T, line 34, is more than zero. Skip this part and co	mplete t	the <b>Schedule</b>	D Tax Wo	rksheet	in the instructions
	e 14b, col (2) or line 14c, col (2) is more than zero		- 	····-		
	taxable income from Form 1041, line 22 (or Form 990-T, line 34) .	17				
	the smaller of line 14a or 15 in column (2)					
	ot less than zero					
	the estate's or trust's qualified dividends					
	Form 1041, line 2b(2) (or enter the qualified					
	nds included in income in Part I of Form 990-T) 19		İ			
	ines 18 and 19				į	
	estate or trust is filing Form 4952, enter the					
	ınt from line 4g, otherwise, enter -0 ▶ 21					
	act line 21 from line 20 If zero or less, enter -0	22				
<b>3</b> Subtr	act line 22 from line 17 If zero or less, enter -0-	23				
	the smaller of the amount on line 17 or \$2,300 $\dots$	24				
	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		<del>-</del>			
	act line 25 from line 24	26				
	ne amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27	-			
8 Enter	the amount from line 26 (If line 26 is blank, enter -0-)	28				
9 Subti	act line 28 from line 27	29				
	oly line 29 by 15% ( 15)				30	
1 Figure the tax on the amount on line 23 Use the 2011 Tax Rate Schedule for Estates and Trusts						
(see t	he Schedule G instructions in the instructions for Form 1041)				31	
2 Add I	ines 30 and 31				32	
	e the tax on the amount on line 17. Use the 2011 Tax Rate Sch			d Tructo	32	
∍ riyur	e the tax on the amount on line 17. Use the 2011 tax Rate Sch	eaule 10	ıı ⊏siales and	u HUSIS		
1000	he Schedule Ginstructions in the instructions for Form 1041)				33	

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

2011

Name of estate or trust

JEFFREY & DEBRA FEINSTEIN FOUNDATION

Employer identification number 80-0063654

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
2,668 SHS BED BATH & BEYOND	04/27/2011	05/06/2011	149,750.	207.	- 149,543
· · · · · · · · · · · · · · · · · · ·					
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				:	

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

Schedule D-1 (Form 1041) 2011

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . . . . . . . . .

149,543.

Organization	A	mount	Purpose	
Long Island Head Injury 65 Austin Blvd Commack, NY 11725	\$	35,000	General	
My Sisters' Place One Water Street White Planns, NY 10601	\$	1,500	General	
Sunrise Day Camp 15 Neil Court Oceanside, NY 11572	\$	25,000	General	
JCC Of Greater Washington 6125 Montrose Road Rockville, MD 20852-4857	\$	1,000	General	
The Lustgarten Foundation 111 Stewart Avenue Bethpage, NY 11714	\$	1,000	General	
Bergen County YJCC 605 Pascack Rd Township of Washington, NJ 07676	\$	1,500	General	
Project Renewal 200 Varick St, 9th Fl New York, NY 10014	\$	2,500	General	
Sunrise Day Camp 15 Neil Court Oceanside, NY 11572	\$	3,203	General	
Feinstein Institute for Medical Research 125 Community Drive Great Neck, NY 11021	\$	25,000	General	
Friends Academy 270 Duck Pond Rd Locust Valley, NY 11560	\$	100,000	General	
Israel Children's Centers 3275 West Hillsboro Blvd, Suite 102 Deerfield Beach, FL 33442	\$	1,000	General	

Organization	A	mount	Purpose	
Long Island Children's Museum 11 Davis Ave Garden City, NY 11530	\$	10,000	General	
UJA Federation of New York 130 E 59th St New York, NY 10022	\$	30,000	General	
Feinstein Institute North Shore - LIJ -125 Community Drive Great Neck, NY 11021	\$	25,000	General	
Glen Oaks Philanthropic Fund 575 Madison Ave, #703 New York, NY 10022	\$	500	General	
New Museum of Contemporary Art 235 Bowery New York, NY 10002	\$	5,000	General	
IHAD - Plainfield Project c/o Rockdale Capital 650 Liberty Avenue Union, NJ 10013	\$	2,500	General	
JCC Of Greater Washington 6125 Montrose Road Rockville, MD 20852-4857	\$	1,000	General	
Temple Sinai of Roslyn 425 Roslyn Rd Roslyn Heights, NY 11577	\$	1,000	General	
Temple Sinai of Roslyn 425 Roslyn Rd Roslyn Heights, NY 11577	\$	500	General	
Temple Sinai of Roslyn 425 Roslyn Rd Roslyn Heights, NY 11577	\$	1,000	General	
Temple Sinai of Roslyn 425 Roslyn Rd Roslyn Heights, NY 11577	\$	360	General	
Total:	\$	273,563		