2949110002421

EXTENDED TO NOVEMBER 16, 2020 **Return of Private Foundation**

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

Form 990-PF

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service For calendar year 2019 or tax year beginning and ending A Employer identification number Name of foundation 81-7084477 EISENBERG FAMILY FOUNDATION minimerand street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number R EISENBERG 230 HOLLYWOOD CROSSING (212) 873-4919 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here LAWRENCE, NY 11559 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated X Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method X Cash If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here (Part I, column (d), must be on cash basis.) 43,578. ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome 150,000 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 42. 42. STATEMENT SCANNED JAN 0 6 2022 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 62 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross cales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 150,042 42. 42. Total, Add lines 1 through 11 0. 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 2 891. 891. 891. b Accounting fees 500. 500. c Other professional fees POSTMARK RECEIVED 17 Interest 18 Depreciation and depletioNOV 19 20 Occupancy 21 Travel, conferences, and meetings CINCINNATI STMT SERVICE CENTER 22 Printing and publications 75. 75. 0. 23 Other expenses 04232 24 Total operating and administrative 1,466. 1,466. 1,466 expenses. Add lines 13 through 23 125,000. 125,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 126,466. 1,466. 1,466. 125,000. Add lines 24 and 25 27 Subtract line 26 from line 12: 23,576. 3 Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) 0. c Adjusted net income (If negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

Part Ii Balance Sheets Attached schedules and amoun	ts in the description	Beginning of year		End of year			
Column should be for end-of-ye	ear amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
1, Cash - non-interest-bearing		20,002.	9,860.	9,860.			
2 Savings and temporary cash investments							
3 Accounts receivable ►			l				
Less: allowance for doubtful accounts							
4 Pledges receivable ▶							
Less: allowance for doubtful accounts							
5 Grants receivable							
6 Receivables due from officers, directors, trustees, a	and other						
disqualified persons	<u></u>						
7 Other notes and loans receivable	33,718.						
Less: allowance for doubtful accounts	0.	0.	33,718.	33,718.			
ន្ទ Inventories for sale or use	Ĺ						
9 Prepaid expenses and deferred charges	<u> </u>						
10a Investments - U.S. and state government obligation	ns						
b Investments - corporate stock	<u> </u>						
c Investments - corporate bonds	<u></u>						
11 Investments - land, buildings, and equipment basis							
Less accumulated depreciation							
12 Investments - mortgage loans	_						
13 Investments - other	<u> </u>						
14 Land, buildings, and equipment; basis							
Less accumulated depreciation							
15 Other assets (describe ►)						
16 Total assets (to be completed by all filers - see the							
instructions. Also, see page 1, item I)		20,002.	43,578.	43,578.			
17 Accounts payable and accrued expenses	_						
18 Grants payable	<u> </u>						
က္က 19 Deferred revenue	-						
Loans from officers, directors, trustees, and other disqualified and other disqualified Mortgages and other notes payable	d persons						
21 Mortgages and other notes payable	<u> </u> _						
→ 22 Other liabilities (describe ►							
		,					
23 Total liabilities (add lines 17 through 22)		0.	0.				
Foundations that follow FASB ASC 958, check her	re 🕨 🗀		Í				
and complete lines 24, 25, 29, and 30.			1				
24 Net assets without donor restrictions	-						
25 Net assets with donor restrictions			-				
Foundations that do not follow FASB ASC 958, ch	eck here ▶ X						
Net assets without donor restrictions Net assets with donor restrictions Foundations that do not follow FASB ASC 958, ch and complete lines 26 through 30. Capital stock, trust principal, or current funds		0.	0.	,			
	mont fund	0.1	- 0.				
Paid-in or capital surplus, or land, bldg., and equip		20,002.	43,578.				
29 Total net assets or fund balances	int, or other fullus	20,002.	43,578.				
Paid-in or capital surplus, or land, bldg., and equip Retained earnings, accumulated income, endowme Total net assets or fund balances Total net assets or fund balances	<u> </u> -	20,002.	±3,370.				
30 Total liabilities and net assets/fund balances		20,002.	43,578.				
	sets or Fund Roll		20/0/01				
Part III Analysis of Changes in Net As	sets or rund ban	ances					
1 Total net assets or fund balances at beginning of year - F	Part II, column (a), line 29	9					
(must agree with end-of-year figure reported on prior ye			11	20,002.			
2 Enter amount from Part I, line 27a	•		2	23,576.			
3 Other increases not included in line 2 (itemize)	_		3	0.			
4 Add lines 1, 2, and 3			4	43,578.			
5 Decreases not included in line 2 (itemize)			5	0.			
6 Total net assets or fund balances at end of year (line 4 π	ninus line 5) - Part II, coli	umn (b), line 29	6	43,578.			

	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)							(c) Da (mo.	te acquired , day, yr.)	(d) Date sold (mo., day, yr.)	
<u> 1a</u>					<u> </u>		-				
	ONE				╁						
<u>c</u>					╁						
e											
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		at or other basis expense of sale					Gain or (loss) lus (f) minus (
a	ļ			 							
<u>b</u>			<u></u>	 .						_ _	
d .	 										
e					_		_				
Complete only for assets show	ing gain in (column (h) and owned by t	he foundation	on 12/31/69.				(I) Gains	(Col. (h) gain	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		còl. (i			(k), but not less than -0-) or Losses (from col. (h))		
a											
b	1								<u>.</u>		
<u>c</u>	 								<u> </u>		
<u>d</u>	+										
<u>e</u>	Ь				╗		I				
Capital gain net income or (net o	capital loss)	If gain, also enter If (loss), enter -0-			<u>}</u>	2			<u> </u>		
Net short-term capital gain or (I if gain, also enter in Part I, line & If (loss), enter -0- in Part I, line	3, column (d		d (6):		\exists	2					
Rart V Qualification	Jnder S	ection 4940(e) for	Reduced	Tax on Net	Inve	stm	ent Inc	come		·	
For optional use by domestic priva							-			· · · · · · · · · · · · · · · · · · ·	
f section 4940(d)(2) applies, leave	thic part ble	ank									
, , , , , ,											
Was the foundation liable for the se				•	10d7					Yes X No	
f "Yes," the foundation doesn't qual Enter the appropriate amount in					ntries.						
(a)	1	(b)			(c)					(d) oution ratio	
Base periód years Calendar year (or tax year begini	ng (n)	Adjusted qualifying dist		Net value of no		rıtable			(col. (b) div	rided by col. (c))	
2018		10	0,000.			1	9,70	2.		5.075627	
2017											
2016										 _	
2015			· · · - ·							 -	
2014				<u> </u>							
2 Total of line 1, column (d)								2		5.075627	
3 Average distribution ratio for the	e 5-year bas	se period - divide the total c	on line 2 by 5.0	O, or by the numb	er of y	/ears		<u> </u>		<u> </u>	
the foundation has been in exist	-	•	•					_ 3		5.075627	
									i -		
4 Enter the net value of noncharita	able-use as:	sets for 2019 from Part X, I	ine 5					4		30,821.	
										156 426	
Multiply line 4 by line 3								5	<u> </u>	<u>156,436.</u>	
5 Enter 1% of net investment inco	me (1% of	Part I line 27h)						6		0.	
	(170 01	, 210/						<u> </u>			
7 Add lines 5 and 6								7		156,436.	
								i			
8 Enter qualifying distributions from	om Part XII,	line 4						8		125,000.	

	990-PF (2	2019) EISENBERG FAMILY FOUNDATION		81-	<u>70844</u>	<u>:77</u>		age 4
Pa	rt VI	Excise Tax Based on Investment Income (Section 4940)	(a), 4940(b), 4940(e), or 4	948 - :	see ins	truc	tions	<u>s)</u>
1a	Exempt o	pperating foundations described in section 4940(d)(2), check here 🕒 🔲 and en	iter "N/A" on line 1.	1 1				- 1
	Date of ru	uling or determination letter: (attach copy of letter if nece	essary-see instructions)	l				
b	Domestic	c foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1				0.
	of Part I,	line 27b		. 1				
C	All other	domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	of Part I, line 12, col. (b) ノ					لب
2	Tax under	er section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; oth	ers, enter -0-)	2				<u>0.</u>
3	Add lines	s 1 and 2		3				0.
4	Subtitle A	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; oth	hers, enter -0-)	4				0.
5	Tax base	d on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
6	Credits/P	ayments:	1 1					
а	2019 esti	imated tax payments and 2018 overpayment credited to 2019	6a 0.					i
b	Exempt for	oreign organizations - tax withheld at source	6b 0.	-				
C	Tax paid	with application for extension of time to file (Form 8868)	6c <u>0</u> .	- 1				- {
đ	Backup w	vithholding erroneously withheld	60 0.	-				ليا
7	Total cred	dits and payments. Add lines 6a through 6d		7				<u>0.</u>
8	Enter any	penalty for underpayment of estimated tax. Check here 💹 if Form 2220 is attac	ched	8				0.
9	Tax due.	If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9				0.
10	Overpayr	ment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	, -	10				
		amount of line 10 to be: Credited to 2020 estimated tax	Refunded >	11				
Pa	rt VII-A	Statements Regarding Activities						
1a	_	ne tax year, did the foundation attempt to influence any national, state, or local legisla	ation or did it participate or interven	e in		}	Yes	
	• •	ical campaign?			-	1a	_	<u>X</u>
þ		end more than \$100 during the year (either directly or indirectly) for political purpos		nition	 	1b		<u>X</u>
		swer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	f any materials published or		İ			
		ed by the foundation in connection with the activities.			-			
		oundation file Form 1120-POL for this year?			-	1c_		<u>X</u>
d		amount (if any) of tax on political expenditures (section 4955) imposed during the			1	}		- 1
		he foundation. > \$0 . (2) On foundation managers.		_				ŀ
е		reimbursement (if any) paid by the foundation during the year for political expendit s. \blacktriangleright \$	ure tax imposed on foundation					
2	_	foundation engaged in any activities that have not previously been reported to the IR	S?		ľ	2		X
_		attach a detailed description of the activities.			Ī		-	
3	Has the f	foundation made any changes, not previously reported to the IRS, in its governing in	estrument, articles of incorporation,	or	1			
	-	or other similar instruments? If "Yes," attach a conformed copy of the changes				3		<u>X</u>
		oundation have unrelated business gross income of \$1,000 or more during the year	?		,_	4a		<u>X</u>
	-	has it filed a tax return on Form 990-T for this year?		N	/A	4b	-	
5		re a liquidation, termination, dissolution, or substantial contraction during the year?			-	5		X
		attach the statement required by General Instruction T.				j		
6		equirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	her:		İ	ļ		
	-	guage in the governing instrument, or				ļ		
	-	te legislation that effectively amends the governing instrument so that no mandatory	directions that conflict with the state	e law].			
		n the governing instrument?				6		<u>X</u>
7	Did the fo	oundation have at least \$5,000 in assets at any time during the year? If "Yes," compl	lete Part II, col. (c), and Part XV		-	7	X	
8a	Enter the	e states to which the foundation reports or with which it is registered. See instruction	ns. ►					
b	If the ans	swer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or designate)					
	of each s	state as required by General Instruction G? If "No," attach explanation			{	86	X	
9	Is the for	undation claiming status as a private operating foundation within the meaning of sec	ction 4942(j)(3) or 4942(j)(5) for cal	endar				
	year 201	9 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," comp	plete Part XIV		Ĺ	9		X
10	Did any p	persons become substantial contributors during the tax year? If "Yes," attach a schedul	le listing their names and addresses	STMI		10	X	
					Forn	n 99 0)-PF	(2019)

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Form 990-PF (2019) EISENBERG FAMILY FOUNDA
Part VII-A Statements Regarding Activities (continued) EISENBERG FAMILY FOUNDATION

_	, journment,		Yes	No
	At a control of the second state of weather an advertible and a state of the second of		162	110
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		·	x
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	40	' ł	x
	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	Δ	 -
	Website address ► N/A	072	401	10
14			- <u>491</u>	
	Located at ► 230 HOLLYWOOD CROSSING, LAWRENCE, NY ZIP+4 ►11	229		_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	3.7	/ ⊅►	ш
	and enter the amount of tax-exempt interest received or accrued during the year		/A	<u> </u>
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	-	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
<u>n</u> -	foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		N/ 1	<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):	i		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		}	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			1
	a disqualified person?			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			Ī
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	İ		
	(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"	١ .	1	
	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		
	Organizations relying on a current notice regarding disaster assistance, check here		1	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			لنـــا
	before the first day of the tax year beginning in 2019?	_1c		<u>X</u> _
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 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?	İ.		
	If "Yes," list the years \blacktriangleright ,,,		1	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	_2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			ł
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			1
	during the year?		·	
b	If "Yes," did it have excess business holdings in 2019 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 Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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 2019?	4b	1	X

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equired (continu	ued)						
5a During the year, did the foundation pay or incur any amount to:					Yes	No			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No						
(2) Influence the outcome of any specific public election (see section 4955); or				İ	,				
any voter registration drive?	to carry only amounty or many		s X No						
(3) Provide a grant to an individual for travel, study, or other similar purposes?	>		s X No	- 1	ł				
(4) Provide a grant to an organization other than a charitable, etc., organization									
4945(d)(4)(A)? See instructions	1 dosonsed in socion	v _a	s X No						
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational numbers or fo			·					
	or coucational purposes, or it		s X No						
the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	dor the eventions described i		22 140	ļ					
	•	n negulations	N/A	5b					
section 53.4945 or in a current notice regarding disaster assistance? See instru				30					
Organizations relying on a current notice regarding disaster assistance, check h			j						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			. —		j				
expenditure responsibility for the grant?	1/	I/A Ye	s L No	ļ					
If "Yes," attach the statement required by Regulations section 53.4945-5(d).)					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		□						
a personal benefit contract?		Ye	s X No						
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	_6b		Х			
If "Yes" to 6b, file Form 8870.				ļ					
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No						
b If "Yes," did the foundation receive any proceeds or have any net income attribu		N/A	.7b						
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
excess parachute payment(s) during the year?			s X No						
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mar	nagers, Highly							
List all officers, directors, trustees, and foundation managers and the	oir componenties								
List all officers, directors, busitees, and foundation managers and ti	(b) Title, and average	(c) Compensation	(d) Contributions to	7	o) Evn	0200			
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	ad	e) Exp	other			
<u></u>	to position	`enter'-0-)	compensation	┼	<u>allow</u> ar	nces			
	TRUSTEE	l		1					
230 HOLLYWOOD CROSSING	2 00					•			
AWRENCE, NY 11559	3.00	0.	0.	<u>'</u>		0.			
AWRENCE EISENBERG	TRUSTEE			1					
308 NORTH MCADDEN PLACE			_			_			
LOS ANGELES, CA 90004	0.00	0.	0.	:-		0.			
	TRUSTEE	ļ.							
350 KENRIDGE STREET			_			_			
LAWRENCE, NY 11559	0.00	0.	0.	ч		0.			
	1 4 4	111015							
! Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	1 7	/_ \				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	a	(e) Exp	other			
	devoted to position		compensation	4	allowai	nces			
NONE									
				—					
				\bot					
				1					
				4_					
				1					
				1					

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

orm 990-PF (2019) EISENBERG FAMILY FOUNDATION	81-7	7084477	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NOI	NE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	pensation
NONE			
			
		ł	
			
Total number of others receiving over \$50,000 for professional services		<u> </u>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced,	formation such as the etc.	Expenses	
NOT APPLICABLE			
			0.
2			
3	 		
4			
DoublY D C			
Part IX-B Summary of Program-Related Investments	Land 0		
Describe the two largest program-related investments made by the foundation during the tax year on lines	i and 2.	Amount	
1 <u>N/A</u>			
	····		
^			
2			
	·		
All other program-related investments. See instructions.			
3			
<u> </u>			

Form **990-PF** (2019)

0.

Total. Add lines 1 through 3

Form 990-PF (2019) EISENBERG FAMILY FOUNDATION

Partix	winimum investment Return (All domestic foundations	s must complete this part. F	oreign foundations, see i	nstructions.)
1 Fajr mark	ket value of assets not used (or held for use) directly in carrying out charit	able, etc., purposes:		
a Average	monthly fair market value of securities		1a	14,431.
b Average	of monthly cash balances		1b	
c Fair mark	ket value of all other assets		1c	16,859.
d Total (ad	dd lines 1a, b, and c)		1d	31,290.
e Reductio	on claimed for blockage or other factors reported on lines 1a and			
1c (attac	ch detailed explanation)	1e	0.	
2 Acquisiti	ion indebtedness applicable to line 1 assets		2	0.
3 Subtract	line 2 from line 1d		3	_31,290.
4 Cash dee	emed held for charitable activities. Enter 1 1/2% of line 3 (for greater amou	ınt, see instructions)	4	469.
5 Net value	e of noncharitable-use assets. Subtract line 4 from line 3. Enter here and	5	30,821.	
6 Minimun	m investment return. Enter 5% of line 5		6	1,541.
Part XI∎	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating fo	undations and certain	
	foreign organizations, check here 🕨 🔛 and do not complete this pa			
1 Minimun	m investment return from Part X, line 6		1	1,541.
2a Tax on in	nvestment income for 2019 from Part VI, line 5	2a		
b Income t	tax for 2019. (This does not include the tax from Part VI.)	2b		
c Add lines	s 2a and 2b		2c	0.
3 Distribut	table amount before adjustments. Subtract line 2c from line 1		3	1,541.
4 Recoveri	ies of amounts treated as qualifying distributions		4	0.
5 Add lines	s 3 and 4		5	1,541.
6 Deductio	on from distributable amount (see instructions)		6	0.
7 Distribut	table amount as adjusted. Subtract line 6 from line 5. Enter here and on P	art XIII, line 1	7	1,541.
Part XIII	Qualifying Distributions (see instructions)			
[hionestern]] dadinying Diotributions (See Matrocions)			
1 Amounts	s paid (including administrative expenses) to accomplish charitable, etc., p	ourposes:		
a Expense	s, contributions, gifts, etc total from Part I, column (d), line 26		1a	125,000.
b Program	n-related investments - total from Part IX-B		1b	0.
2 Amounts	s paid to acquire assets used (or held for use) directly in carrying out char	itable, etc., purposes	2	
3 Amounts	s set aside for specific charitable projects that satisfy the:			
a Suitabilit	ty test (prior IRS approval required)		3a	
b Cash dis	stribution test (attach the required schedule)		3b	
4 Qualifyir	ng distributions. Add lines 1a through 3b. Enter here and on Part V, line 8	3; and Part XIII, line 4	4	125,000.
5 Foundate	ions that qualify under section 4940(e) for the reduced rate of tax on net in	nvestment		
income.	Enter 1% of Part I, line 27b		5	0.
6 Adjusted	d qualifying distributions. Subtract line 5 from line 4		6	125,000.
Note: TI	he amount on line 6 will be used in Part V, column (b), in subsequent year	s when calculating whether the	foundation qualifies for the	section
49	940(e) reduction of tax in those years			

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,	-			1,541.
line 7		· · · · · · · · · · · · · · · · · · ·		1,341,
2 Undistributed income, if any, as of the end of 2019			0.	
a Enter amount for 2018 only b Total for prior years:				
g rotal for prior years.	5-	0.	!	
3 Excess distributions carryover, if any, to 2019:				
a From 2014	ł			
b From 2015				
c From 2016				
d From 2017 e From 2018 99,015.				į
	99,015.		·	
f Total of lines 3a through e	33,013.		· · · · · · · · · · · · · · · · · · ·	
4 Qualifying distributions for 2019 from Part XII, line 4: ►\$ 125,000.				
			0.	
a Applied to 2018, but not more than line 2a			· ·	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			-	
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	<u> </u>			1,541.
d Applied to 2019 distributable amount	123,459.			1,541.
e Remaining amount distributed out of corpus	143,439.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	!			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	222,474.	<u> </u>		
b Prior years' undistributed income. Subtract			·	
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				-
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable	2			
amount - see instructions		0.		•
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			O.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				1
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	222,474.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				1
d Excess from 2018 99,015.	•	•	16 1 H	
e Excess from 2019 123, 459.				

dit (tv.) Supplementary information	(continuea)		- 	
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment	- 	
. Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year		Ì		
STERN COLLEGE FOR WOMAN		YESHIVA	CHARITABLE	
245 LEXINGTON AVENUE		UNIVERSITY	CONTRIBUTION	
NEW YORK, NY 10174				100,000.
			L	
AMERICAN FRIENDS OF YESHIVOT BNEI		OROT COLLEGE	CHARITABLE	
AKIVA		FOR GIRLS IN	CONTRIBUTION	
11 BROADWAY		ISRE	1	25 000
NEW YORK, NY 10004	 	 	 	25,000.
		1		
			1	
		}]	
			1	
			1	
		1	1	
			1	
		1	1	
	 	 		
			İ	
			1	
		J		
Total			<u>▶ 3a</u>	125,000.
Approved for future payment		1		
			1	
NONE			}	
2705.2				
			1	
		<u> </u>		
			i	
			1	
			1	
	 	 		
	1		1	
		}		
		1		
Total			▶ 3h	0

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)		
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt		
1 Program service revenue:	code	Amount	slon code	Amount	function income		
a							
b							
c			L				
d							
e							
f							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments			<u> </u>		42.		
4 Dividends and interest from securities							
5 Net rental income or (loss) from real estate:	<u>* · </u>		ļ	, ,) ,		
a Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal	1		1				
property							
7 Other investment income							
8 Gain or (loss) from sales of assets other		1					
than inventory							
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a							
b							
c	ļ			<u> </u>	<u> </u>		
d		·	ļ				
e			<u> </u>				
12 Subtotal. Add columns (b), (d), and (e)		0.	<u>'</u>	0.			
13 Total. Add line 12, columns (b), (d), and (e)				13 _	42.		
(See worksheet in line 13 instructions to verify calculations.)							
Part XVI-B Relationship of Activities to	the Acco	mplishment of Exe	empt	Purposes			
Line No. Explain below how each activity for which incor	ne ic reported	in column (a) of Part Y\/I-A	contri	huted importantly to the accor	nnlichment of		
the foundation's exempt purposes (other than t			COMM	buted importantly to the accor	inprignment of		
3 PROVIDE REVENUE FOR CHA			ONS				
J INOVIDE REVENUE FOR OUR							
				<u>-</u>			

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Form 990-PF (2019) EISENBERG FAMILY FOUNDATION 81-7084477

[Rart XVIII] Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

	Exempt Organ	izations					
1 Did the or	ganizatión directly or indi	rectly engage in any of the follow	ing with any other organization	described in section 501(c)	F- 3/5	Yes	No
		uzătions) or ın section 527, relatii				100	
		ation to a noncharitable exempt o					
					18(1)		X
(2) Other	assets				1a(2)		X
b. Other tran						٠,٠,٠	
		hla evemnt organization					X
(1) (00105	ou assets to a nunchanta	poberitable exempt exemption			1b(2)		X
(2) Fulci	liases ur assets muni a nui	os othes accets	• • • • • • • • • • • • • • • • •		10(2)		X
(3) Della	ar or racinges, equipment,	or other assers			1b(3)		X
							X
(5) Luan	s ur idail guarantees	mharahin ar fundraiana callaitati			10(6)		X
			malayana	(1c		X
C Sharing o	r raciliues, equipment, ma	illing lists, other asséts, or paid ei	mployees	ays show the fair market value of the good		l	
				in any transaction or sharing arrangement		E15,	
		other assets, or services received		in any transaction or sharing arrangement	2110W III		
(a) Line no.	(b) Amount involved	(c) Name of noncharitab		(d) Description of transfers, transactions, ar	nd aboring per		
(a) Line no.	(b) Amount involved		ne exempt organization	(u) bescription of transfers, transactions, at	to sharing arra	ngemen	
		. N/A		·			
		<u> </u>					
		-		<u> </u>			
				ļ			
							
							
							
			· 	 			
							
					:_		
							
					_		
			. 				
			·				
	<u>,</u>	1				_	
		<u> </u>		<u></u>			
		tly affiliated with, or related to, or					_
					Yes	X	No
	omplete the following sch			<u> </u>			
	(a) Name of org	ganization	(b) Type of organization	(c) Description of relation	nship		
	N/A						
-							
1				ements, and to the best of my knowledge	May the IRS d	iscuss ti	his
Sign	eller, it is true, correct and con	npiete. Declaration of preparer (other tha	in texpayer) is based on all information	on of which preparer has any knowledge.	return with the shown below:	prepare	er str.
Here			11/15/20	TRUSTEE	X Yes		No
Sigi	nature of officer or trustee		Date	Title			
	Print/Type preparer's na	ame Préparer's	signature ,	Date, / Check X if PTI	N		
	1	1/1/	1 01. A.	self- employed			
Paid	ROBERT N.	LANG 1//M	WHIST PURE		01224	781	
Preparer		ERT N LANG CPA	7 1 /	Firm's EIN ▶ 13-			
Use Only				THE SERVE SERVE			
•	Firm's address ▶ 1.2	50 CENTRAL PARE	C AVENUE	· · · · · · · · · · · · · · · · · · ·			
		NKERS, NY 10704	•	Phone no. 914-	713-0	1 ሰ ሰ	
	10	WILDLY, MI TOID.	<u> </u>	Tritotic no. 314-	Form 990		

Schedule B

(Form 990, 9904EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

EISENBERG FAMILY FOUNDATION

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2019

Name of the organization

Employer identification number

81-7084477

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Organization type (check one).													
Filers of:		Section	on:										
Form 990	or 990-EZ		501(c)() (enter number	r) organization								
			4947(a)(1) r	nonexempt char	itable trust no	t treated as	a private f	foundation					
			527 politica	al organization									
Form 990-PF			501(c)(3) exempt private foundation										
		X 4947(a)(1) nonexempt charitable trust treated as a private foundation											
			501(c)(3) ta	xable private for	undation								
	your organization is		•		-		eral Rule a	and a Spec	aal Rule. S	See instr	ructions.		
	For an organization property) from any	_				-	•		•		•	•	or
Special I	Rules												
	For an organization sections 509(a)(1) a any one contributor or (ii) Form 990-EZ,	and 170 r, durin	0(b)(1)(A)(vı), ng the year,	, that checked Se total contribution	chedule A (Fo	rm 990 or 99	0-EZ), Par	rt II, line 13	, 16a, or	16b, and	that red	ceived fro	om
	For an organization year, total contribution of cruelt	tions o	f more than	\$1,000 exclusiv	ely for religiou	ıs, charıtable							the
	For an organization year, contributions is checked, enter hipurpose. Don't con religious, charitable	exclus here the hplete a	ively for religions to tall contributes any of the p	gious, charitable ibutions that wei parts unless the	e, etc., purpose re received du General Rul e	es, but no su ring the year applies to th	ich contrit for an ex	outions tota x <i>clusively</i> re	aled more eligious, c	than \$1 charitabl	I,000. If t e, etc., onexclus	this box	the
but it mu	: An organization the ist answer "No" on at it doesn't meet th	Part IV	, line 2, of it	ts Form 990; or o	check the box	on line H of	ıts Form 9		,	•	•	•	

Name of organization

Employer identification number

EISENBERG FAMILY FOUNDATION

81-7084477

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LEA EISENBERG 400 OCEAN AVE LAWRENCE, NY 11559	\$ 70,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	, (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	LEON EISENBERG 400 OCEAN AVE LAWRENCE, NY 11559	\$80,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onnocash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

EISENBERG FAMILY FOUNDATION

81-7084477

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	ıf addıtıonal space ıs needed.	
(a) No. from Part I	(b) Description of noncash property given	(e) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Name of organization

Employer identification number

EISENBI	ERG FAMILY FOUNDATION		81-7084477	
Part III	Exclusively religious, charitable, etc., contribute	through (e) and the following line entry. haritable, etc., contributions of \$1,000 or less	on 501(c)(7), (8), or (10) that total more than \$1,000 for the year For organizations s for the year (Enter this Info once) \$	
(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, an	d ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I				
-	(e) Transfer of gift			
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee	

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE ·	(A REVE PER B	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
CITIBANK		42.	42.	42.
TOTAL TO PART I, LINE 3		42.	42.	42.
FORM 990-PF	ACCOUNTI	NG FEES	F 44-7-	STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED	
ACCOUNTING SERVICES	891.	891	89	1. 0.
TO FORM 990-PF, PG 1, LN 16B	891.	891	89	1. 0.
FORM 990-PF C	THER PROFES	SIONAL FEES		STATEMENT 3
FORM 990-PF C	(A) EXPENSES PER BOOKS	SIONAL FEES (B) NET INVEST- MENT INCOME		(D) CHARITABLE
	(A) EXPENSES	(B) NET INVEST- MENT INCOME	ADJUSTED NET INCOM	(D) CHARITABLE E PURPOSES
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED NET INCOM	(D) CHARITABLE E PURPOSES
DESCRIPTION	(A) EXPENSES PER BOOKS 500.	(B) NET INVEST- MENT INCOME	ADJUSTED NET INCOM	(D) CHARITABLE PURPOSES
DESCRIPTION PROFESSIONAL SERIVCES TO FORM 990-PF, PG 1, LN 16C	(A) EXPENSES PER BOOKS 500.	(B) NET INVEST- MENT INCOME 500	ADJUSTED NET INCOM 50 CONTRACTOR (C) ADJUSTED	CHARITABLE PURPOSES O. O. STATEMENT 4 (D) CHARITABLE
DESCRIPTION PROFESSIONAL SERIVCES TO FORM 990-PF, PG 1, LN 16C FORM 990-PF	(A) EXPENSES PER BOOKS 500. OTHER E (A) EXPENSES	(B) NET INVEST- MENT INCOME 500 EXPENSES (B) NET INVEST- MENT INCOME	ADJUSTED NET INCOM 50 CO ADJUSTED NET INCOM NET INCOM	CHARITABLE PURPOSES O. O. STATEMENT 4 (D) CHARITABLE

FORM '990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 5
NAME OF CONTRIBUTOR	ADDRESS	
LEA EISENBERG	400 OCEAN AVENUE LAWRENCE, NY 11559	