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# Form 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service

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

	endar year 2005, or tax year beginning		, and ending	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
<b>G</b> Che	eck all that apply   Initial return   Initi	al Return of a former p	· —		al return
	Amended return	Address	change Nam	e change	
Use t	he			Employer identification nu	mber
IRS lat	bel. THE MICHAEL AND SAMANTHA	HARARY FAMILY		20-3860503	
Otherw	, I I COMBINE TON, THO.		Ī	Telephone number (see the	instructions)
prin or typ	" ICAO MICHAEL HANAKI 033 EI	LBERON AVE.	]		
See Spe	cific ELBERON, NJ 07740		) <del>,</del>	If exemption application is	nending check here
Instruct				<ul><li>1 Foreign organizations, che</li></ul>	
H C	theck type of organization   X   Section 501	(c)(3) exempt private f		2 Foreign organizations mee	ليبيا
<b>n</b> C				here and attach computati	
	Section 4947(a)(1) nonexempt charitable t		private foundation	E If private foundation statu	
		ounting method X C	ash	under section 507(b)(1)(A	
	1 11 1	Other (specify)		F If the foundation is in a 60	
<u>► \$</u>		column (d) must be or	n cash basis.)	under section 507(b)(1)(B	), check here.
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investmen	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in	expenses per books	income	income	for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)				purposes
	_ (see the instructions))				(cash basis only)
• • • • • • • • • • • • • • • • • • • •	1 Contributions, gifts, grants, etc, received (att sch)	25,000.			
	2 Ck I if the foundn is not req to att Sch B				
	3 Interest on savings and temporary			1	
	cash investments	297.	297	'. 297.	
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
R	6a Net gain/(loss) from sale of assets not on line 10				
R E V	<b>b</b> Gross sales price for all				
	assets on line 6a 7 Capital gain net income (from Part IV, line 2)				
E N U	8 Net short-term capital gain				<u> </u>
	9 Income modifications				
E	10 a Gross sales less	,		***	
	allowances				
	b Less Cost of goods sold				
	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule).				<del></del>
	(and an action (and an action action)				
	12 Total. Add lines 1 through 11	25,297.	297	297.	<del> </del>
-	13 Compensation of officers, directors trustees, etc	0.	2.5		
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)			<del></del>	
Ď	<b>b</b> Accounting fees (attach sch)				<del> </del>
M					
O N	c Other prof fees (attach sch)		<del>REC</del>	EIVED	
O I STRAAA	17 Interest	<del></del>	<del></del>		
ŔŔ	18 Taxes (attach schedule)(see instr.)		0	0000	ļ
A A	19 Depreciation (attach sch) and depletion		& AUG	1 0 2010	
λ <u>κ</u> Εζ	20 Occupancy		<del>                                      </del>	<u> </u>	<del> </del>
j E	21 Travel, conferences, and meetings		005		
<b>€</b> A E	22 Printing and publications		OGE	DEN, UI	
⊖SN X	23 Other expenses (attach schedule)				
e≔ E	See Statement 1	398.			398.
CONTRACTOR OF STATES	24 Total operating and administrative				
S E S	expenses. Add lines 13 through 23	398.			398.
	25 Contributions, gifts, grants paid Part XV	43,697.			43,697.
$\Box$	26 Total expenses and disbursements.				
KAI.	Add lines 24 and 25	<u>44,</u> 095.	ļ. <u></u>	0.	44,095.
SCANNED	27 Subtract line 26 from line 12:	<b>-</b>			
4	a Excess of revenue over expenses and disbursements	-18,798.			
(S	b Net investment income (if negative, enter -0-).	10,750.	297		<del> </del>
X			23	297.	<del>                                     </del>
<b>O</b> :	C Adjusted net income (if negative, enter 0)		l		

Part	П	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
rait	<u>" 1</u>		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing	9,216.	25,023.	25,023.
	2	Savings and tempor	ary cash investments	34,605.		
	3	Accounts receivable	<b>►</b>			
		Less allowance for	doubtful accounts ►			
	4	Pledges receivable	<b>&gt;</b>			,
		Less allowance for	doubtful accounts ►			
	5	Grants receivable				
	6	Receivables due from officiency disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see the instructions).	_		
	7	Other notes and loans rec	eivable (attach sch) 🕨	-		
A		Less allowance for	doubtful accounts			
Š	8	Inventories for sale	or use			
A S E T	9	Prepaid expenses a	nd deferred charges		·	
Ś	10 a	a Investments – US obligations (attach s	and state government chedule)			
	ŀ	<b>b</b> Investments — corporate	stock (attach schedule)		·	
	(	c Investments — corporate	bonds (attach schedule)	·		
	11	Investments – land, equipment basis	buildings, and			
		Less accumulated deprec (attach schedule)	enation •			
	12	Investments - mort	gage loans			
	13	Investments - other	r (attach schedule)			
	14	Land, buildings, and e	equipment basis 🟲	and a second		
		Less accumulated deprec (attach schedule)	eration •			
	15	Other assets (descri	be •)			
	16	see instructions. Als	completed by all filers – co, see page 1, item l).	43,821.	25,023.	25,023.
누	17		nd accrued expenses			
À	18	Grants payable				
В	19	Deferred revenue				,
Ļ	20	•	tors, trustees, & other disqualified persons			'
+	21		s payable (attach schedule)			
- i	22	Other liabilities (desci	ribe			
E S	23	Total liabilities (add	l lines 17 through 22)	0.	0.	'
		Foundations that fo	llow SFAS 117, check here 24 through 26 and lines 30 and 31.			ı
ΝE	24	Unrestricted				
N F E U T N	25	Temporarily restricted	ed			
nı	26	Permanently restrict			-	
A B S A E A		Foundations that do and complete lines	o not follow SFAS 117, check here ► X 27 through 31.			
투닛	27	Capital stock, trust i	orincipal, or current funds			
5 N	28	, ,	, or land, building, and equipment fund			1
O E	29		ulated income, endowment, or other funds	43,821.	25,023.	1
RS	30	• •	fund balances (see the instructions)	43,821.	25,023.	1 ,
	31	Total liabilities and (see the instructions	net assets/fund balances	43,821.	25,023.	
Part	Ш	Analysis of Chan	iges in Net Assets or Fund Balance	es		
1	Tota end-	I net assets or fund b of-year figure reporte	alances at beginning of year – Part II, colu d on prior year's return)	ımn (a), line 30 (must a	gree with	43,821.
		r amount from Part I,			2	-18,798.
		increases not included in I			3	<u> </u>
		lines 1, 2, and 3			4	25,023.
		ases not included in line 2	(itemize)		5	
6	Tota	I net assets or fund b	alances at end of year (line 4 minus line 5)	- Part II, column (b), I	ine 30 <b>6</b>	25,023.

(a) List and describ	the kind(s) of property sold (e.g., ruse, or common stock, 200 shares ML	eal estate.	(b) How acqu P — Purcha D — Donatio	se (month, day, year)	(d) Date sold (month, day, year)
1a N/A	<del></del>		D Donack	m	
b	<u> </u>			<del></del>	
c		······································			
d					
e	· · · · · · · · · · · · · · · · · · ·		<del> </del>	<del></del>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b					
С					
đ					
e					
Complete only for assets show	ving gain in column (h) and owned by	the foundation on 12/31/69		(I) Gains (Coli	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an		gain minus column (I than -0-) or Losses (fi	
а					
b		· · · · · · · · · · · · · · · · · · ·			
C					
d					
e					
<ul><li>2 Capital gain net income or (ne</li><li>3 Net short-term capital gain or</li></ul>	et capital loss) If gain, also If (loss), ent (loss) as defined in sections 1222(5)	enter in Part I, line 7 er -0- in Part I, line 7 and (6)	-	2	
If gain, also enter in Part I, lin in Part I, lin	e 8, column (c) (see the instructions)	If (loss), enter -0-		3	
Part V Qualification Under	r Section 4940(e) for Reduce	d Tax on Net Investme	nt Incom	ie	
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable an alify under section 4940(e) Do not co in each column for each year, see th	mplete this part		Yes	X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asso	ets	<b>(d)</b> Distributior column (b) divided	
2008	126, 908.	98	,877.	-	1.283494
2007	116,345.		,863.		0.987121
2006	128,448.		,613.		1.845173
2005	88.		,430.		0.000510
2004					
2 Total of line 1, column (d)				2	4.116298
Average distribution ratio for t number of years the foundation	he 5-year base period — divide the to in has been in existence if less than 5	tal on line 2 by 5, or by the years		3	1.029075
4 Enter the net value of noncha	ritable-use assets for 2009 from Part	X, line 5	-	4	25,536.
5 Multiply line 4 by line 3				5	26,278.
6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6	3.
7 Add lines 5 and 6				7	26,281.
8 Enter qualifying distributions f	•			8	44,095.
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI,	line 1b, and complete that p	art using a		he (2000)

Forn	990-PF (2009) THE MICHAEL AND SAMANTHA HARARY FAMILY	<u> 20-</u> 3	3860!	503		P	age 4
Par		- see	the ins	structio	ons)		
1 8	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1						_
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)						
1	Domestic foundations that meet the section 4940(e) requirements in Part V,	-	1				<u>3.</u>
	check here ► X and enter 1% of Part I, line 27b						
•	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)						i
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			-			_
	foundations only Others enter -0-)		2				<u>0.</u>
3	Add lines 1 and 2		3				3.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0	)-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				<u>3.</u>
6	Credits/Payments						
	a 2009 estimated tax pmts and 2008 overpayment credited to 2009  6 a  Exempt foreign organizations — tax withheld at source  6 b						
	2.000,000,000,000						
	Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  6d						
	Total credits and payments Add lines 6a through 6d		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached		8				<del>- • ·</del>
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>&gt;</b>	9				3.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10				<del></del>
11	_ ```	▶	11				
	t VII-A   Statements Regarding Activities						
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	14				Yes	No
' '	participate or intervene in any political campaign?				1 a		Х
ı	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?				1 b		x
	·		hl.ab.a.	,			<del>                                     </del>
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any material or distributed by the foundation in connection with the activities	us pu	biisned	'			
	Did the foundation file Form 1120-POL for this year?				1 c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				$\Box$		
	(1) On the foundation   \$ 0. (2) On foundation managers  \$ \$			0.			
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax improundation managers.   \$\bigs \\$ \$ 0.	osea	on				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		х
_	If 'Yes,' attach a detailed description of the activities			-	-		
_	·	_Ll	_				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	rticies es	5	-	3		x
4 8	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		Х
	o If 'Yes,' has it filed a tax return on Form 990-T for this year?				4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If 'Yes,' attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						ļ
	By language in the governing instrument, or						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions t	hat co	onflict			-	
	with the state law remain in the governing instrument?			_	6		<u>X</u>
7				-	7	<u>X</u>	<u> </u>
8 8	a Enter the states to which the foundation reports or with which it is registered (see the instructions).  NJ	_		-			
ı	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
	(or designate) of each state as required by General Instruction G <sup>2</sup> If 'No,' attach explanation			  -	8ь	<u> X</u>	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' con	(3) or nplet	4942( e <i>Part</i>	)(5)	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing to and addresses	heır r	names		10		x

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Part	VII-A Statements Regarding Activities Continued					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		<u>X</u>
	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		Х
	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address  N/A	n applica	ation?	13	Х	
	The books are in care of ► MICHAEL HARARY Telephon	e no ►				
	Located at ► 893 ELBERON AVENUE ELBERON NJ ZIP + 4 ►		740			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			N/A	>	
	and enter the amount of tax-exempt interest received or accrued during the year	<b>&gt;</b>	15			N/A
	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			—г		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			<b></b>	Yes	No
	During the year did the foundation (either directly or indirectly).		reel			
	(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?	Yes	XNo			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No		- 1	
	(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)?	Yes	XNo			
	(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)	Yes	XNo			
b	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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 the instruct	ons)?	_	 1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	•	• 🔲			,
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts that were not corrected before the first day of the tax year beginning in 2009?	,		1 c		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 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes	XNo			
	If 'Yes,' list the years ► 20 , 20 , 20 , 20					
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942	2(a)(2) (a)(2) to		2b	N	/ 7\
	all years listed, answer 'No' and attach statement — see the instructions)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	hore		20	- 14/	
·	► 20, 20, 20	nere				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
b	If 'Yes,' did it have excess business holdings in 2009 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 approve 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 2009)	ed		3b	N	/A
4a	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 2009?			4ь		<u>X</u>
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Part VII-B   Statements Regarding Activit		n 4720 May Be Req	uirea (continuea)		
5a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt	•	on (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific put	elic election (see section	n 4955), or to carry			
on, directly or indirectly, any voter registra  (3) Provide a grant to an individual for travel,		purposes?	Yes X	1 1 1	
(4) Provide a grant to an organization other t in section 509(a)(1), (2), or (3), or section	han a charitable, etc, o i 4940(d)(2)? (see instr	rganization described uctions)	Yes X	No	,
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientifi on of cruelty to children	c, literary, or or animals?	☐ Yes X	No	1
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	ırdıng dısaster assıstan	ce check here	▶ [	]	N/A
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg	sibility for the grant?	•	N/A Yes	] No	
6a Did the foundation, during the year, receive a on a personal benefit contract?	ny funds, directly or inc	lirectly, to pay premium:	s Yes X	]No	
<b>b</b> Did the foundation, during the year, pay prem	iums, directly or indirec	ctly, on a personal bene		6b	Х
If 'Yes' to 6b, file Form 8870  7a At any time during the tax year, was the found	dation a party to a prob	nibited tax shelter transa	action? Yes X	]No	:
<b>b</b> If yes, did the foundation receive any proceed				7b	N/A
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	Employee	s,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	<b>_</b>	
(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		se account, owances
MICHAEL HARARY	President	0.	0.		0.
893 ELBERON AVENUE	0				
ELBERON, NJ 07740					
_SAMANTHA HARARY	Secretary	0.	0.		0.
893 ELBERON AVENUE	0			:	
ELBERON, NJ 07740					
_LEON_HARARY	Vice Preside	0.	0.		0.
893 ELBERON AVENUE	0				
ELBERON, NJ 07740					
2 Compensation of five highest-paid employee				nter 'NONE.	1
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		se account, owances
None					
				<u> </u>	
Total number of other employees paid over \$50,000	TEFAD3061	07/06/09			0-PF (2009)

Form 990-PF (2009) THE MICHAEL AND SAMANTHA HARARY FAMILY 20-386	
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 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	ı
Total number of others receiving over \$50,000 for professional services ▶	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N/A</u>	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  1 N/A	Amount
2	
All other program-related investments. See instructions	
Total. Add lines 1 through 3	0.

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Par	<b>t X</b>   <b>Minimum Investment Return</b> (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
		П	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: Average monthly fair market value of securities	1 a	
	Average of monthly cash balances	1 b	25,925.
	Fair market value of all other assets (see instructions)	1 c	
	I Total (add lines 1a, b, and c)	1d	25,925.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c		.,
	(attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	25,925.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	389.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	25,536.
6	Minimum investment return. Enter 5% of line 5	6	1,277.
Par	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	ating	foundations
	and certain foreign organizations check here ▶ ☐ and do not complete this pa	rt.)	
1	Minimum investment return from Part X, line 6	1	1,277.
2 8	Tax on investment income for 2009 from Part VI, line 5		
ŀ	Income tax for 2009 (This does not include the tax from Part VI)	]	
•	: Add lines 2a and 2b	2c	3.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,274.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,274.
6	Deduction from distributable amount (see instructions) .	6	
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,274.
Pai	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	, ]	44,095.
	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	44,055.
	Program-related investments — total from Part IX-B	2	<del></del>
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	-	<del> </del>
3	Amounts set aside for specific charitable projects that satisfy the suitability test (prior IRS approval required)	3a	
t	Cash distribution test (attach the required schedule).	3ь	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	44,095.
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	3.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	44,092.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

BAA

Form **990-PF** (2009)

### Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	( <b>b)</b> Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
Distributable amount for 2009 from Part XI, line 7				1,274.
2 Undistributed income, if any, as of the end of 2009				1,214,
a Enter amount for 2008 only			0.	
<b>b</b> Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009			-	
<b>a</b> From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006 123, 821.				
<b>d</b> From 2007 110, 544.				
e From 2008 121, 996.				
f Total of lines 3a through e	356,361.			'
4 Qualifying distributions for 2009 from Part				r
XII, line 4 ► \$44,095.				1
a Applied to 2008, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years				1
(Election required – see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			<u> </u>
<b>d</b> Applied to 2009 distributable amount	, ., ., ., .,			1,274.
e Remaining amount distributed out of corpus	42,821.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
(,,,				
6 Enter the net total of each column as				
indicated below:	. 200 100			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	399,182.			
<b>b</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		0.		í
4942(a) tax has been previously assessed		0.		<del></del>
d Subtract line 6c from line 6b Taxable		0.		,
amount — see instructions.		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a Taxable amount — see instructions			0.	
line 2a Taxable amount — See instructions			<u> </u>	
f Undistributed income for 2009 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2010.				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.	'		
, ,				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	399,182.			
10 Analysis of line 9				
a Excess from 2005				
<b>b</b> Excess from 2006 123, 821.				
<b>c</b> Excess from 2007 110, 544.				
<b>d</b> Excess from 2008 121, 996.				
e Excess from 2009 42,821.		L		Form 000 PE (2000)

Form 990-PF (2009) THE MICHAEL AND				20-386050	3 Page <b>10</b>		
Part XIV   Private Operating Foundation					N/A		
1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling							
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(3)							
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2009	<b>(b)</b> 2008	Prior 3 years (c) 2007	<b>(d)</b> 2006	(e) Total		
<b>b</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							
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>							
3 Complete 3a, b, or c for the alternative test relied upon							
a 'Assets' alternative test — enter							
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>							
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed							
c 'Support' alternative test — enter							
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>							
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III).							
(3) Largest amount of support from an exempt organization							
(4) Gross investment income			L		•		
Part XV Supplementary Information assets at any time during th	(Complete this <u>e year – see in</u>	structions.)	organization ha	id \$5,000 or moi	re in		
Information Regarding Foundation Managers as List any managers of the foundation who is close of any tax year (but only if they have MICHAEL HARARY	ave contributed m	ore than 2% of the t than \$5,000) (See	otal contributions resection 507(d)(2))	eceived by the foun	dation before the		
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the None	own 10% or more of foundation has a 1	f the stock of a corp 0% or greater intere	poration (or an equa est	ally large portion of	the ownership of		
2 Information Regarding Contribution, Gran Check here ▶ ☐ if the foundation only n requests for funds. If the foundation make complete items 2a, b, c, and d	nakes contributions s gifts, grants, etc,	to preselected char (see instructions) to	ritable organizations o individuals or orga	anizations under oth			
a The name, address, and telephone number	er of the person to	whom applications s	should be addressed	d <sup>.</sup>			
Soo Statement 2							
See Statement 2  b The form in which applications should be s	submitted and infor	mation and materia	Is they should inclu	de			
See Statement for Line 2a							
c Any submission deadlines.		<del></del>					
See Statement for Line 2a							
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charital	ble fields, kinds of i	nstitutions, or other	factors		
See Statement for Line 2a							

3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	it	
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)	substantial contributor	recipient		
a Paid during the year See Statement 3	Substantial contributor			
Total		<u> </u>	► 3a	43,697.
<b>b</b> Approved for future payment				
Total			► 3b	<u> </u>

### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		Unrelate	ed business income	Excluded	by section 512, 513, or 514		
	-		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	(e) Related or exempt function income (see the instructions)
	-	am service revenue			code		(see the instructions)
					<del>                                     </del>		
f							
gĪ	Fees	and contracts from government agencies					
2 1	Memt	pership dues and assessments		<u> </u>	ļl		
		t on savings and temporary cash investments			14	297.	<del></del>
		ends and interest from securities		· · · · · · · · · · · · · · · · · · ·	-		
		ental income or (loss) from real estate	-			-	
		financed property	<u> </u>		-		
		ebt-financed property stal income or (loss) from personal property			<del> </del>		<del></del>
		investment income		· · · · · · · · · · · · · · · · · · ·			
		(loss) from sales of assets other than inventory					<del> </del>
		ncome or (loss) from special events					<u> </u>
		profit or (loss) from sales of inventory					
		revenue					
а							
b_							
d_							
е_				<del> </del>	ļ	007	
		otal Add columns (b), (d), and (e)				297.	297.
		Add line 12, columns (b), (d), and (e)	. la la#. ama X			13	291.
		heet in the instructions for line 13 to verify ca					
Part .	<u>XVI-</u>	B Relationship of Activities to the	Accompl	ishment of Exemp	t Purpo	ses	
Line		Explain below how each activity for which in accomplishment of the foundation's exempt	come is repo purposes (o	orted in column (e) of F ther than by providing f	Part XVI-A funds for s	contributed important such purposes). (See the	y to the ne instructions.)
N/	/A						
				- <del></del>		··	
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BAA			TEE	A0502L 07/06/09			Form <b>990-PF</b> (2009)

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

<ul> <li>Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</li> <li>a Transfers from the reporting foundation to a noncharitable exempt organization of.</li> <li>(1) Cash</li> <li>(2) Other assets</li> </ul>									1a (1) 1a (2)	Yes	No X X		
		transactions	0.2.000	charitable e	vemnt organ	uzation					1 b (1)		X
	` '	ales of assets t urchases of ass					ation				1 b (1)		X
	• • •	ental of facilitie				or organiza	2001				1 b (3)		X
	(4) R	eimbursement a	arranger	ments							1 b (4)		X
	(5) Loans or loan guarantees												Χ
	(6) Performance of services or membership or fundraising solicitations										1 b (6)		<u>X</u>
	<b>c</b> Sharı	ng of facilities,	equipme	ent, mailing	lists, other a	assets, or	paid employ	ees			1 c		X
	the q	oods, other ass	ets, or s	ervices give	n by the rep	orting fou	ndation If the	ne founda	ation received	always show the fair i d less than fair marke s, or services receive	et value in	ue of	
_	) Line no	(b) Amount in	volved	(c) Nam	e of noncharital	ble exempt or	rganization	(d)	Description of tr	ransfers, transactions, and	sharing arrar	ngement	S
N.	/A			 	···								
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	descr	foundation dire bed in section s,' complete the	501(c) o	of the Code	(other than s	or related section 50	to, one or n 1(c)(3)) or in	nore tax- section	exempt orgai 527?	nizations	Yes	X	No
		(a) Name of or				) Type of	organızatıon			(c) Description of rel	ationship		
<u>N</u>	/A												
_					+								
					1			-					<del></del>
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	Under pen- complete	alties of perjury, I de Declaration of prepar	clare that I er (other th	have examined han taxpayer or	this return, inclifiduciary) is bas	uding accomp led on all info	oanying schedule rmation of which		1.1	best of my knowledge and	pelief, it is true	e, correc	ct, and
s								104/2010	_ —				
SIGN	Sign	gnature of officer or trustee Date Title						<del></del>	1- 1111		<del></del>		
Ħ	Paid Pre-	Preparer's signature	Franl	k Musaco	of this	Mus	suhi	Date 7	27/10	Check if (See	arer's Identify Signature in 0717098	the inst	nber rs)
E	parer's Use	Firm's name (or yours if self			ı & Rubi				1 -	EIN ► 13-38	45495		
	Only	employed), address, and			ue 12th						0) 447	000	
 B/		ZIP code	New :	IOLK, NY	10016-	0211	<del></del>		<del> </del>	Phone no ► (21	.2) 447 Form <b>99</b>		
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#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### Schedule of Contributors

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

OMB No 1545-0047

**2009** 

Employer identification number Name of the organization THE MICHAEL AND SAMANTHA HARARY FAMILY FOUNDATION, 20-3860503 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF |X|501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule -X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II) Special Rules -For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year. Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org	anization [CHAEL AND SAMANTHA HARARY FAMILY		r identification number 860503
	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MICHAEL HARARY  893 ELBERON AVENUE  LONG BRANCH, NJ 07740	\$25,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
BAA	TEEA0702L 06/23/09	Schedule <b>B</b> (Form 990	0, 990-EZ, or 990-PF) (2009)

(a)
No. from Part I

Description of noncash property given

\$

FMV (or estimate) (see instructions)

\$

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

(d) Date received

(c) FMV (or estimate) (see instructions)

(b)
Description of noncash property given

(a) No. from Part I

2009			Staten				Page 1
Client MSHARFF	THE MICHAEL	20-3860503					
7/27/10							03.49PI
Statement 1 Form 990-PF, Part I, Line 23 Other Expenses							
			(a) penses Books	(b) Net Investment Income	(c) Adjusted Net Income		(d) ritable irposes
BANK FEES FILING FEES	Total	\$ \$	327. 71. 398.	\$ 0.	\$ 0.	\$	327. 71. 398.

## Statement 2 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

MICHAEL & SAMANTHA HARARY FAMILY FNDTH MICHAEL HARARY

Name: Care Of:

893 ELBERON AVENUE

Street Address: City, State, Zip Code: Telephone:

ELBERON, NJ 07740

Form and Content:

NO SPECIFIC FORMS REQUIRED

Submission Deadlines:

NONE NONE

Restrictions on Awards:

Statement 3 Form 990-PF, Part XV, Line 3a **Recipient Paid During the Year** 

•				
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	 Amount
OHEL ELIAHU P O BOX 63 DEAL, NJ 07723	NONE	NFP	Religious	\$ 1,800.
OHEL YAACOV CONGREGATION P O BOX 225 DEAL, NJ 07723	NONE	NFP	RELIGIOUS	5,805.
MAGEN DAVID YESHIVA DEAL ROAD OCEAN, NJ 07712	NONE	NFP	EDUCATIONAL	8,200.
JEWISH FED OF GRTR MNMTH CTY OCEAN, NJ 07712	NONE	NFP	CHARITY	500.
EDWARD SAFRA SYNAGOGUE 75 HATHAWAY AVENUE DEAL, NJ 07723	NONE	NFP	RELIGIOUS	1,000.

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7/27/10

# Federal Statements THE MICHAEL AND SAMANTHA HARARY FAMILY FOUNDATION, INC.

Page 2

**Client MSHARFF** 

20-3860503

03 49PM

Statement 3 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
SEPHARDIC BIKUR HOLIM 425 KINGS HIGHWAY BROOKLYN, NY 11223	NONE	NFP	CHARITY	\$ 1,950.
CHAI LIFELINE 151 WEST 30TH STREET NYC, NY 10001	NONE	NFP	RELIGIOUS	1,800.
CHABAD OF THE SHORE 620 OCEAN AVE LONG BRANCH, NJ 07740	NONE	NFP	RELIGIOUS	1,200.
OHEL SIMCHA CONGREGATION 295 PARK AVE LONG BRANCH, NJ 07740	NONE	NFP	RELIGIOUS	500.
EZRAT ISRAEL 806 EASTERN PARKWAY BROOKLYN, NY 11213	NONE	NFP	CHARITY	1,800.
MAGEN ISRAEL 1815 EAST 3RD STREET BROOKLYN, NY 11223	NONE	NFP	CHARITY	2,550.
ONE FAMILY FUND 300 FRANK WEAST BURR BLVD 68 TEANECK, NJ 07666	NONE	NFP	CHARITY	1,500.
MATTAN BESSETER 1924 EAST 7th STREET BROOKLYN, NY 11223	NONE	NFP	RELIGIOUS	-250.
REACH FOR THE STARS 3300 KINGS HIGHWAY BROOKLYN, NY 11234	NONE	NFP	CHARITY	5,000.
THE EZRA ABRAHAM TO LIFE FOUNDATION 58 OLD FARM ROAD OAKHURST, NJ 07755	NONE	NFP	RELIGIOUS	52.
GESHER YEHUDAH 49 AVENUE T BROOKLYN, NY 11223	NONE	NFP	EDUCATIONAL	152.
YAD ELIEZER PO BOX 41074 , Israel	NONE	NFP	CHARITY	1,200.

	Federal Sta	Page 3		
Client MSHARFF 7/27/10	FOUNDATIO	on, INC.		<b>20-386050</b> 3
Statement 3 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
ALLEGRA FRANCO SEPHRDIC TEACHERS COLLEGE 1061 OCEAN PARKWAY BROOKLYN, NY 11230	NONE	NFP	EDUCATIONAL	\$ 1,801.
REFUAH RESOURCES 5904 13th AVENUE BROOKLYN, NY 11219	NONE	NFP	CHARITY	900.
CITYMEALS-ON-WHEELS 355 LEXINGTON AVE NEW YORK, NY 10017	NONE	NFP	CHARITY	1,184.
AISHAL SHABBAT 1010 AVENUE N BROOKLYN, NY 11230	NONE	NFP	RELIGIOUS	1,000
BROOKDALE SCHOOL 765 NEWMAN SPRINGS ROAD LINCROFT, NJ 07738	NONE	NFP	EDUCATIONAL	500.
ISRAEL CANCER RESEARCH FUND 1290 6th AVENUE NEW YORK, NY 10104	NONE	NFP	CHARITY	1,800.
SEAD C/O DARTMOUTH COLLEGE HANOVER, NH 03755	NONE	NFP	EDUCATIONAL	252
HISTADRUT 29 HAMERED STREET TEL AVIV, Israel	NONE	NFP	CHARITY	1,000

NFP

CHARITY

OHR HASHALOM C/O R REFAELI 24 SHIREHALL CLOSE LONDON, United Kingdom

NONE

Total \$ 43,697.

501.

# Form **8868** (Rev April 2009)

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of the Treasury

File a separate application for each return.

internal Revenue	Service	The a Separate application for each retain.		_		
<ul><li>If you are</li></ul>	e filing for an Automatic 3-Mon	th Extension, complete only Part I and check this bo	ox ,		<u>► X</u>	
<ul><li>If you are</li></ul>	e filing for an Additional (Not A	utomatic) 3-Month Extension, complete only Part II	(on page 2 of th	ıs form).		
Do not comp	<i>plete Part II unless</i> you have alr	eady been granted an automatic 3-month extension	on a previously f	filed Form 8868		
Part I	Automatic 3-Month Exter	sion of Time. Only submit original (no cop	oies needed).			
A corporation	n required to file Form 990-T an	d requesting an automatic 6-month extension — che	eck this box and	complete Part I only	▶ 🗌	
All other corp income tax r		s), partnerships, REMICS, and trusts must use Form	n 7004 to request	t an extension of time	to file	
the additiona	al (not automatic) 3-month exter	electronically file Form 8868 if you want a 3-month a tion required to file Form 990-T). However, you can ision or (2) you file Forms 990-BL, 6069, or 8870, gr illy completed and signed page 2 (Part II) of Form 86 or e-file for Charities & Nonprofits.	ouo returns, or a	composite or consolic	dated	
	Name of Exempt Organization			Employer identification nur	nber	
Type or	THE MICHAEL AND SAM	ANTHA HARARY FAMILY				
print	FOUNDATION, INC.			20-3860503		
File by the due date for	Number, street, and room or suite number	er If a P O box, see instructions				
filing your return See	C/O MICHAEL HARARY	893 ELBERON AVE.				
instructions		ode For a foreign address, see instructions				
	ELBERON, NJ 07740					
Check type of	of return to be filed (file a separ	ate application for each return)				
☐ Form 990		Form 990-T (corporation)	Form 472	20		
Form 990		Form 990-T (section 401(a) or 408(a) trust)	Form 522			
Form 990		Form 990-T (trust other than above)	Form 606			
X Form 990		Form 1041-A	Form 887			
Telephone If the orga If this is for check this	for a Group Return, enter the ord s box . ▶ ☐ If it is for part of		(N) If	this is for the whole g		
	sion will cover					
•	•	ths for a corporation required to file Form 990-T) ex				
	8/15, 20_10_, to fill ension is for the organization's	e the exempt organization return for the organization return for:	n named above.			
► X	calendar year 20 09 or					
	tax year beginning	, 20 , and ending , 20				
	ax year is for less than 12 mont			hange in accounting p	eriod	
3a If this a nonrefu	pplication is for Form 990-BL, 9 indable credits. See instructions	90-PF, 990-T, 4720, or 6069, enter the tentative tax,		3a \$	0.	
<b>b</b> If this a made 1	pplication is for Form 990-PF or nclude any prior year overpaym	990-T, enter any refundable credits and estimated tent allowed as a credit	tax payments	3ь\$	0.	
deposit	with FTD coupon or, if required	3a. Include your payment with this form, or, if requiped by using EFTPS (Electronic Federal Tax Payment S	ired, System)	3c \$	0.	
Caution. If yo payment instr	ou are going to make an electro ructions	nic fund withdrawal with this Form 8868, see Form 8	453-EO and Forr	m 8879-EO for		
BAA For Priv	vacy Act and Paperwork Reduc	tion Act Notice, see instructions.	<del></del>	Form <b>8868</b> (Rev	4-2009)	