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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

For care	endar year 2005, or tax year beginning	, 2005,	and ending	<u> </u>	
G Che		al Return of a former p			al return
	Amended return	X Address o		change Employer identification nur	
Use th		Y FAMTLY	A	56-2444173	nber
Otherw	se, FOUNDATION	(1 11111111	В	Telephone number (see the	instructions)
print or typ	1837 EAST 2ND STREET			•	
See Spe	cific BROOKLYN, NY 11223-2830		C	If exemption application is	pending, check here
Instructi				1 Foreign organizations, chec	ck here
н б		(c)(3) exempt private for		2 Foreign organizations meet here and attach computation	ing the 85% test, check
	Section 4947(a)(1) nonexempt charitable to		private foundation	If private foundation status	
	0 1 1 1 1 1 1 1 1 1	ounting method X Ca		under section 507(b)(1)(A)	•
►ŝ	· ' ' ' 📙	column (d) must be on	cash basis.)	If the foundation is in a 60 under section 507(b)(1)(B)	-month termination
Part Î	Analysis of Revenue and				
	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)				purposes (cash basıs only)
	(see the instructions))				(casir basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	113,970.			
	2 Ck Lifthe foundn is not req to att Sch B 3 Interest on savings and temporary				
	cash investments				
	4 Dividends and interest from securities				
	5a Gross rents b Net rental income				
R	or (loss) 6a Net gain/(loss) from sale of assets not on line 10				
Ê	b Gross sales price for all assets on line 6a		· · · · · · · · · · · · · · · · · · ·		
Ě	7 Capital gain net income (from Part IV, line 2)				
N	8 Net short-term capital gain				
Æ	9 Income modifications 10a Gross sales less				
2010mczm <m< td=""><td>allowances</td><td></td><td></td><td></td><td></td></m<>	allowances				
	b Less Cost of goods sold.				
9	c Gross profit/(loss) (att sch)				
	11 Other income (attach schedule).				
AUG	12 Total. Add lines 1 through 11	113,970.	0.	0.	
	13 Compensation of officers, directors, trustees, etc	0.		<u> </u>	
CANNED	14 Other employee salaries and Wages				
2	15 Pension plans employee benefits				
A P	16a Lebal fees (attach schedule)				
2 6 1	b Action of fees (attach sch) 2010 C				
0 î	c Ottlet plot feels (Lattack sett) 2010 (2)				
	" I				
E T R A T	18 Tare (attach construction) 19 Depreciation and depletion				
1 i	20 Occupancy				
N V G E	21 Travel, conferences, and meetings				
A E N X D P	22 Printing and publications				
D P	23 Other expenses (attach schedule) SEE STATEMENT 1	646.			646.
E N S	24 Total operating and administrative	040.	·-·		0.10.
E S	expenses. Add lines 13 through 23	646.			646.
	25 Contributions, gifts, grants paid PART XV	113,637.			113,637.
	26 Total expenses and disbursements. Add lines 24 and 25	114,283.	0.	0.	114,283.
	27 Subtract line 26 from line 12:				==:/===
	a Excess of revenue over expenses and disbursements	-313.			
	b Net Investment income (if negative, enter -0-).	313.	0.		
	C Adjusted net income (if negative, enter -0-)			0.	

Form	990-	PF (2009) THE JERRY AND JANET HARARY FAMILY		56-24	
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
		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	60.	-253.	-253.
	2	Savings and temporary cash investments			<u> </u>
	3		-		
	١.	Less allowance for doubtful accounts			
	4	Pledges receivable			-
	_ ا	Less allowance for doubtful accounts ▶			
	5	Grants receivable	·		
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions).	 		
۸	7	Other notes and loans receivable (attach sch)		#	
S		Less allowance for doubtful accounts ▶		·	
Ş	8	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·		
A S E T S	9	Prepaid expenses and deferred charges	····		
S	10 a	a Investments – U S and state government obligations (attach schedule)			
	ı	b Investments — corporate stock (attach schedule)			
	(c Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	16	Total assets (to be completed by all filers – see instructions. Also, see page 1, item I).	60.	-253.	-253.
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			
В	19	Deferred revenue			1
L	20	Loans from officers, directors, trustees, & other disqualified persons			
1	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
E S	22	Total liabilities (add lines 17 through 22)	0.	0.	
- >	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here		<u> </u>	
		and complete lines 24 through 26 and lines 30 and 31.			
NF	24	·			
EU	24	Unrestricted Temporarily restricted			
T N	25	· · · ·			
	26	Permanently restricted Foundations that do not follow SFAS 117, check here.		·	
A B A L A	27	and complete lines 27 through 31. Capital stock, trust principal, or current funds			
TA	28	Paid-in or capital surplus, or land, building, and equipment fund			
С	29	Retained earnings, accumulated income, endowment, or other funds	60.	-253.	
O E R S	30	Total net assets or fund balances (see the instructions)	60.	-253.	
•	31	Total liabilities and net assets/fund balances			

Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 60. 2 Enter amount from Part I, line 27a 2 -313. Other increases not included in line 2 (itemize) 3 -253. Add lines 1, 2, and 3 4 Decreases not included in line 2 (itemize) 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 -253. 6

60.

-253.

(see the instructions)

Гап	(a) List and describe	e the kind(s) of property sold (e.g., rese, or common stock, 200 shares ML	eal estate, C Company)	P — Purch	ase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
	N/A			5 55.16.			
— ь		· · · · · · · · · · · · · · · · · · ·					
d							
е		-	*				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			(h) Gain or (e) plus (f) m	
a							
b							
	<u></u>						
d							
е			-			·	
	Complete only for assets show	ing gain in column (h) and owned by	the foundation on 12/31/69			(I) Gains (Colu	mn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i over column (j), if any		ga tha	ain minus column (k n -0-) or Losses (fr), but not less
а						•	
b							
С		·					
d							
е							
2	Capital gain net income or (net	capital loss). If gain, also If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7		2		
3	Net short-term capital dain or (loss) as defined in sections 1222(5)		-	_		
	, ,	• •	···				
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see the instructions)	. If (loss), enter -0-		3		
Part		Section 4940(e) for Reduce	d Tax on Net Investmen	t Incor			
Was t	s,' the foundation does not qual	tion 4942 tax on the distributable am	mplete this part.	•		Yes	X No
1	·-···	n each column for each year, see th	e instructions before making a	any entri	es		
((a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset	ts	(colu	(d) Distribution Imn (b) divided l	
	2008	109,261.		755.		1	44.716556
	2007	77,631.	1,	,881.			41.271132
	2006	55,717.		498.			37.194259
	2005	343,703.		031.			4.520564
	2004	1,500.		645.			0.011140
2	Total of line 1, column (d)	2,000			2	2	227.713651
3	Average distribution ratio for th number of years the foundation	e 5-year base period — divide the to has been in existence if less than 5	tal on line 2 by 5, or by the		3		45.542730
4	5 1 1 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2						
	Enter the net value of nonchari	table-use assets for 2009 from Part	X, line 5		4		901.
5	Multiply line 4 by line 3		X, line 5		5		
		table-use assets for 2009 from Part	X, line 5				
6	Multiply line 4 by line 3	table-use assets for 2009 from Part	X, line 5		5		
6 7	Multiply line 4 by line 3 Enter 1% of net investment inc	table-use assets for 2009 from Part ome (1% of Part I, line 27b)	X, line 5	-	5		41,034.

	· ·						
Form	990-PF (2009) THE JERRY AND JANET HARARY FAMILY	56-	24441	73		Р	age 4
Parl	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	see	the ins	truction	15)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here						- '
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)						_
p	Domestic foundations that meet the section 4940(e) requirements in Part V,		1				<u> </u>
_	check here X and enter 1% of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)						1
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2		-		0.
3	Add lines 1 and 2		3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0	ı-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	•	5				0.
	Credits/Payments:						
а	2009 estimated tax pmts and 2008 overpayment credited to 2009						
b	Exempt foreign organizations — tax withheld at source 6b						
С	Tax paid with application for extension of time to file (Form 8868)						
d	Backup withholding erroneously withheld 6d						
7	Total credits 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 attached		8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9				<u>0.</u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.		10				
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	•	11				
Part	VII-A Statements Regarding Activities				т,	, 1	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	it			a	es	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?				ь		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materia	ls pu	blished				1
_	or distributed by the foundation in connection with the activities Did the foundation file Form 1120-POL for this year?			١,		l	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			·	c		
	(1) On the foundation \Rightarrow 0. (2) On foundation managers \Rightarrow \$			0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important the reimbursement (if any) paid by the foundation during the year for political expenditure tax important the reimbursement (if any) paid by the foundation during the year for political expenditure tax important the reimbursement (if any) paid by the foundation during the year for political expenditure tax important tax in the political expenditure tax in the political expension tax in the political	sed	on				
2	foundation managers. \$0. Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	,		Х
2	If 'Yes,' attach a detailed description of the activities			-	+		
_							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, as of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	ticles s	5	3	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				la		X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?				IЬ	N	⁄Α
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				<u> </u>		X
	If 'Yes,' attach the statement required by General Instruction T						1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions the with the state law remain in the governing instrument?	nat co	onflict	- 6	;		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV			7	<u>. </u>	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions). NY	_	······				
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>				ВЬ	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	4942(j)	(5)		_	<u>.</u>
10	for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' con-	•			+	_	<u>X</u>
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing to and addresses SEE STATEM			10		x	2022:
BAA				Form	プラリ-	rr (とししり)

•	COMPRE (2000) THE TERRY AND TAKET HARARY FAMILY	56-2	444173			Dago E
	t VII-A Statements Regarding Activities Continued	30-2	444173			age 5
·						I
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		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemptio	n applicatio	on?	13	Х	
	Website address ► N/A					
14	The books are in care of ► JERRY HARARY Telephon	e no ►				
	Located at ► 1942 EAST 5TH STREET, BROOKLYN, NY ZIP + 4 ►	1122	3			
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	▶ 15	5			N/A
Par	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)		Γ			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
			_			١.
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No			
	(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)?	Yes	X No			
		L	_			
	(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			
	- 16 and another in (Van) to 10(1) (6), did and of the cots foil to qualify under the exceptions described in		_			
	olf 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 the instructi	ons)?		1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here		7 [
	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)).					
				- 1		
ā	a 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	X No	- 1		
	If 'Yes,' list the years ► 20, 20, 20, 20		_			
						
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942	2(a)(2) (a)(2) to				
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement — see the instructions)	(a)(Z) (U	[2ь	N	/A
,	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	here	F			
	► 20 , 20 , 20 , 20					
_						1
38	a 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			
ŧ	of 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation	١,]
	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	ed				
	(3) the lanse of the 10-15- or 20-year first phase holding period? (Use Schedule C. Form 4720, to		1		-	ļ.,
	determine if the foundation had excess business holdings in 2009)		}_	3Ь	N	/A
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its			_		,,
	charitable purposes?		L	4a		X

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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 2009?

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Form 990-PF (2009) THE JERRY AND JANE			56-244	14173 Page 6
Part VII-B Statements Regarding Activit	ies for Which Forn	n 4720 May Be Req	uired (continued)	
5a During the year did the foundation pay or incu	ir any amount to.			
(1) Carry on propaganda, or otherwise attempt	•	on (section 4945(e))?	Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	n 4955), or to carry	☐ Yes X	No
(3) Provide a grant to an individual for travel,	-		Yes X	No
(4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section	han a charitable, etc, o 4940(d)(2)? (see instri	rganization described uctions)	Yes X	No
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?	Yes X	No .
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	a current notice regard	ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	ruing disaster assistant	ce check here	<i>-</i> ⊔	
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 are on a personal benefit contract?	ny funds, directly or ind	lirectly, to pay premiums	Yes X	No
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	ctly, on a personal bene	fit contract?	6b X
7a At any time during the tax year, was the found	dation a party to a proh	ubited tax shelter transa	ction? Yes X	No
b If yes, did the foundation receive any proceed				76 N/A
Part VIII Information About Officers, D				
and Contractors	,as.ccs,	i odnadaon manag	jois, mgmy raid L	pioyees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions)	
List an omeers, anectors, trustees, tournation	(b) Title and average		(d) Contributions to	(a) Expanse account
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
MICHAEL HARARY	DIRECTOR & S	0.	0.	0.
893 ELBERON AVENUE	l o			
ELBERON, NJ 07740		;		
JERRY HARARY	PRESIDENT &	0.	0.	0.
1942 E. 5TH STREET	0	Ŭ.	.	.
BROOKLYN, NY 11223	WIGE PRESIDE			
JANET_HARARY	VICE PRESIDE	0.	0.	0.
1942 E. 5TH STREET	0			
BROOKLYN, NY 11223				
LEON HARARY	DIRECTOR & T	0.	0.	0.
1942 E. 5TH STREET	lo			
BROOKLYN, NY 11223				
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1— see in	structions) If none er	ter '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	(e) Expense account, other allowances
<u>NONE</u>				
Total number of other employees paid over \$50,000				0
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Form 990-PF (2009) THE JERRY AND JANET HARARY FAMILY Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	2444173 Page 7 d Employees,
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	
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 1 N/A	Expenses
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 3	
Total. Add lines 1 through 3	▶ 0.
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Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign fo	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes: a Average monthly fair market value of securities	 1a	
	Average of monthly cash balances	1 b	915.
,	Fair market value of all other assets (see instructions)	1 c	
	d Total (add lines 1a, b, and c)	1 d	915.
(Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation) 1 e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	915.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	14.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	901.
6	Minimum investment return. Enter 5% of line 5	6	45.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper	ating fou	indations
	and certain foreign organizations check here ► □ and do not complete this pa		
1	Minimum investment return from Part X, line 6.	1	45.
2	a Tax on investment income for 2009 from Part VI, line 5		
ı	b Income tax for 2009 (This does not include the tax from Part VI)		
	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	45.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	45.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	45.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	114,283.
	Program-related investments — total from Part IX-B	1Ь	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
ı	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	114,283.
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	
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	114,283.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	ther the fo	undation

qualifies for the section 4940(e) reduction of tax in those years

BAA

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				45.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years: 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2009.				
a From 2004				
b From 2005 334, 669	$\overline{\cdot}$			
c From 2006 55, 642				
d From 2007 77, 631	$\overline{\cdot}$			
e From 2008 109, 223				
f Total of lines 3a through e	577,165.			
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$ 114,283.				
a Applied to 2008, but not more than line 2a			0.	
			.	
 Applied to undistributed income of prior yea (Election required – see instructions) 	'S	0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2009 distributable amount	· · · · · · · · · · · · · · · · · · ·			45.
e Remaining amount distributed out of corpus	114,238.		-	
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:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	691,403.			
•	051,405.			···
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-		0.		· · · · · · · · · · · · · · · · · · ·
ed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
		0.		
d Subtract line 6c from line 6b Taxable amount — see instructions.		0.		;
		0.		
 Undistributed income for 2008. Subtract line 4a from line 2a Taxable amount — see instructions 			0.	'
ille Za Takable amount — See instructions			<u></u>	
f Undistributed income for 2009. Subtract line	s			
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			Ī	
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
(see instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	691,403.			
10 Analysis of line 9	0,1,403.1		·· -	
a Excess from 2005 334, 669			1	
b Excess from 2006 55, 642			İ	
c Excess from 2007 77, 631	_			
d Excess from 2008 109, 223	 ;			
e Excess from 2009 114, 238		1		
114,230	•.1			Farm 000 RF (2000)

Form 990-PF (2009) THE JERRY AND JA				56-2444173	
Part XIV Private Operating Foundation					N/A
1 a If the foundation has received a ruling or one is effective for 2009, enter the date of the	ruling			*	1010()(5)
b Check box to indicate whether the foundate		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	45.0000	Prior 3 years	(4) 2005	(a) Takal
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
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					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					-
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter					
(1) Value of all assets(2) Value of assets qualifying under					
section 4942(j)(3)(B)(i) 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					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities 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 support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	organization ha	d \$5,000 or mor	e in
assets at any time during th		structions.)			
Information Regarding Foundation Managa List any managers of the foundation who have close of any tax year (but only if they have SEE STATEMENT 3	nave contributed mo	ore than 2% of the t than \$5,000) (See	otal contributions re section 507(d)(2))	eceived by the found	dation before the
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 10	f the stock of a corp 0% or greater intere	poration (or an equa est	ally large portion of t	the ownership of
2 Information Regarding Contribution, Gran Check here • X if the foundation only n requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected char	ritable organizations	s and does not acce anizations under oth	pt unsolicited er conditions,
a The name, address, and telephone number	er of the person to w	vhom applications s	hould be addressed	İ	
h The form in which analysis as about he	submitted and info	mation and material	le thou should restrict	do:	
b The form in which applications should be s	submitted and infor	nation and material	is uley should inclu	ue.	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	such as by geograph	nical areas, charitat	ole fields, kinds of i	nstitutions, or other	factors:
			 		
BAA	TEI	EA0310L 07/06/09		F	orm 990-PF (2009)

3 Grants and Contributions Paid During the	ear or Approved for Fut	ure Paymen		<u> </u>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year SEE STATEMENT 4				
Total			► 3a	113,637.
b Approved for future payment				
Total			▶ 3b	
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activiti
--

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded	by section 512, 513, or 514		
1	Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)	
·				1 5500		(See the mondenons)	
ŀ							
•							
•				ļ			
•				<u> </u>			
f				├ ──			
	Fees and contracts from government agencies			 			
3	Membership dues and assessments			 			
4	Interest on savings and temporary cash investments Dividends and interest from securities			 			
5	Net rental income or (loss) from real estate:				****		
-	Debt-financed property			 			
	Not debt-financed property						
6	Net rental income or (loss) from personal property						
7	Other investment income						
8	Gain or (loss) from sales of assets other than inventory						
9	Net income or (loss) from special events	ļ		 			
10	Gross profit or (loss) from sales of inventory						
11	Other revenue	<u> </u>		 			
a			·	 			
t				 			
	· · · · · · · · · · · · · · · · · · ·			 			
12	Subtotal Add columns (b), (d), and (e)			1			
13	Total. Add line 12, columns (b), (d), and (e)				13	0.	
(See	worksheet in the instructions for line 13 to verify ca	lculations)					
Par	XVI-B Relationship of Activities to the	Accompli	shment of Exemp	t Purpe	oses		
	····						
Lin	e No. Explain below how each activity for which in accomplishment of the foundation's exempt	come is repo purposes (of	orted in column (e) of F Ther than by providing f	art XVI- unds for	A contributed importantl such purposes) (See ti	y to the ne instructions)	
<u> </u>	I/A				, , , , , , , , , , , , , , , , , , ,		
<u> </u>							
							
		_					
							
			· · · · · · · · · · · · · · · · · · ·				
			-	.			
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			·		 		
BAA		TEE	A0502L 07/06/09			Form 990-PF (2009)	

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

_									T	V	A1 -
	descr	ne organization directly abed in section 501(c) ng to political organiza	of the Code (o	engage in any o other than secti	of the following wi on 501(c)(3) orga	th any oth nizations)	er organization or in section	on 527,		Yes	No
	a Trans	sfers from the reporting	g foundation to	a noncharitab	le exempt organiz	ation of					İ
	(1) C	Cash							1 a (1)		X
	(2) C	Other assets							1 a (2)		X
		r transactions									i
		ales of assets to a nor							1 b (1)		X
	` '	urchases of assets fro		•	ganızatıon				1 b (2)		Χ_
		Rental of facilities, equi	•	er assets					1 b (3)		Χ
	• •	Reimbursement arrange							1 b (4)		_X_
	• •	oans or loan guarantee							1 b (5)		Х
		erformance of services		•	•			•	1 b (6)		X
	c Shari	ng of facilities, equipm	ent, mailing lis	sts, other asset	ts, or paid employ	ees			1 c		X
	d If the the goany to	answer to any of the a oods, other assets, or ransaction or sharing a	above is 'Yes,' services given arrangement, s	complete the to by the reporting how in column	following schedule ng foundation If the (d) the value of t	: Column in the foundate he goods,	(b) should alvoin received lother assets,	vays show the fair n less than fair marke or services receive	narket val t value in d	ue of	
(a) Line no	(b) Amount involved		of noncharitable ex				sfers, transactions, and		gement	s
N	/A						-			•	
							-				
	·										
_			<u> </u>								
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_											
						ŀ					
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								·· · · · · · · · · · · · · · · · · · ·			
			ļ								
_		<u> </u>	1			<u> </u>					
		foundation directly or ibed in section 501(c) s,' complete the follow		ated with, or re ther than section	elated to, one or r on 501(c)(3)) or ir	nore tax-e: section 5	kempt organi: 27?	zations	Yes	X	No
	<u> </u>	(a) Name of organizat		(b) Tv	pe of organization		(r	:) Description of rela	tionship		
N	/A	(a) Hame of organizat		(2) .)	po or organization	·		, coscription or rela	.tionsinp		
	, <u> </u>			<u> </u>							
_						-					
_											
_				 							
	Under pena	alties of perjury, I declare that	Lbave examined th	us return, including	accompanying schedule	s and stateme	ents, and to the be	est of my knowledge and b	elief, it is true	, correc	t, and
	complete (Declaration of preparer (other	Than taxpayer or fid	duciary) is based on	all information of which	preparer has	any knowledge				
S	▶	<u> </u>	4) Y				1/10_	. •			
S I G N	Sign	ature of officer or trustee	<u> </u>		 n	Date	,	Title			
HERE	Paid	Preparer's signature FRAN	K MUSACCH	110 / 91	Musuk	Date 7	127/10	I colf —I	irer's Identifyi Signature in)717098		oer s)
Ĕ	Pre- parer's	Firm's name (or IRVI		& RUBIN P	LLC		1	EIN ► 13-384			
	Use	yours if self- employed), > 307	5TH AVENU								
	Only			10016-651				Phone no ► (21	2) 447	-033	3
B	AA	·				•			Form 99		

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

Name of the organization THE JERRY AND J	ANET HARARY FAMILY	Employer identification number
FOUNDATION		56-2444173
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 a	as a private foundation
	527 political organization	
F 000 PF	V E01(a)(3) assembly assembly foundation	
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	private loundation
Check if your organization is covered by the Note: Only a section 501(c)(7), (8), or (10)	e General Rule or a Special Rule organization can check boxes for both the General Rule and	d a Special Rule See instructions
General Rule —		
X For an organization filing Form 990, 990 contributor (Complete Parts I and II)	P-EZ, or 990-PF that received, during the year, \$5,000 or mi	ore (in money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(A)(vi) and received from	ng Form 990 or 990-EZ, that met the 33-1/3% support test of any one contributor, during the year, a contribution of the greater In or (ii) Form 990-EZ, line 1 Complete Parts I and II	of the regulations under sections of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) organization aggregate contributions of more than \$ prevention of cruelty to children or anim	anization filing Form 990 or 990-EZ, that received from any ,000 for use <i>exclusively</i> for religious, charitable, scientific, ials Complete Parts I, II, and III	one contributor, during the year, literary, or educational purposes, or the
contributions for use exclusively for religible this box is checked, enter here the total	anization filing Form 990 or 990-EZ, that received from any gious, charitable, etc., purposes, but these contributions did contributions that were received during the year for an excrts unless the General Rule applies to this organization bec	not aggregate to more than \$1,000 If clusively religious, charitable, etc.
religious, charitable, etc, contributions of	of \$5,000 or more during the year.	> \$
990-PF) but it must answer 'No' on Part IV,	d by the General Rule and/or the Special Rules does not file line 2 of their Form 990, or check the box on line H of its F filing requirements of Schedule B (Form 990, 990-EZ, or 99	Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Red for Form 990, 990EZ, or 990-PF.	action Act Notice, see the Instructions Sch	edule B (Form 990, 990-EZ, or 990-PF) (2009

	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org	ERRY AND JANET HARARY FAMILY	1 ' '	r identification number 444173
Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Туре of contribution
1	JERRY HARARY 1942 E 5TH STREET BROOKLYN, NY 11223	\$ <u>113,970.</u>	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

Page 1

of 1

of Part II

Name of organization

THE JERRY AND JANET HARARY FAMILY

Employer identification number

56-2444173

(a) No. from Part I	(b) Description of noncash property given .	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A	A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	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) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		ss	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

FEDERAL STATEMENTS

PAGE 1

THE JERRY AND JANET HARARY FAMILY

FOUNDATION

56-2444173

7/27/10

CLIENT JJHARFF

04 49PM

STATEMENT 1 FORM 990-PF, PART I, LINE 23 **OTHER EXPENSES**

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE <u>PURPOSES</u>
BANK CHARGES FILING FEE	TOTAL	\$ 621. 25. \$ 646.	\$ 0.	\$ 0.	\$ 621. 25. \$ 646.

STATEMENT 2 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

JERRY HARARY

1942 E 5 STREET BROOKLYN, NY 11223

STATEMENT 3 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

MICHAEL HARARY JERRY HARARY

STATEMENT 4 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
AMRCN FRNDS YSHVA HECHAL EZRA 55 W 39 ST NEW YORK, NY 10018	NONE	NFP	CHARITY	\$ 201.
BIKUR HOLIM 2281 OCEAN PARKWAY BROOKLYN, NY 11223	NONE	NFP	CHARITY	3,035.
CHEVRA HALZOLAH PO BOX 2333 ELBERON, NJ 07740	NONE	NFP	CHARITY	430.

FEDERAL STATEMENTS THE JERRY AND JANET HARARY FAMILY FOUNDATION

PAGE 2

CLIENT JJHARFF

56-2444173

7/27/10

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STATEMENT 4 (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
FRIENDS OF YECHAVE DA'AT 279 ELBERON TERRACE ELBERON, NJ 07740	NONE	NFP	RELIGIOUS	\$ 3,600
JESSE DWECK LEARNING CENTER PO BOX 132 DEAL, NJ 17723	NONE	NFP	EDUCATIONAL	300
MAGEN ABRAHAM 479 MONMOUTH RD W. LONG BRANCH, NJ 07740	NONE	NFP	RELIGIOUS	501
MAGEN DAVID YESHIVAH 2130 MC DONALD AVE BROOKLYN, NY 11223	NONE	NFP	EDUCATIONAL	13,100
MAGEN ISRAEL 1815 EAST 3RD STREET BROOKLYN, NY 11223	NONE	NFP	RELIGIOUS	1,000
MATTAN BASSETER 580 5TH AVENUE NYC, NY 10036	NONE	NFP	RELIGIOUS	33,656
OHEL ELIAHU P O BOX 63 DEAL, NJ 07723	NONE	NFP	RELIGIOUS	2,800
OHEL YAACOV CONGREGATION PO BOX 225 DEAL, NJ 07723	NONE	NFP	RELIGIOUS	12,000
SEPHADIC COMMUNITY CENTER 1901 OCEAN PARKWAY BROOKLYN, NY 11223	NONE	NFP	RELIGIOUS	9,700
TORAH LEARNING CENTER 140 58TH ST BOX 67 BROOKLYN, NY	NONE	NFP	EDUCATIONAL	252
MASKEEL EL DAL MASS. GENERAL HOSPITAL BOSTON, MA	NONE	NFP	RELIGIOUS	252
CONG. BET YAAKOB 721 AVE V BROOKLYN, NY 11223	NONE	NFP	CHARITY	10,000
DEAL YESHIVAH 200 WALL ST WEST LONG BRANCH, NJ 07764	NONE	NFP	EDUCATIONAL	1,000

FEDERAL STATEMENTS

PAGE 3

CLIENT JJHARFF

THE JERRY AND JANET HARARY FAMILY FOUNDATION

56-2444173

7/27/10

04 49PM

STATEMENT 4 (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	
AISHEL SHABBAT 1010 AVENUE N BROOKLYN, NY 11230	NONE	NFP	CHARITY	\$ 25	52.
BNEI YITZHAK 730 AVENUE S BROOKLYN, NY 11223	NONE	NFP	EDUCATIONAL	35	52.
CHABAD MORRIS CTY 226 SUSSEX AVENUE MORRISTOWN, NJ 07962	NONE	NFP	RELIGIOUS	2,00	00.
EZRAT ISRAEL 806 EASTERN PARKWAY BROOKLYN, NY 11213	NONE	NFP	CHARITY	1,00	00.
HELPING HEARTS COMMUNITY SVC P.O. BOX 150609 LAKEWOOD, CO 80215	NONE	NFP	CHARITY	1,95	50.
HESED FUND 12 EAST 37TH STREET NEW YORK, NY 10016	NONE	NFP	CHARITY	15	52.
HOLOCAUST MEMORIAL MUSEUM 60 EAST 42ND STREET NEW YORK, NY 10165	NONE	NFP	CHARITY	10	00.
IMAGINE SCHOOL 1465 E. 7TH ST BROOKLYN, NY 11230	NONE	NFP	EDUCATIONAL	50	01.
JCC OF GREATER MONMOUTH COUNTY 100 GRANT AVENUE DEAL PARK, NJ 07723	NONE	NFP	EDUCATIONAL	1,03	31.
LEO CHALON A"H CHARITABLE FOUNDATION 1551 OCEAN PARKWAY BROOKLYN, NY 11230	NONE	NFP	CHARITY	-	75.
MAOR YESHEVIA 36 CEDAR AVENUE LONG BRANCH, NJ 07740	NONE	NFP	EDUCATIONAL	7,20	00.
MARY TAWIL FOUNDATION 1832 EAST 8TH STREET BROOKLYN, NY 11223	NONE	NFP	CHARITY	30	00.

FEDERAL STATEMENTS

THE JERRY AND JANET HARARY FAMILY FOUNDATION

PAGE 4 56-2444173

TOTAL \$

113,637.

7/27/10

CLIENT JJHARFF

04 49PM

STATEMENT 4 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AM(OUNT
MEOR HATORA YESHIVA 1914 EAST 13TH ST. BROOKLYN, NY 11229	NONE	NFP	RELIGIOUS	\$	500.
NEFESH 1750 EAST 18TH STREET BROOKLYN, NY 11229	NONE	NFP	CHARITY		540.
OSTAR FAMILY SERVICE 2334 WEST 13TH STREET BROOKLYN, NY 11223	NONE	NFP	CHARITY		101.
REACH FOR THE STARS LEARNING CENTER 3300 KINGS HIGHWAY BROOKLYN, NY 11234	NONE	NFP	EDUCATIONAL		1,000.
REFUAH RESOURCES 5904 13TH AVENUE BROOKLYN, NY 11219	NONE	NFP	CHARITY		900.
STELLA LINIADO RAINBOW FOUNDATION 716 AVENUE N BROOKLYN, NY 11230	NONE	NFP	CHARITY		750.
TAMAR FUND INT 132 NASSAU ST. NEW YORK, NY 10038	NONE	NFP	CHARITY		1,000.
YESHIVAT ATERET TORAH 901 QUENTIN ROAD BROOKLYN, NY 11223	NONE	NFP	EDUCATIONAL		350.
YESHIVAT BAIS YISRAEL 2002 AVENUE J BROOKLYN, NY 11229	NONE	NFP	EDUCATIONAL		301.
YESHIVAT OF FLATBUSH 919 EAST 10TH STREET BROOKLYN, NY 11230	NONE	NFP	EDUCATIONAL		505.
YESHIVA OF KINGS BAY 2611 AVENUE Z BROOKLYN, NY 11235	NONE	NFP	EDUCATIONAL		700.
YESHIVAT SHAARE TORAH 1924 EAST 7TH STREET BROOKLYN, NY 11223	NONE	NFP	EDUCATIONAL		250.

Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545 1709

If you are	e filing for an Automatic 3-Mont	h Extension, comp	lete only Part I and o	heck this box			► X
	e filing for an Additional (Not A						
	plete Part II unless you have alr	eady been granted	an automatic 3-mont	h extension on	a previously	filed Form 8868.	
Part I	Automatic 3-Month Exten	sion of Time.	only submit origin	al (no copies	s needed).		
							-
A corporation	n required to file Form 990-T an	d requesting an aut	tomatic 6-month exte	nsion – check	this box and	complete Part I o	only - 📗
All other corp income tax r	porations (including 1120-C filer eturns	s), partnerships, Ri	EMICS, and trusts mu	ıst use Form 70	104 to reques	st an extension of	time to file
returns noted the additional Form 990-T.	ling (e-file). Generally, you can below (6 months for a corpora (1 (not automatic) 3-month exten Instead, you must submit the fu (it www irs gov/efile and click or	tion required to file sion or (2) you file illy completed and	Form 990-T). Howev Forms 990-BL, 6069, signed page 2 (Part I	er, vou cannot f	ile Form 886	8 electronically if	(1) you want
	Name of Exempt Organization	-	 -	··. · , <u> </u>		Employer identificat	tion number
Type or	THE JERRY AND JANET	HARARY FAMT	T.Y				
print	FOUNDATION					56-2444173	3
File by the due date for	Number, street, and room or suite number	er If a P O. box, see instr	uctions				
filing your return See	1837 EAST 2ND STREE	Γ					
instructions	City, town or post office, state, and ZIP of	ode For a foreign addres	s, see instructions.	7.2			
	BROOKLYN, NY 11223-	2830					
Check type of	of return to be filed (file a separ	ate application for	each return):				
Form 990)	🗌 Form 990-T (co	rporation)		Form 47	20	
Form 990)-BL	Form 990-T (se	ction 401(a) or 408(a) trust)	Form 52		
Form 990)-EZ	🔲 Form 990-T (tru	ist other than above)		Form 60	69	
X Form 990)-PF	Form 1041-A			Form 88	70	
Telephone If the orga If this is for check this	anization does not have an office or a Group Return, enter the orgs box	e or place of busing	git Group Ex <u>em</u> ption	Number (GEN)	If	f this is for the wh	
	sion will cover		 				
•	st an automatic 3-month (6 mon	•		*			
	8/15 , 20 10 , to file		ization return for the	organization na	med above		
	ension is for the organization's	eturn for:					
. [[A]	calendar year 20 09 or						
	tax year beginning	^{, 20}	and ending	, 20			
2 If this ta	x year is for less than 12 month	ns, check reason:	Initial return	Final retu	rn C	Change in accoun	ting period
3a If this ap nonrefu	pplication is for Form 990-BL, 9 ndable credits. See instructions	90-PF, 990-T, 4720	, or 6069, enter the t	entative tax, les	s any 	3a \$	0.
b If this apmade I	pplication is for Form 990-PF or nclude any prior year overpaym	990-T, enter any r ent allowed as a cr	efundable credits and edit	estimated tax	payments	3b \$	0.
c Balance deposit See inst	• Due. Subtract line 3b from line with FTD coupon or, if required, tructions	3a. Include your p by using EFTPS (I	ayment with this form Electronic Federal Ta	i, or, if required x Payment Syst	em).	3c \$	0.
	u are going to make an electror					m 8879-EO for	
BAA For Priv	acy Act and Paperwork Reduc	tion Act Notice, se	instructions.			Form 8868	(Rev 4-2009)