

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



- EXTENSIONS ATTACHED -

Form **990-PF**

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see instructions.

Return of Private Foundation

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

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

OMB No 1545-0052

2011

For	calen	dar year 2011 or tax year beginning		, 2011	I, and e	ending		, 20	
Nai	me of fou	undation			-	A Employer	dentification number	·	
RA	YMONE	O AND SHARON HABER FOUNDATION, INC.	20-2059				20-2059762		
		d street (or P O box number if mail is not delivered to street address)		Room	/suite	B Telephone number (see instructions)			
	O FLEET STREET - 18 ENGELHARD AVENUE						732-382-8405		
		n, state, and ZIP code				C If exempts	on application is pend	ing check here	$\overline{}$
		NJ 07001				O il exempti	on application is pend	ing, oncorriore	
			of a former	nublic	charity	D 1 Foreign	organizations, check	here >	•□
•	Oricon	Final return Amended		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_	_		
		☐ Address change ☐ Name char					organizations meeting here and attach compl		- □
н	Check	type of organization: Section 501(c)(3) exempt p		ation			·		_
		n 4947(a)(1) nonexempt charitable trust			lation		oundation status was)7(b)(1)(A), check here		
		arket value of all assets at J Accounting method					idation is in a 60-mont		_
		year (from Part II, col. (c),	_				tion 507(b)(1)(B), chec		-
	line 16		on cash basis	s.)					
Р	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue	and				(d) Disburseme	
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses p			investment scome	(c) Adjusted net income	for charitable purposes	
		the amounts in column (a) (see instructions).)	books					(cash basis on	ly)
	1	Contributions, gifts, grants, etc., received (attach schedule)	8	80000	2 🐞 ·	· 💥		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B			-\ *\	*			
	3	Interest on savings and temporary cash investments		0		0			
	4	Dividends and interest from securities						W. (18	
	5a	Gross rents							
	b	Net rental income or (loss)	Jan 10 agri	6.7		A Com	KECEN.	FD -	
ā	6a	Net gain or (loss) from sale of assets not on line 10			, # ³	i, r			
Revenue	b	Gross sales price for all assets on line 6a	**	ž	* ^	9	NOVOA	100	
Š	7	Capital gain net income (from Part IV, line 2)		3		F	1 14C V 20/0 Z	312 * 19	
ď	8	Net short-term capital gain	* \$		<u> </u>			崖	
	9	Income modifications		W.			<u>Ubili-Ni</u>		
7 107	10a	Gross sales less returns and allowances	, T		*	<u> </u>		S. Samuel Street	
7	b	Less: Cost of goods sold	- 4		<u> </u>				
0	С	Gross profit or (loss) (attach schedule)				τ,		**	
7	11	Other income (attach schedule)							
<u> </u>	12	Total. Add lines 1 through 11	8	80000		0			
	13	Compensation of officers, directors, trustees, etc.							
(EU)	14	Other employee salaries and wages						 	
₽ĕ	15	Pension plans, employee benefits							
ΣX	16a	Legal fees (attach schedule)						 	
₹ <u>,</u>	b	Accounting fees (attach schedule)						-	
છે. ≨	с	Other professional fees (attach schedule)			 			 	
<u> </u>	17	Interest		100	 				100
Ę.	18	Taxes (attach schedule) (see instructions)		100	 	· · · · · · · · · · · · · · · · · · ·			100
Ë	19	Depreciation (attach schedule) and depletion			-			1	
SCANN Operating and Administrative Exp	20	Occupancy	1		-		-		
Ď	21	Travel, conferences, and meetings	-						
a	22	Printing and publications		532				+	532
ng	23	Other expenses (attach schedule)		332	 			+	
ati	24	Total operating and administrative expenses. Add lines 13 through 23		632					632
ě	05	_	10	11136				1511	
ö	25	Contributions, gifts, grants paid	 	11768	 			1511	
	26	Total expenses and disbursements. Add lines 24 and 25	+ 13	/ 00	<u> </u>			1011	
	27	Subtract line 26 from line 12: Excess of revenue over expenses and disbursements		31768)					
	a	Net investment income (if negative, enter -0-)	, , , , , , , , , , , , , , , , , , ,		<u> </u>	0		 	
	1	Adjusted net income (if negative, enter -0-)	<u> </u>					<u> </u>	
		AGRESTED HELDIGOTHE III HEGGIVE, Effici "U")	1		1				

Part II Balance Sheets Anteriores proceedings and amounts in the description column (a) Book Value (b) Book Value (c) Far M (c)	20684
2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶ 4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶ 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ▶ Less. allowance for doubtful accounts ▶ 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments—U.S. and state government obligations (attach schedule) b Investments—corporate stock (attach schedule) c Investments—land, buildings, and equipment: basis ▶ Less accumulated depreciation (attach schedule) 11 Investments—other (attach schedule) 12 Investments—other (attach schedule) 13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) 16 Grants payable and accrued expenses 17 Accounts payable and accrued expenses	
Accounts receivable ► Less: allowance for doubtful accounts ► 4 Pledges receivable ► Less: allowance for doubtful accounts ► 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ► Less. allowance for doubtful accounts ► 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments—U.S. and state government obligations (attach schedule) b Investments—corporate stock (attach schedule) c Investments—corporate stock (attach schedule) linvestments—land, buildings, and equipment: basis ► Less accumulated depreciation (attach schedule) 11 Investments—other (attach schedule) 12 Investments—other (attach schedule) 13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) 15 Other assets (describe ► 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item l) 17 Accounts payable and accured expenses	
Less: allowance for doubtful accounts ▶ 4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶ 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ▶ Less. allowance for doubtful accounts ▶ 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments — U.S. and state government obligations (attach schedule) b Investments — corporate stock (attach schedule) 1 Investments — corporate bonds (attach schedule) 1 Investments — orporate bonds (attach schedule) 1 Investments — mortgage loans 1 Investments — other (attach schedule) 1 Investments — other (attach schedule) 1 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) 1 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) 1 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item l) 6 52452 20684	
Less: allowance for doubtful accounts ▶ 4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶ 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ▶ Less. allowance for doubtful accounts ▶ 8 Inventories for sale or use 9 Prepaid expenses and deferred charges Investments—U.S. and state government obligations (attach schedule) b Investments—Corporate stock (attach schedule) 10a Investments—Corporate bonds (attach schedule) 11 Investments—Iand, buildings, and equipment: basis ▶ Less accumulated depreciation (attach schedule) 12 Investments—other (attach schedule) 13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable .	, ,
Pledges receivable ► Less: allowance for doubtful accounts ► 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ► Less. allowance for doubtful accounts ► 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments—U.S. and state government obligations (attach schedule) b Investments—Corporate stock (attach schedule) 11 Investments—corporate bonds (attach schedule) 12 Investments—and, buildings, and equipment: basis ► Less accumulated depreciation (attach schedule) 13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) 15 Other assets (describe ► 15 Other assets (to be completed by all filers—see the instructions. Also, see page 1, item I) 16 Grants payable and accrued expenses 17 Accounts payable and accrued expenses	
Less: allowance for doubtful accounts ▶ 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ▶ Less. allowance for doubtful accounts ▶ 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments—U.S. and state government obligations (attach schedule) Investments—corporate stock (attach schedule) 10 Investments—corporate bonds (attach schedule) 11 Investments—land, buildings, and equipment: basis ▶ Less accumulated depreciation (attach schedule) 12 Investments—other (attach schedule) 13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 18 Grants payable	
5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ▶ Less. allowance for doubtful accounts ▶ 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments—U.S. and state government obligations (attach schedule) b Investments—corporate stock (attach schedule) 1 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) 15 Other assets (describe ▶ 15 Other assets (to be completed by all filers—see the instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 18 Grants payable 18 Grants payable 19 Prepaid expensors (attach schedule) ▶ 19 Prepaid expenses (attach schedule) ▶ 10 Prepaid expenses (attach schedule) ▶ 11 Protal assets (to be completed by all filers—see the instructions. Also, see page 1, item II) 15 Accounts payable and accrued expenses	
6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ▶ Less. allowance for doubtful accounts ▶ 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments – U.S. and state government obligations (attach schedule) b Investments – corporate stock (attach schedule) 1 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) ▶ 15 Other assets (describe ▶ 16 Total assets (to be completed by all fillers—see the instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable	
7 Other notes and loans receivable (attach schedule) ► Less. allowance for doubtful accounts ► 8 Inventories for sale or use	
Less. allowance for doubtful accounts 8	
Less. allowance for doubtful accounts 8	<u> </u>
8 Inventories for sale or use	an a sa no deservador
b Investments—corporate stock (attach schedule)	
b Investments—corporate stock (attach schedule)	
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) ▶ 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable	
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) ▶ 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	
11 Investments—land, buildings, and equipment: basis ▶ Less accumulated depreciation (attach schedule) ▶ 12 Investments—mortgage loans	
Less accumulated depreciation (attach schedule) ► 12 Investments—mortgage loans	\$ 5 · 1 4 h · 1
12 Investments—mortgage loans	Alabail I da
13 Investments—other (attach schedule) 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶ 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	
14 Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) ► 15 Other assets (describe ► 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	
Less: accumulated depreciation (attach schedule) ► 15 Other assets (describe ► 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	
15 Other assets (describe ►) 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item l)	1.1.7.11 [
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item l)	
instructions. Also, see page 1, item I)	
17 Accounts payable and accrued expenses	
18 Grants payable	20684
18 Grants payable	
꽃 19 Deferred revenue	:
·• · · · · · · · · · · · · · · · · ·	de en 1888
20 Loans from officers, directors, trustees, and other disqualified persons	ylje " je
21 Mortgages and other notes payable (attach schedule)	
T 22 Other liabilities (describe ►)	· 15. k. k. v , k
20	
and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted	
24 Unrestricted	
26 Permanently restricted	
Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds. Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions). Total liabilities and net assets/fund balances (see	
and complete lines 27 through 31.	•
27 Capital stock, trust principal, or current funds	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	
29 Retained earnings, accumulated income, endowment, or other funds 652452 20684	
Total net assets or fund balances (see instructions) 652452 20684	
31 Total liabilities and net assets/fund balances (see	13%!
instructions)	
Part III Analysis of Changes in Net Assets or Fund Balances	
1 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)	652452
2 Enter amount from Part I, line 27a	(631768)
3 Other increases not included in line 2 (itemize) ▶	
4 Add lines 1, 2, and 3	
	20684
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6	20684

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story bnck warehouse, or common stock, 200 shs MLC Co.)				(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					-	
b						
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		Gain or (loss) us (f) minus (g)
а						
b						
C			 			
d						
е				10/01/00		
	Complete only for assets sho	wing gain in column (h) and owned t				Col (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	ess of col (i) of (j), if any		not less than -0-) or s (from col. (h))
a						
<u>b</u>						
C			<u> </u>			
d					 .	
е			olon ontonio D	ant Line 7	- 	
2	Capital gain net income or	r (net capital loss) { If (loss),	also enter in P enter -0- in Pa	art I, line 7	2	
3	If gain, also enter in Part	n or (loss) as defined in sections 1, line 8, column (c) (see instructions	ctions). If (loss	s), enter -0- in }	3	
art		er Section 4940(e) for Redu				_
		section 4942 tax on the distribut qualify under section 4940(e). D			se period?	☐ Yes ☐ 1
1		ount in each column for each yea			ing any entrie	es.
	(a) Base period years	(b)		(c)		(d) Distribution ratio
Cale	ndar year (or tax year beginning in)	Adjusted qualifying distributions	s Net value	of noncharitable-use asse		(b) divided by col (c))
	2010		100	6420	698	0.01
	2009	2	2100	6621	837	0.03
	2008		5484	6800	644	0.01
	2007		425	529	196	0.01
	2006	6	8138	2112	227	0.32
2	Total of line 1, column (d)				. 2	0.
3		for the 5-year base period—dividation has been in existence if le			ne	0.
4	Enter the net value of non	charitable-use assets for 2011 fr	rom Part X, line	e5	. 4	1855
5	Multiply line 4 by line 3				. 5	148
6		nt income (1% of Part I, line 27b)			. 6	
			,			
7	Add lines 5 and 6				. 7	148
8		ons from Part XII, line 4 ater than line 7, check the box in			. 8 at part using	15117 a 1% tax rate. See t

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstru	ctio	าร)			
1a	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 instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check						
	here ► ✓ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).						
•	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	00			
2 3	Add lines 1 and 2	-	0	00			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	00			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	00			
6	Credits/Payments:			_			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 0 00						
. b	Exempt foreign organizations—tax withheld at source 6b						
С	Tax paid with application for extension of time to file (Form 8868) . 6c 0 00	*	,				
d	Backup withholding erroneously withheld 6d						
7	Total credits and payments. Add lines 6a through 6d		0	00			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		0	00			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10						
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11			ļ			
	VII-A Statements Regarding Activities		Yes	No			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		res	No ✓			
	participate of interventent and permitted and participated and participate	1a :		-			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b		1			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	43					
	published or distributed by the foundation in connection with the activities.		ش				
С	Did the foundation file Form 1120-POL for this year?	1c		✓			
d							
	(1) On the foundation. ► \$(2) On foundation managers. ► \$						
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	saller alle a	1			
_	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, articles of						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		✓			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		ļ . <u></u>			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓_			
	If "Yes," attach the statement required by General Instruction T.	3					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	,		*			
	By language in the governing instrument, or By the distribution of the governing instrument as that as mandatany directions that	ź	Ì	"			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?						
_	· · · · · · · · · · · · · · · · · · ·	7	1	 			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	-	 	 			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
b	NEW YORK If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
D	(or designate) of each state as required by General Instruction G? If "No," attach explanation						
•	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	Ju	Ϊ́	 			
9	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"						
	complete Part XIV	9		1			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses	10	✓				

orm 990-PF (2011)	
Part VII-B	

Part VIII

RAYMOND HABER

SHARON HABER

HOWARD GUTTERMAN

					-		-			
r agr)-PF (2011)								c	age 6
	VII-B Statements Regarding Activities	s for W	hich Form	4720 F	May Be R	equire	d (continued)		<u> </u>	age O
	During the year did the foundation pay or incur a				<u>, 50 11</u>	 	(00//10/10/04)		Г	 ,
	(1) Carry on propaganda, or otherwise attempt t	•		n (secti	on 4945(e))? .	☐ Yes 🗸 No			
	(2) Influence the outcome of any specific public									
	directly or indirectly, any voter registration dr	ive?					☐ Yes 🗸 No			
	(3) Provide a grant to an individual for travel, stu	dy, or c	other similar p	ourpose	s?		☐ Yes 🗹 No			
	(4) Provide a grant to an organization other than			-	ation descr	ibed in	l			
	section 509(a)(1), (2), or (3), or section 4940(c						☐ Yes 🗹 No			
	(5) Provide for any purpose other than religious									
	purposes, or for the prevention of cruelty to						☐Yes ☑ No			,
)	If any answer is "Yes" to 5a(1)-(5), did any of the									
	Regulations section 53.4945 or in a current notice	_	_			uctions,	. —	5b	\vdash	
_	Organizations relying on a current notice regards	-				· ·	▶⊔			
;	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility									
	If "Yes," attach the statement required by Regula		_			• •	☐ res ☐ No			
1	Did the foundation, during the year, receive any					miums	•	İ		
•	on a personal benefit contract?		-	-			□Yes ☑No			
,	Did the foundation, during the year, pay premiur	ns. dire	ctly or indire	ctlv. on	a personal	benefit		6b		✓
	If "Yes" to 6b, file Form 8870.	,	, o	, ,	(,
3	At any time during the tax year, was the foundation	a party t	to a prohibited	d tax she	elter transac	tion?	☐ Yes 🗸 No			,
)	If "Yes," did the foundation receive any proceed	s or hav	ve any net inc	come at	tributable t	to the t	ransaction? .	7b		
ırt	VIII Information About Officers, Direct	tors, T	rustees, F	oundat	ion Mana	agers,	Highly Paid E	mploy	ees,	
	and Contractors					-,				
	List all officers, directors, trustees, foundation							_		
	(a) Name and address	hou	e, and average rs per week		npensation paid, enter	emplo	Contributions to byee benefit plans		ense acc	
		+	ed to position		-0-)	and def	erred compensation	011101		
	OND HABER	PRESI	DENT, 1HR		0		0			0
	. 7TH ST. BROOKLYN, NY 11230							 		
	ON HABER . 7TH ST. BROOKLYN, NY 11230	V PRES	SIDENT, 1	o		0		0		0
_	RD GUTTERMAN	 	TADY 4 UD							
	GELHARD AVENUE AVENEL, NJ 07001	SECKE	TARY, 1 HR		0		0			0
		ŀ			-		•			
•	Compensation of five highest-paid employe "NONE."	es (oth	er than tho	se incli	ided on li	ne 1—	see instruction	s). If r	ione, (enter
			(b) Title, and	average			(d) Contributions to	(a) F.::		
(a) Name and address of each employee paid more than \$50,0	00	hours per v	veek	(c) Comper	nsation	employee benefit plans and deferred		ense acc allowan	
			devoted to p	Comon			compensation			
NE										
			1				1	l		

2	Compensation "NONE."	of five highest-paid	employees (c	other than	those inc	luded on line	e 1—see instruction	s). If none,	ente
		· · · · · · · · · · · · · · · · · · ·					(d) Contributions to		

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

Form **990-PF** (2011)



Part	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		1
	· · · · · · · · · · · · · · · · · · ·	ļ <u>.</u>
·		
•		
Total r	number of others receiving over \$50,000 for professional services	
Part	IX-A. Summary of Direct Charitable Activities	<u> </u>
	Summary of Direct Chantable Activities	·
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of nizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
		Ì
_		
2		
		1
		
3		
4 -		
•		
Part	IX-B Summary of Program-Related Investments (see instructions)	
Desc	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
All o	ther program-related investments. See instructions	
3		
Total.	Add lines 1 through 3	

Form **990-PF** (2011)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn toun	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	188339
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	188339
е	Reduction claimed for blockage or other factors reported on lines 1a and	ř	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	188389
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	2826
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	185563
6	Minimum investment return. Enter 5% of line 5	6	9278
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	9278
2a	Tax on investment income for 2011 from Part VI, line 5	٠.	
b	Income tax for 2011. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9278
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	9278
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	9278
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	1511768
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,] .	
	purposes	2	·
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1511768
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1511768
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whethe	er the foundation

	90-F1 (2,011)				Page :
Part	XIII Undistributed Income (see instruction	ons)			
4	Distributable assessed for 0044 from Ded VI	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1	Distributable amount for 2011 from Part XI, line 7	Corpus	rears prior to 2010	2010	
2	Undistributed income, if any, as of the end of 2011:				9278
a	Enter amount for 2010 only				
b	Total for prior years: 20 ,20 ,20		***************************************	A Santana	
3	Excess distributions carryover, if any, to 2011:				4.
а	From 2006				
b	From 2007 0				
C	From 2008	- V.			
d	From 2009				
e	From 2010				
	Total of lines 3a through e	U			
•	line 4: ► \$ 1511768				
а	Applied to 2010, but not more than line 2a .				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)	4.00			
C	Treated as distributions out of corpus (Election				
	required — see instructions)				
d	Applied to 2011 distributable amount	<u> </u>			1511768
e	Remaining amount distributed out of corpus	(4500400)			(4500400)
5	Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same	(1502490)			(1502490)
	amount must be shown in column (a), the same				
6	Enter the net total of each column as				
	indicated below:	1,014			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1502490			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)			V. 1. 1/4/270.	
	tax has been previously assessed	day of			
d	Subtract line 6c from line 6b. Taxable				10 22
	amount-see instructions				
е	Undistributed income for 2010. Subtract line				
	4a from line 2a. Taxable amount-see				- *** A
	instructions			As / Sec.	
f	Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2012				
7	Amounts treated as distributions out of corpus	WAFA SAMARINE TO LINE	- # · · ·		
	to satisfy requirements imposed by section			T e	
	170(b)(1)(F) or 4942(g)(3) (see instructions) .				ALFORDAY (C)
8	Excess distributions carryover from 2006 not				
^	applied on line 5 or line 7 (see instructions).		1976		
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	1502400			
10	Analysis of line 9.	1502490	5172		
a	Excess from 2007 0			1	
b	Excess from 2008 0				
c	Excess from 2009 0				
d	Excess from 2010 0			A MAYERA	
e	Excess from 2011				

Page	1	C

1a	If the foundation has received a ruling		n letter that it is a	private operating		
	toundation, and the ruling is effective to	2011 ontor the c	late of the ruling			
	foundation, and the ruling is effective for		_		4040(3)	(0) 4040()(5)
	Check box to indicate whether the four		e operating tounda		ection4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	0.10040	Prior 3 years	(4) 0000	(e) Total
	investment return from Part X for	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
	each year listed					
	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed				~	
đ	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test - enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 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					
С	"Support" alternative test—enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section		1	1		1
	512(a)(5)), or royalties)					
	(2) Support from general public	1				
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)			<u> </u>		
	(3) Largest amount of support from	18				
	an exempt organization					
	(4) Gross investment income		<u> </u>	<u> </u>		<u> </u>
Part				the foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		ns.)			
1	Information Regarding Foundation			N - 8 45 - 4 - 4 - 1 4		loudh a formulation
а	List any managers of the foundation of before the close of any tax year (but of					by the foundation
	• • •	only if they have t	contributed more ti	ian \$5,000). (See S	ection 307 (u)(2).)	
	IOND HABER (STUDIO RAY, LLC) List any managers of the foundation	who own 100/	or more of the ste	ok of a corporation	o (or an equally la	ergo portion of the
b	ownership of a partnership or other el					arge portion or the
NONE	· , ,	racy, or willow and	3 100110011011 1100 0	1070 or ground mic	3. 33	
2	Information Regarding Contribution	Grant Gift Lo	an Scholarshin e	etc Programs:		
•	Check here ► ✓ if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the t					
	other conditions, complete items 2a,		- g, g,	(,		3
а	The name, address, and telephone nu		son to whom applic	cations should be a	ddressed:	
-	,,,				· · · · · · · · · · · · · · · · · ·	
b	The form in which applications should	be submitted a	nd information and	materials they sho	uld include:	
				-		
С	Any submission deadlines:					
d	Any restrictions or limitations on av	vards, such as	by geographical a	reas, charitable fi	elds, kinds of ins	stitutions, or other
	factors:					

Part	XV Supplementary Information (cont Grants and Contributions Paid During t	inued)	od for Eu	huro Dovrmont	· -
3		If recipient is an individual	ea for Ful	lure Payment	<u> </u>
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
SEE 9	PAGES ATTACHED				
					1
			1		
			1		
	Total			▶ 3a	1511136
—	Approved for future payment				
	,,				
			<u> </u>	> 2h	

iter gross amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
1 Program service revenue:	ļ <u>+</u> -		 		ļ` <u> </u>
a					
b	-				
c			ļ		ļ
d			ļ.————		ļ
e	<u> </u>		<u> </u>		
T			ļ		
g Fees and contracts from government agencies		<u>.</u>	 		
2 Membership dues and assessments			 	<u> </u>	
Interest on savings and temporary cash investments	ļ		 		
1 Dividends and interest from securities			14		9
Net rental income or (loss) from real estate:	L				ļ
a Debt-financed property					ļ
b Not debt-financed property	<u> </u>				<u> </u>
6 Net rental income or (loss) from personal property			ļ.— <u>-</u>		
7 Other investment income			ļ	_	ļ
8 Gain or (loss) from sales of assets other than inventory	ļ	 _			
9 Net income or (loss) from special events					ļ <u> </u>
O Gross profit or (loss) from sales of inventory					ļ
1 Other revenue: a		~	<u> </u>		
b					
c			ļ.—		
d			ļ		
e					
3 Total. Add line 12, columns (b), (d), and (e)				13	<u> </u>
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation	ns.)				<u> </u>
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	(
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	(
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Accomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	(
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	(
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activities to the A	ns.) Nccomplishme	nt of Exem	ot Purposes	13	(

Part	XVII		n Regarding Tran ganizations	sfers To and Tra	nsactions a	nd Relationsh	ips With	Nonchari	table	
1	ın sec	ne organization d	lirectly or indirectly e e Code (other than s						Ye	es No
а	Trans (1) Ca	fers from the repash	oorting foundation to					-	a(1)	-
b	Other (1) Sa (2) Pu (3) Re	transactions: ales of assets to urchases of asse ental of facilities,	a noncharitable exe ts from a noncharita equipment, or other rangements.	mpt organization able exempt organiz r assets	ation			1	b(1) b(2) b(3) b(4)	
	(5) Lo (6) Pe Sharir If the	pans or loan guar erformance of se ng of facilities, ed answer to any o	rantees	ip or fundraising so its, other assets, or s," complete the fol			should alv	[1 vays show	b(5) b(6) 1c the fair	✓ ✓ ✓ • market
	value	in any transaction	on or sharing arrange	ement, show in colu	ımn (d) the val	ue of the goods	, other ass	ets, or sen	rices red	ceived.
(a) Line	Is the		ectly or indirectly aff		ted to, one or		npt organiz	zations		
b		s," complete the	01(c) of the Code (c following schedule	·		ection 527? .			Yes 🛭	
		(a) Name of organ	ızatıon	(b) Type of o	rganization		(c) Descripti	on of relations	:hip	
Sign Here	corre	or penalties of perjury, ct, and complete, poet	declare that I have examine that the declare that I have examine that the declare that I have examine that the declare that I have examine the declare the declare that I have examine the declare the declare the declare that I have examine the declare t	ed this return, including according to an taxpayer) is based on all Date	ompanying schedul information of whice PRESIDE	h preparer has any kn	nd to the best o	May the IRS with the pre (see instruct	discuss to	this return
Paid Prep	arer	Print/Type preparer Firm's name	\	Preparer's signature		Date		ck if employed	ÎN .	
Use	Unly	Firm's address					Phone no		m 990 -l	PF (2011)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

RAYMOND AND SHARON HABER FOUNDATION, INC 20-2059762 Organization type (check one): Section: Filers of: 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 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** 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 331/3 % support test of the regulations under sections 509(a)(1) and 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, total 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 total 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 its Form 990, or check the box on line H of its Form 990-EZ or on

Part I, 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).

Name of organization
RAYMOND AND SHARON HABER FOUNDATION, INC
20-2059762

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	STUDIO RAY, LLC (RAYMOND HABER) 512 7TH AVENUE NEW YORK, NY 10018	\$ 880000	Person Payroll Noncash (Complete Part II if there is a noncash contribution)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)			

Name of organization
RAYMOND AND SHARON HABER FOUNDATION, INC
20-2059762

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) (b) from FMV (or estimate) Date received Description of noncash property given Part I (see instructions) \$ (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (c) (a) No. (d) (b) FMV (or estimate) from Date received Description of noncash property given (see instructions) Part I \$ (c) (a) No. (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (see instructions) Part I \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (c) (a) No. (d) (b) from FMV (or estimate) **Date received** Description of noncash property given (see instructions) Part I \$

Page 4 Name of organization Employer identification number 20-2059762 RAYMOND AND SHARON HABER FOUNDATION, INC Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (d) Description of how gift is held (b) Purpose of gift (c) Use of gift from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

FORM 990-PF RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

RECIPIENT Yeshivat Shaare Torah 1680 Coney Island Avenue Brooklyn, NY 11230	<u>PURPOSE OF GRANT</u> GENERAL FUND	AMOUNT 208,839
Yad Yosef 1036 Ocean Parkway Brooklyn, NY 11230	GENERAL FUND	129,606
Keren Hayeshivot Trust 1616 East 10th Street Brooklyn, NY 11223	GENERAL FUND	82,900
Ahavat Shalom Torah Center 702 Avenue O Brooklyn, NY 11230	GENERAL FUND	79,204
Lmahn Achai 1002 Quentin Road, Suite # 2002 Brooklyn, NY 11223	GENERAL FUND	69,760
Tzedaka Vachesed 1329 44th Street Brooklyn, NY 11219	GENERAL FUND	42,251
American Friends Of Yeshivat Rechasim 1611 Cedar Street Brooklyn, NY 11230	GENERAL FUND	30,000
Limudei Da'as Inc. 9 Eastview Road Monsey, NY 10952	GENERAL FUND	25,000
Sephardic Torah Center P.O. Box 167 Deal , NJ 07723	GENERAL FUND	22,000
Magen David 2130 McDonald Avenue Brooklyn, NY 11223	GENERAL FUND	20,652

FORM 990-PF RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

Vaad Lehatzalas Nidchei Yisrael 1566 Coney Island Avenue Brooklyn, New York 11230	GENERAL FUND	18,000
Shaare Zion Torah Center 2030 Ocean Parkway Brooklyn, NY 11223	GENERAL FUND	17,052
Yismach Moshe 1879 East 2nd Street Brooklyn, NY 11223	GENERAL FUND	16,761
Zichron Binyamin 701 Princeton Avenue Lakewood, NJ 08701	GENERAL FUND	15,157
Meorot Avraham c/o Zichron Avrohom Eliyahu Inc. 944 Park Terrace Lakewood, NJ 08701	GENERAL FUND	15,000
Keren Zichron Rosh 1421 East 7th Street Brooklyn, NY 11230	GENERAL FUND	13,800
Yeshivat Sheerith Yosef PO Box 3145 Edison, NJ 08818	GENERAL FUND	13,200
Yeshivat Tiferet Tzion 13 Washington Avenue Lakewood, NJ 08701	GENERAL FUND	13,000
Kids Of Courage 1315B Broadway, Suite # 207 Hewlett, NY 11557	GENERAL FUND	12,000
Mirrer Yeshiva 1791-5 Ocean Parkway Brooklyn, NY 11223	GENERAL FUND	12,000

FORM 990-PF RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

Sucath David 1739 Ocean Parkway Brooklyn, NY 11223	GENERAL FUND	11,700
Tiferet Torah 1741 East 3rd Street Brooklyn, NY 11223	GENERAL FUND	11,400
Zichron Yaakov 1534 52nd Street Brooklyn, NY 11219	GENERAL FUND	10,502
Lmaan Daat 3072 Brighton 3rd Street Brooklyn, NY 11235	GENERAL FUND	10,300
Mesivta Tifereth Jerusalem 145 East Broadway New York, NY 10002	GENERAL FUND	10,000
Zohar Hatorah 4 East 34th Street New York, NY 10016	GENERAL FUND	10,000
Ohel Simha Cong. 295 Park Avenue Elberon, NJ 08701	GENERAL FUND	9,361
Yeshivat Torah Ore 3006 Avenue M, Suite 1B Brooklyn, NY 11210	GENERAL FUND	9,001
Synagogue Of Deal 128 Norwood Avenue Deal, NJ 07723	GENERAL FUND	8,703
Keter David 512 7th Avenue New York, NY 10018	GENERAL FUND	7,200

FORM 990-PF RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

Kollel Of Jersey Shore 295 Park Avenue Elberon, NJ 08701	GENERAL FUND	7,000
The Special Children's Center 1400 Prospect Street Lakewood, NJ 08701	GENERAL FUND	7,000
Yad Eliezer 1102 East 26th Street Brooklyn, NY 11210	GENERAL FUND	6,500
The Sephardic Food Fund 8 West 40th Street New York, NY 10018	GENERAL FUND	6,412
Yishrei Lev 525 Oberlin Avenue South Lakewood, NJ 08701	GENERAL FUND	6,300
Cong Zichron Yehuda Chana 2 Kakiat Lane Spring Valley, NY 10977	GENERAL FUND	6,260
Kamenitzer Yeshivah Of Jerusalem 50 Varick Street New York, NY 10013	GENERAL FUND	6,022
American Friends Of Binyan Av 1481 East 8th Street New York, NY 11230	GENERAL FUND	6,000
American Friends Of Hadrat Melech 711 Avenue R Brooklyn, NY 11223	GENERAL FUND	6,000
American Friends Of Meor Hatalmud 7 Webster Avenue Brooklyn, NY 11230	GENERAL FUND	6,000

FORM 990-PF RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

American Friends Of Shetilay Zetim 1739 Ocean Parkway Brooklyn, NY 11223	GENERAL FUND	6,000
Tiferet Tiberias Ohr Hagalil Inc. 241 Viola Road Monsey, NY 10952	GENERAL FUND	6,000
Rav Chesed 34 Ross Street Brooklyn, NY 11211	GENERAL FUND	5,824
Yeshivat Lev Aharon 1127 East Fifth Street Brooklyn, NY 11230	GENERAL FUND	5,500
Carmei Ha'ir 1565 East 9th Street Brooklyn N.Y 11230	GENERAL FUND	5,441
Hillel Yeshiva 1025 Deal Road Ocean, NJ 07712	GENERAL FUND	5,200
Chedvat Yaakov PO Box 5800 Jerusalem, Israel 91057	GENERAL FUND	5,127
Bais Binyamin 132 Prospect Street Stamford, CT 06901	GENERAL FUND	5,000
Machzikei Torah 48 Arosa Hill Lakewood, NJ 08701	GENERAL FUND	5,000
Nahalat Yosef 360 Kirby Avenue Elberon, NJ 07740	GENERAL FUND	5,000

FORM 990-PF RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

Ohr Yekaroth C/O Kol Torah: Bayit Vegan Jerusalem, Israel	GENERAL FUND	5,000
Torah Learning Resources 1924 East 7th Street Brooklyn, NY 11223	GENERAL FUND	5,000
Yeshiva Derech Eretz PO Box 230572 Brooklyn, NY 11223	GENERAL FUND	5,000
Yeshiva Shaare Yosher 4102 16th Avenue Brooklyn, NY 11204	GENERAL FUND	5,000
Yeshivat Ohr Hatorah	GENERAL FUND	4,701
Yeshivat Meor Hatorah	GENERAL FUND	4,600
Nahalat Moshe Inc.	GENERAL FUND	4,452
Bnei Binyamin Torah Center	GENERAL FUND	4,402
The Sarah Dabah Elementry School	GENERAL FUND	4,256
Kerem Ezra	GENERAL FUND	4,000
Darchei David Foundation	GENERAL FUND	3,926
Mishkan Meir	GENERAL FUND	3,864
Yeshiva Of Brooklyn	GENERAL FUND	3,842
Mifal Hatruma	GENERAL FUND	3,800
Ohr Yaakov	GENERAL FUND	3,792
Bnos Rivkah	GENERAL FUND	3,750
Shaare Zion	GENERAL FUND	3,681
Bnot Rachel Ashkelon	GENERAL FUND	3,600
Yeshivat Eitz Chaim Inc.	GENERAL FUND	3,600
Yeshivat Mikdash Melech	GENERAL FUND	3,600
Keren LaTorah	GENERAL FUND	3,500
Meorot Beit Yaakov	GENERAL FUND	3,360
Yeshivat Ateret Torah	GENERAL FUND	3,150
Yam Hatorah	GENERAL FUND	3,030
American Friends Of Shuvo Yisroel	GENERAL FUND	3,000
Lev Leachim Peylim	GENERAL FUND	3,000
Yeshivat Ohel Torah	GENERAL FUND	2,962
Mazkeret Halfon	GENERAL FUND	2,959

FORM 990-PF RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

Bnot Yisrael Elemenatary School	GENERAL FUND	2,950
American Friends Of Mishkan Meir	GENERAL FUND	2,927
Chofetz Chaim Heritage Foundation	GENERAL FUND	2,800
Special Ed Academy Of Deal S.E.A.D.	GENERAL FUND	2,800
llan High School	GENERAL FUND	2,701
Etz Hayim	GENERAL FUND	2,700
Zichron Avrohom Eliyahu	GENERAL FUND	2,689
Bet Yaakov Of The Jersey Shore	GENERAL FUND	2,606
Tov	GENERAL FUND	2,602
Cong Shaare Rahamim	GENERAL FUND	2,600
Khal Veretsky	GENERAL FUND	2,600
Neve Eretz	GENERAL FUND	2,600
Reach For The Stars Learning	GENERAL FUND	2,600
Yeshivat Magen Abraham	GENERAL FUND	2,600
Yeshivat Shaare Tevuna	GENERAL FUND	2,600
Matteh Moshe	GENERAL FUND	2,560
Deal Sephardic Network	GENERAL FUND	2,500
Yeshiva Rabbi Chaim Berlin	GENERAL FUND	2,500
Bircat Ephraim	GENERAL FUND	2,400
Keter Torah	GENERAL FUND	2,301
Girlstown Or Chadash	GENERAL FUND	2,278
Keren Yom Tov	GENERAL FUND	2,260
Ezrat Israel	GENERAL FUND	2,173
Or Chadash	GENERAL FUND	2,160
Yeshivat Mekor Chaim	GENERAL FUND	2,040
Netzach Israel	GENERAL FUND	2,022
Makor Hatorah	GENERAL FUND	2,000
Maor Yeshiva	GENERAL FUND	2,000
Torat Hanachal	GENERAL FUND	2,000
Yeshiva Zichron Mayir Of Mountaindale	GENERAL FUND	2,000
Central Fund Of Israel	GENERAL FUND	1,989
Ohel Yaakov Congregation	GENERAL FUND	1,913
Mitzvah Man Foundation	GENERAL FUND	1,900
Chasdei Yitzchak	GENERAL FUND	1,853
American Friends Of Hebron Yeshiva	GENERAL FUND	1,800
American Friends Of Mercaz Hachinuch Habeer	GENERAL FUND	1,800
American Friends Of Yeshivat Imrei Da'at	GENERAL FUND	1,800
American Friends Of Yeshivat Ohr Elchanan	GENERAL FUND	1,800
Benei Binyamin	GENERAL FUND	1,800
Bnot Rachel High School	GENERAL FUND	1,800

FORM 990-PF RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

Imrei Noam	GENERAL FUND	1,800
Kollel Ohr Yehuda	GENERAL FUND	1,800
Minyan Mir	GENERAL FUND	1,800
Ohr Joseph Institution	GENERAL FUND	1,800
Shaare Teshuba Vechaim	GENERAL FUND	1,800
Torat Chesed Trust	GENERAL FUND	1,800
Yeshiva Gedolah Zichron Moshe	GENERAL FUND	1,800
Yeshiva Mekor Chaim	GENERAL FUND	1,800
Yeshivat Yismach Lev Torat Moshe	GENERAL FUND	1,800
Cong Kiruv Krovim	GENERAL FUND	1,783
Chomat Zion	GENERAL FUND	1,766
Tov Lakol	GENERAL FUND	1,734
Maoz Tzur	GENERAL FUND	1,604
Yeshivat Keter Torah	GENERAL FUND	1,527
Sephardic Bikur Holim	GENERAL FUND	1,504
American Friends Of Birkat Israel	GENERAL FUND	1,500
American Friends Of Mercaz Hatorah	GENERAL FUND	1,500
Echo National Jewish Institute For Health	GENERAL FUND	1,500
Keter Shlomo	GENERAL FUND	1,500
Navat Yisrael	GENERAL FUND	1,500
Noam Hatorah	GENERAL FUND	1,500
Yeshivat Tiferet Moshe	GENERAL FUND	1,500
P.e.f.	GENERAL FUND	1,426
Mekor Hasfarim	GENERAL FUND	1,410
Ohr Nosson	GENERAL FUND	1,402
Sephardic Community Center	GENERAL FUND	1,400
Shaare Torah Vachesed	GENERAL FUND	1,362
American Friends Of Sanhedria Jerusalem Inc.	GENERAL FUND	1,352
Bonei Olam	GENERAL FUND	1,323
American Friends Of Chasdei Lev	GENERAL FUND	1,300
Yad Michael	GENERAL FUND	1,300
Mikdash Melech	GENERAL FUND	1,289
Chasdei Moshe	GENERAL FUND	1,263
Maskeel El Dal	GENERAL FUND	1,260
Hatzalah Of The Jersey Shore	GENERAL FUND	1,250
Tiferes Achim	GENERAL FUND	1,250
American Friends Of Bet Eliyahu	GENERAL FUND	1,200
Mabas Fund	GENERAL FUND	1,200
Tehila Le David	GENERAL FUND	1,189
Chai Lifeline	GENERAL FUND	1,180

FORM 990-PF RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

Ahavas Tzdoko Vochesed	GENERAL FUND	1,152
Ein Od Milvado	GENERAL FUND	1,127
Or Hatorah	GENERAL FUND	1,100
Ohr Layehudim Inc.	GENERAL FUND	1,003
Agudath Israel Of Long Island	GENERAL FUND	1,000
American Friends Of Bet David U'shlomo	GENERAL FUND	1,000
American Friends Of Darchei Noam	GENERAL FUND	1,000
American Friends Of Yeshivat Reisheet Chochma	GENERAL FUND	1,000
Aperion Shlomo	GENERAL FUND	1,000
Aram Soba Foundation	GENERAL FUND	1,000
Bait Leplitot Orphanage	GENERAL FUND	1,000
Bircat David	GENERAL FUND	1,000
Chanoch Lanaar	GENERAL FUND	1,000
CNHS Cougars For Cancer Awareness	GENERAL FUND	1,000
Eretz Shlomo Tzvi	GENERAL FUND	1,000
Friends Of Arachim	GENERAL FUND	1,000
Friends Of Keren Tzlach	GENERAL FUND	1,000
Kehal Bnei Torah	GENERAL FUND	1,000
Kollel Harabanim Aram Soba	GENERAL FUND	1,000
Mosdot Beth Yaacov	GENERAL FUND	1,000
Ohr Hashalom	GENERAL FUND	1,000
Otzar Hachesed	GENERAL FUND	1,000
Porat Yosef	GENERAL FUND	1,000
Prayers Of The Pure	GENERAL FUND	1,000
Rabbi Jacob Joseph School	GENERAL FUND	1,000
Sephardic Angel Fund	GENERAL FUND	1,000
Shaare Bina	GENERAL FUND	1,000
Shaare Rahamim	GENERAL FUND	1,000
Tikvot	GENERAL FUND	1,000
Toras Zeev Inc.	GENERAL FUND	1,000
Yaadir Torah	GENERAL FUND	1,000
Yad Avraham	GENERAL FUND	1,000
Yeshiva Gedola Of Bayonne	GENERAL FUND	1,000
Yeshiva Gedolah of Greater Detroit	GENERAL FUND	1,000
Yeshivat Rashi Mishkan Hatalmud	GENERAL FUND	1,000
Zichron Menachem	GENERAL FUND	1,000
Miscellaneous Contributions under \$1,000	GENERAL FUND	141,994
Totals		\$ 1,511,136

FORM 990-PF

RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

PART VII-A, LINE 10 – SUBSTANTIAL CONTRIBUTORS

STUDIO RAY, LLC C/O RAYMOND HABER 512 7TH AVENUE NEW YORK, NY 10018

FORM 990-PF

RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

PART I, LINE 1 – CONTRIBUTIONS, GIFTS, GRANTS RECEIVED IN EXCESS OF \$5,000.

STUDIO RAY, LLC

\$880,000

FORM 990-PF

RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

PART I, LINE 18 – TAXES

NYS DEPARTMENT OF LAW (FILING FEE)

\$<u>100</u>

TOTALS

<u>\$100</u>

FORM 990-PF

RETURN OF PRIVATE FOUNDATION

TAX YEAR BEGINNING: JANUARY 1, 2011 – DECEMBER 31, 2011 EMPLOYER INDENTIFICATION NUMBER: 20-2059762

PART I, LINE 23 – OTHER EXPENSES

OFFICE EXPENSES

<u>\$532</u>

8868

(Rev January 2012)

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

Internal Reve	enue Service					Щ.		
• If you a	re filing for a	an Automatic 3-Month Extension, c	omplete o	nly Part I and check th	ıs box			. ▶ 🗆
• If you a	ire filing for a	an Additional (Not Automatic) 3-Mo	nth Exten	sion, complete only Pa	irt II (on page 2 of	this f	form).	
Do not c	omplete Pa	ert II unless you have already been g	ranted an a	automatic 3-month exte	nsion on a previou	ısly fil	led Form	8868.
a corpora 8868 to a Return fo	ation require request an o or Transfers	file). You can electronically file Form and to file Form 990-T), or an additional extension of time to file any of the form Associated With Certain Personal re details on the electronic filing of the	al (not auto orms listed Benefit C	matic) 3-month extensi I in Part I or Part II with ontracts, which must	on of time. You can the exception of be sent to the IF	in ele Forn S in	ctronicall n 8870, l paper fo	ly file Form nformation ormat (see
Part I	Automa	atic 3-Month Extension of Time	Only sub	mit original (no copie	s needed).			
		red to file Form 990-T and reques				s box	k and co	mplete
		s (including 1120-C filers), partnershi						
	ome tax reti		,	.,				
				En	ter filer's identifying	g num	ber, see i	nstructions
	Name of	f exempt organization or other filer, see in:	structions.			tification number (EIN) or		
Type or print	RAYMOI	ND AND SHARON HABER FOUNDATION	N INC			20-2059762		
-	Number	, street, and room or suite no. If a P O. bo	x, see ınstru	ictions	Social security n	umbe	r (SSN)	
File by the due date fo	r C/O FLE	ET STREET LTD 18 ENGLEHARD AVE	NUE					
filing your	City, toy	vn or post office, state, and ZIP code. For	a foreign ac	dress, see instructions.				
return See instructions		, NJ 07001						
							•	
Enter the	Heturn cod	e for the return that this application is	s for (file a	separate application for	each return) .			0 4
Applica	ition		Return	Application				Return
Is For			Code	Is For				Code
Form 99	form 990 01 Form 990-T (corporation)			on)			07	
Form 99	90-BL		02	Form 1041-A	·			08
Form 99	90-EZ		01 Form 4720					09
Form 99	90-PF		04	Form 5227			10	
Form 99	90-T (sec. 40	01(a) or 408(a) trust)	05	Form 6069			11	
		ther than above)	06	6 Form 8870 12				12
Telephi If the o If this is for the wallist with	one No. rganization of significant for a Group, in the names request an antil AUC or the organi	732-382-8405 does not have an office or place of but to Return, enter the organization's four check this box ▶ ☐ . If I and EINs of all members the extension to the companion of the comp	usiness in to r digit Grou t is for parton on is for. rporation r	up Exemption Number (t of the group, check the equired to file Form 990	GEN) s box	▶ [If the	ach
2 If 3a If	Change in this applica onrefundabl	beginning rentered in line 1 is for less than 12 m accounting period tion is for Form 990-BL, 990-PF, 990 e credits. See instructions. ation is for Form 990-PF, 990-T, 4)-T, 4720, (or 6069, enter the tenta	tive tax, less any	urn 3a	, 20 \$	0 00
estimated tax payments made. Include any prior year overpayment allowed as a credit.					0 00			
c B								
E	FTPS (Electi	ronic Federal Tax Payment System).	See instruc	tions.		3с	\$	0 00
Caution.	If you are gon	ng to make an electronic fund withdrawal	with this Foi	rm 8868, see Form 8453-E	O and Form 8879-E0	O for p	payment in	structions.

Form 88	868 (Rev	v 1-2012)						Page 2
If yo	u are	filing for an Additional (Not Automatic) 3-Mo	onth Exten	sion, complete only Part	II and check th	ıs bo	κ. .	▶ 🗹
		complete Part II if you have already been grar			on a previously	filed	Form 8	3868.
If yo	u are	filing for an Automatic 3-Month Extension, o	complete o	only Part I (on page 1).				
Part		Additional (Not Automatic) 3-Month E	xtension	of Time. Only file the or	iginal (no copi	es n	eded)	
				Enter	filer's identifyin	g nun	ber, se	e instructions
Type	Or .	Name of exempt organization or other filer, see in	nstructions.		Employer identif	_		
Type or		RAYMOND AND SHARON HABER FOUNDATIO	N INC	E	_	20-2059762		
-		Number, street, and room or suite no. If a P.O. box, see instructions. Social security nu			umbe	r (SSN)		
	File by the due date for C/O FLEET STREET LTD: 18 ENGLEHARD AVENUE			1		` '		
filing yo	thing your City, town or post office, state, and ZIP code. For a foreign address, see instructions.							
return See instructions AVENEL, NJ 07001								
		eturn code for the return that this application i	is for (file a	separate application for ea	ach return)			. 04
Appr Is Fo	icatio	П	Return					Return
			Code					Code
Form			01	Application of the second	, i			57
	990-l		02	Form 1041-A				08
	990-		01	Form 4720				09
	990-	The second secon	04	Form 5227				10
		Γ (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form	990-	(trust other than above)	06	Form 8870				12
STOP!	! Do no	ot complete Part II if you were not already gra	anted an au	itomatic 3-month extensio	n on a previous	lv file	d Form	ı 8868.
4 5 6	I request for controls If the	names and EINs of all members the extension uest an additional 3-month extension of time talendar year 2011, or other tax year beginning tax year entered in line 5 is for less than 12 in nange in accounting period tan detail why you need the extension MISS	until ng months, che	· · · · · · · · · · · · · · · · · · ·		l retui		, 20 .
	estimated tax payments made. Include any prior year overpayment allowed as a credit and any			8a	\$	0.00		
_		unt paid previously with Form 8868.		4	CTDO	8b	\$	0 00
		nce due. Subtract line 8b from line 8a. Include yo ronic Federal Tax Payment System). See instruc		with this form, if required, b	by using EFTPS	8c	\$	0.00
	edge an	Signature and Verifica es of perjury, I declare that I have examined thi d belief, it is true, correct, and complete, and that I	is form, ıncl	uding accompanying schedu ted to prepare this form.	iles and stateme		nd to th	1
	/	14				F	offn 886	8 (Rev. 1-2012)