EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.

Form **990-PF**

Donart	mont		social security numbers on				ZUIU
Interna	Rev	enue Service Information about For	m 990-PF and its separate			gov/form990pf	Open to Public Inspection
For c	alen	dar year 2016 or tax year beginning		, and endir	ng		
Nam	e of	foundation				A Employer identification n	umber
R Z	ΔV	& SHARON HABER FOUNDAT	ION INC			20-2059762	
		nd street (or P O box number if mail is not delivered to street a		Ro	oom/suite	B Telephone number	
C	0	FLEET STREET - 18 ENGE	LHARD AVE	ļ	į	732-382-840	5
		own, state or province, country, and ZIP or foreign p				C If exemption application is pen	ding, check here
		NEL, NJ 07001					
		all that apply: Initial return	Initial return of a fo	ormer public char	rity	D 1. Foreign organizations,	check here $ ightharpoonup$
-	-	Final return	Amended return			0 -	
		Address change	X Name change			2 Foreign organizations meets check here and attach comp	putation
H CI	neck	type of organization: X Section 501(c)(3) ex	cempt private foundation			E If private foundation statu	s was terminated
	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation		under section 507(b)(1)(A	A), check here
I Fai	r ma	rket value of all assets at end of year J Accounti	ing method [.] X Cash	Accrual		F If the foundation is in a 60	0-month termination
(fro	om F		ther (specify)			under section 507(b)(1)(E	3), check here
	\$		mn (d) must be on cash b	pasis)			
Pa	řt l	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net inves income		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	1,800,599.		1 3 ,	N/A	8 % \$ 1 6 \ \$ 1 a
- {	2	Check If the foundation is not required to attach Sch. B		* , ,			
Ì	3	Interest on savings and temporary cash investments				Dr.	April 1994
- 1	4	Dividends and interest from securities					CEINEII
1	5a	Gross rents					
	b	Net rental income or (loss)			<u> </u>	AUG AUG	162017 8
as	6a	Net gain or (loss) from sale of assets not on line 10			8 3 5		
휣	b	233013 011 1110 02		<u> </u>	<u> </u>	100	J&
Revenue	7	· · ·			0.		JEN UT
"}	8	Net short-term capital gain			. 3 1 2		
ļ	9	Income modifications Gross sales less returns					
}		and allowances		3 3 3 3			
l		Less Cost of goods sold Gross profit or (loss)	* * * * , / , , ,	1 1 3 5		*******	Y Y J J J Y (V)
- 1	11				<u> </u>		11 11 11 11 11 11
- 1	12	Total. Add lines 1 through 11	1,800,599.		0.		11111111
-	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
_	14	Other employee salaries and wages					
\cong	15	Pension plans, employee benefits					
2	16a	Legal fees					-
P S	b	Accounting fees STMT 1	2,000.		0.		2,000.
ିଶ	C	Other professional fees		ļ		-	
وي ا	17	Interest		 			
F	18	Taxes STMT 2	25.		0.		25.
ist.	19	Depreciation and depletion					
逼	20	Occupancy		 			
Z.	21	Travel, conferences, and meetings		 			
and Administrativeres	22	Printing and publications	126.		0.		126.
	23	Other expenses STMT 3	120.		<u></u>		
Operatifie	24	Total operating and administrative	2,151.		0.	1	2,151.
ö	o.F	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	1,733,545.		<u>~</u>		1,733,545.
1		Total expenses and disbursements.	2,,33,323.	l		 	
]	20	Add lines 24 and 25	1,735,696.	[0.	1	1,735,696.
	27	Subtract line 26 from line 12:	-,,				
Ì		Excess of revenue over expenses and disbursements	64,903.	l			
}		Net investment income (if negative, enter -0-)			0.		
ŀ		Adjusted net income (if pegative enter -0-)		1		N/A	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2016)

Fo	m 99	0-PF (2016) RAY & SHARON HABER FOUN	DATION INC	20-	-2059762 Page 2
<u></u>	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year
뜨	art	column should be for end of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		62,153.	62,153.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	ĺ	Less allowance for doubtful accounts			
	4	Pledges receivable			
	<u> </u>	Less allowance for doubtful accounts	 	 	
	5	Grants receivable	} 		
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons			
	7	Other notes and loans receivable			
		Less' allowance for doubtful accounts	 		
ets	8	Inventories for sale or use	<u> </u>	 	
Assets	9	Prepaid expenses and deferred charges Investments - U.S. and state government obligations	 		
_	100		}		
	1 '	Investments - corporate stock	}		
	!	Investments - corporate bonds **Novestments - land, buildings, and equipment basis			
	''				
	1,0	Less accumulated depreciation			
	12	Investments - mortgage loans Investments - other			
		Land, buildings, and equipment basis			
	1"	Less accumulated depreciation			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			
	"	instructions. Also, see page 1, item I)	0.	62,153.	62,153.
_	17	Accounts payable and accrued expenses	 		
	18	Grants payable			
	19	Deferred revenue	<u> </u>		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	 		13 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
į	21	Mortgages and other notes payable			
Ę		Other liabilities (describe > BANK OVERDRAFT)	2,750.	0.	
	23	Total liabilities (add lines 17 through 22)	2,750.	0.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
ŝ	24	Unrestricted			
alances	25	Temporarily restricted			
Bai	26	Permanently restricted		<u> </u>	
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here			
Ä		and complete lines 27 through 31.	į .		
อัง	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	<2,750.>	62,153.	
Net	30	Total net assets or fund balances	<2,750.>	62,153.	
_			_		
_	31	Total liabilities and net assets/fund balances	0.	62,153.	
[F	art	III Analysis of Changes in Net Assets or Fund B	alances		
	==				Τ
1		net assets or fund balances at beginning of year - Part II, column (a), line	JU	<u> </u>	2 750 -
		st agree with end-of-year figure reported on prior year's return)		1	<2,750.> 64,903.
-		amount from Part I, line 27a		2	
3		r increases not included in line 2 (itemize)			62,153.
4		lines 1, 2, and 3		14	02,153.
-		eases not included in line 2 (itemize)	olumn (h) June 20	5	62,153.
<u>6</u> _	jutal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	oranii (v), mie av		Form 990-PF (2016)

_		SHARON HABER E					, <u>.</u>	2	0-205	9762	Page 3
							acquired lay, yr.)	(d) Dat (mo., d			
1					_					ļ	
_	NONE				 					 -	
	<u>c</u> d				-						
	<u>'</u>				t		_				
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss s (f) minus		
_											
_	b										
	e										
_	Complete only for assets showing gain	n in column (h) and owned by th	ne foundation	on 12/31/69		_			ol. (h) gain		
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1)					not less that (from col. (
	a										
_	<u> </u>										
_	<u> </u>										
_											
2	Capital gain net income or (net capital	loss) { If gain, also enter If (loss), enter -0-			\rightarrow	2					
3	Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colui		d (6):		}	_					
П	If (loss), enter -0- in Part I, line 8	r Section 4940(e) for I	Reduced	Tax on Net I	nve	estment	t Incon	ne			
	or optional use by domestic private four										
	•	-	, (u) ius on		,,,,,,	•,					
ΙŢ	section 4940(d)(2) applies, leave this pa	ITT DIANK.									
<u>lf</u>	as the foundation liable for the section 4 "Yes," the foundation does not qualify ur	nder section 4940(e). Do not con	plete this pai	rt.						Yes	X No
1	Enter the appropriate amount in each		structions bet	ore making any en						<u>/d\</u>	
	Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying disti	ributions	Net value of no	(c) nchai		assets	} .	Distrib	(d) ution ratio ided by col.	(c))
_	2015		3,153.			<20,7		 	(001. (0) 014		0000
	2014	1,157	7,564.			<35,2					0000
_	2013		1,538.			<1,4					0000
_	2012		7,179.	 			237.	ļ		34.73	
_	2011	1,511	1,768.			185,	563.	 		8.14	6926
	Total of line 1, column (d)		- l 0 b 5	au h	_4			2_		42.88	3744
3	Average distribution ratio for the 5-yea the foundation has been in existence if	•	n line 2 by 5,	or by the number	or ye	ars		3		8.57	6749
4	Enter the net value of noncharitable-us	e assets for 2016 from Part X, lii	ne 5					4		34,	142.
5	Multiply line 4 by line 3							5		292,	827.
6	Enter 1% of net investment income (19	% of Part I, line 27b)						6			0.
7	Add lines 5 and 6							7		292,	827.
8	Enter qualifying distributions from Part	XII, line 4						8		1,735,	696.
	If line 8 is equal to or greater than line See the Part VI instructions.	7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1º	% tax rate.					

	1990-PF (2016) RAY & SHARON HABER FOUNDATION INC			<u>9762</u>		Page 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u> 4948 -</u>	· see i	instruc	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1.		À 1	* " "		,
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1, 4,8	1183			* **
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1_1_	1			0.
	of Part I, line 27b		, , ,	9 1 1	* 1 /	' x /
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	· .3				A 15
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	1.2 /	m' m 2	אלה הברי	Ő.
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-)	4	1			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1			0.
6	Credits/Payments;		\ * ;	, 32 % r	- X	- X
	2016 estimated tax payments and 2015 overpayment credited to 2016					1,4
	Exempt foreign organizations - tax withheld at source		1 1 3		17	3 4 4
	Tax paid with application for extension of time to file (Form 8868) 6c]]	344	13	
	Backup withholding erroneously withheld 6d			100		
	Total credits and payments. Add lines 6a through 6d	٦ ⁻ , ١] " *	× 1. 11	. % %	0.
	· ·	<u> </u>	┼			<u> </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	}			0.
	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 2017 estimated tax Refunded	11				
				\ \ \ \ \	Vaa	Na
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervel	ie in		<u> </u>	Yes	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	•		1b	3 5	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed or				3 1 1
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0	<u>•</u>		1 3		1 1 3
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$ 0 .				. ¥. i	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	<u> </u>	X
_	If "Yes," attach a detailed description of the activities				}	(a)
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				4. 2
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3.	. / .	4a		<u>x</u> _
	If "Yes," has it filed a tax return on Form 990-T for this year?	IV	1/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or				30	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state.	te law			11	1.22
	remain in the governing instrument?			6	X	
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 X	V		7	Х	
) \{\bar{4}
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				* * *	
	NY					
p	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				اعُا	
	of each state as required by General Instruction G? If "No," attach explanation			ВЬ	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(5)$ for call	endar		\$ &		
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV					<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		Х
			Fo	orm 990	⊢PF ((2016)

orm	990-PF (2016) RAY & SHARON HABER FOUNDATION INC	20-2059	762		Page 5
Pa	ort VII-A Statements Regarding Activities (continued)				
				Yes	No
	Manufacture described to the described t			. 00	
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 make a distribution to a donor advised fund over which the foundation or a disqualified person had adviso	ry privileges?			}
	If "Yes," attach statement (see instructions)	į	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	i	13	Х	_
	Website address ► N/A				
		no. ►732~38	2 0	40E	
14				403	
	Located at ►C/O FLEET STREET - 18 ENGELHARD AVE, AVENEL, NJ	ZIP+4 ▶ 07	001		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				\cdot
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities, or other financial account in a foreign country?	1	16		X
	· - ·		. 10		 -
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		\ <	· X ·	
_	foreign country		٠.	<u> </u>	<u> </u>
<u>Pa</u>	art 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.		4	Yes	No
1a	During the year did the foundation (either directly or indirectly):	ŀ	s	A 1	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No	,,	Ü	,
] 163 [<u>**</u>] 140			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	ਹ ਵਿਤਾਜ਼		(%)	
	a disqualified person?	Yes X No	\$ %	s, 6	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	* :	4.4	4 2
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	1 1	2 L	3 %
	(5) Transfer any income or assets to a disqualified person (or make any of either available	ŧ			1
	for the benefit or use of a disqualified person)?	Yes X No	, 1	~~	. 🖟 🛴
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		\$ \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	> "	. 6)
	If the foundation agreed to make a grant to or to employ the official for a period after		1 1		(4)
		Yes X No		¥ *]	` & '
		Yes (A) No	* .	7, 7,	1 1
b	lf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4-	1.		1 ×
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	▶□ !	4 5	39	1
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			*	
_	before the first day of the tax year beginning in 2016?		10	- ·	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	on		¥ . %	3 8 4
-		JII		<u> </u>	(a :
	defined in section 4942(j)(3) or 4942(j)(5)):		3 3	· 1	* *
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) begin		4 ¥	13	* (
	before 2016?	Yes X No	2 - 3		1
	If "Yes," list the years >		3	. /	A &
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incor	rect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and at	1		6	
	statement - see instructions.)	N/A	2ь	ž	oii. o da . é
	,	11/21	- <u>- 20</u>	ž.	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1	%. }	\$ 'k	\
	• ————————————————————————————————————		1 1		1.5
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		4	* %	* ,
	during the year?	Yes X No	, a	5	
Ь	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons	s after	1,5	٠, ،	· *
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) t		- \$ s	ا ۽ د	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedul	• •	Ś	. *]	, .
		e C, N/A	- ;;	: }	<u>l</u>
	Form 4720, to determine if the foundation had excess business holdings in 2016)	M/W	_3b_	}	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	ļ	_4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purp	ose that	.		•
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?		4b		<u>X</u>
		Fort	ո 990	-PF (2016)

RAY & SHARON HABER FOUNDATION INC

20-2059762

Form 990-PF (2016)

Form 990-PF (2016) RAY & SHARON HABER FOUNDA			<u> 20-20597</u>	62 Page 6		
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)			
5a During the year did the foundation pay or incur any amount to.						
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y	es X No	1 1		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,						
any voter registration drive?	- , - ,		es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?		es X No			
(4) Provide a grant to an organization other than a charitable, etc., organization		· ·				
• • • • • • • • • • • • • • • • • • • •	i negrupen ili geriibil		es X No	· l l		
4945(d)(4)(A)? (see instructions)			ES A NO	اُو اِي اِ		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or r					
the prevention of cruelty to children or animals?			es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	n Regulations		` ##		
section 53.4945 or in a current notice regarding disaster assistance (see instruc	•		N/A	5b		
Organizations relying on a current notice regarding disaster assistance check he	ere					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr						
expenditure responsibility for the grant?	N	I/A Y	es L No			
If "Yes," attach the statement required by Regulations section 53 4945-			ļ			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			2011 1 1 2		
a personal benefit contract?		Y	es X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X		
If "Yes" to 6b, file Form 8870			Ī			
7a At any time during the tax year, was the foundation a party to a prohibited tax si	helter transaction?	[Y	es X No	N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
Part VIII Information About Officers, Directors, Truste		nagers, Highly		·		
Paid Employees, and Contractors	,	0 , 0 ,				
1 List all officers, directors, trustees, foundation managers and their of	ompensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances		
RAYMOND HABER	PRESIDENT	tines o /	Compensation	unowanous		
1010 EAST 7TH STREET		ĺ		}		
BROOKLYN, NY 11230	1.00	0.	О.	0.		
	VICE PRESIDEN		.	<u> </u>		
1010 EAST 7TH STREET	TICE TREBIBER	Ī				
BROOKLYN, NY 11230	1.00	0.	0.	0		
	SECRETARY	 · · · · · · · · · · · · · · · 	· · ·	0.		
	DECKETAKI	1				
	1 00		_	_		
AVENEL, NJ 07001	1.00	0.	0.	0.		
_ 		(
		į				
			L			
2 Compensation of five highest-paid employees (other than those incl		enter "NUNE."	(d) Contributions to	/-> Cu		
(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		
·	devoted to position		compensation	allowances		
NONE						
						
			ı			
······································						
				<u> </u>		
		<u> </u>	ļ			
		}				
Total number of other employees paid over \$50,000			▶ 1	0		
			Form	990-PF (2016)		
				()		

Form 990-PF (2016) RAY & SHARON HABER FOUNDATION INC		59762 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
]
		1
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
L	dustana and as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produce	ed, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
1N/A		
_ 		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
		Form 990-PF (2016)

Part X Minimum Investment Return (All domestic foundations must complete this	part Foreign foundations, s	see instructions)
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	l 1a	0.
b Average of monthly cash balances	1b	34,662.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	34,662.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	34,662.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	520.
5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	34,142.
6 Minimum investment return. Enter 5% of line 5	6	1,707.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	ating foundations and certain	
foreign organizations check here and do not complete this part.)		1,707.
1 Minimum investment return from Part X, line 6	1	1,707.
2a Tax on investment income for 2016 from Part VI, line 5	 ,	
b Income tax for 2016. (This does not include the tax from Part VI.)	·- *	0
c Add lines 2a and 2b	_ 2c	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	1,707.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	1,707.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		1,707.
Part XII 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	1,735,696.
b Program-related investments - total from Part IX-B	1b	0.
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.	N. V.	
a 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	1,735,696.
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	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,735,696.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth		
4940/e) reduction of tax in those years	a.e vooridation quantito for	

Form 990-PF (2016)

Part XIII Undistributed Income	(see instructions)		20-	-2059762 _{Pa}
	(a)	(b)	T	
Distributable amount for 2016 from Part XI, line 7.	Corpus	Years prior to 2015	(c)	(d)
line 7			2015	2016
2 Undistributed income if any as of the end of 2016		1		
a Enter amount for 2015 only	,			1 70
b Total for prior years.				1,70
o votal for prior years.			0.	·
2 Evenes dietal		1		
3 Excess distributions carryover, if any, to 2016	·	0.		,
11,502 490 1	1	* ⁴		
11.465 0677			·	
CFTOM 2013 1.214 538	, , , },	, į̇̃ ė̇̃	4 3	40
d From 2014 1,157,564.			* * * * * * * * * * * * * * * * * * * *	
e From 2015 1,413,153.			* \$ }	*
f Total of lines 3a through e				
4 Qualifying distribution	6,752,812.			
4 Qualifying distributions for 2016 from	17/1/1	- (3) (8) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4		
Part XII, line 4. > \$ 1,735,696.				***
a Applied to 2015, but not more than to a				(4 54 7)
o Applied to Undistributed income of prior	2 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	X * 7 × 7 × 7 × 7 × 7 × 7 × 7 × 7 × 7 × 7	~ · · · · · · · · · · · · · · · · · · ·	
years (Election required - see material)			0.	<u> </u>
c Treated as distributions out of corpus		0.		
(Election required - see instructions)				
d Applied to 2016 distributable amount	0.J			
e Remaining amount distributable amount	333	7		
e Remaining amount distributed out of corpus	1,733,989.			1 500
(If an amount appearance applied to 2016	0.		* 1	1,707.
6 Enter the net total of each column as indicated below				0.
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	O ACC MANAGEMENT			
u Frior years' undistributed income Subtract	8,486,801.			
line 4b from line 2b	i:	**************************************		
c Enter the amount of prior years!	**************************************	, }	14. St. Ca.	
undistinguisting properties in the second seconds of the second s	Maisir:	0.		
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		Į,		
d Subtract line 6c from line 6b. Taxable	**************************************	0.		
amount - see instructions			- (}}	
e Undistributed income for 2015. Subtract line		0.		
Ta Hulli line 2a. Taxable amount - coo least	*; 			
Olidistributed income for 2016 Subtract				
lines 4d and 5 from line 1. This amount must	4 181		0.	
be distributed in 2017	jį liši			
Amounts treated as distributions out of				
Cornus to satisfy to save				_
corpus to satisfy requirements imposed by	*		1 19.0	0.
30011011 170(B)(1)(F) or 4942(n)(2) (Electronic	1			
may be required - see instructions)	_	(); 	,	
EXCESS distributions carryover from 2011	0.		* · · · · · · · · · · · · · · · · · · ·	
rot applied on line 5 or line 7				44
Excess distributions carryover to 2017	,502,490.	1*		1
Subtract lines 7 and 0.4	J		· · ·	
analysis of line 9.	,984,311.	1		, ,
				· .
7-03,007.				- <u> </u>
<u> </u>	}	1	}	,
xcess from 2014 1,157,564.	1	1		\$ 4
cess from 2015 1,413,153.				
reaction and a second	1	i	{	Ē
Cess from 2016 1,733,989.	Į.	ſ	ſ	_ f

Form 990-PF (2016) RAY & S	HARON HABER	FOUNDATION	INC	20-20	59762 Page
Part XIV Private Operating F	oundations (see in:	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2016, enter the date of t	he ruling	▶		
b Check box to indicate whether the foun	d <u>ation is a private operatin</u>	ig foundation described in	section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for				1	
each year listed			}	}	1
b 85% of line 2a			 	 -	
c Qualifying distributions from Part XII,	ļ			 	
· ·			{	}	}
line 4 for each year listed					
d Amounts included in line 2c not					4.
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			į ((Į.
for active conduct of exempt activities.			l		[
Subtract line 2d from line 2c			 	 	
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter.	ŀ		Ì		
(1) Value of all assets			L	<u> </u>	L
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)	ļ			}	
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year			ł	ļ	
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)					<u></u>
(2) Support from general public	ì				
and 5 or more exempt organizations as provided in	ľ	1		1	
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization				1	
(4) Gross investment income					
Part XV Supplementary Info			the foundation	had \$5,000 or mor	e in assets
at any time during t	he year-see instrı	uctions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	_	han 2% of the total contri	butions received by the	foundation before the close	e of any tax
year (but only if they have contributed in	nore than \$5,000). (See se	ection 507(d)(2).)		700110200110010010001	7 Or arry tax
RAYMOND HABER					
b List any managers of the foundation wh	o own 10% or more of the	stock of a corporation (or an equally large ports	on of the ownership of a pa	etnorchin or
other entity) of which the foundation ha			or arr equally large portion	on of the ownership of a pa	tile stilp of
NONE	· ·				
	on Crant Citt Loon	Cabalarahın ata Dua			
2 Information Regarding Contribution Check here ► X if the foundation of					-1-1-1-11
the foundation makes gifts, grants, etc.					
	`				·
a The name, address, and telephone num	per or e-mail address of tr	ie person to wnom applic	ations snould be addres	sed:	
b The form in which applications should t	e submitted and informati	on and materials they sh	ould include		
- The form of the first appropriate of the fir					
c Any submission deadlines:					
d Any restrictions or limitations on award	s such as by gengraphica	l areas charitable fields 1	kinds of institutions or	ther factors	
a raily resolutions of initiations off award	o, ocon ao ny geograpinea	. a. 505, 6110112016 116105, 1	amas or madiudons, or t	omor inotoro,	

Form 990-PF (2016) RAY & SHARON HABER FOUNDATION INC Part XV Supplementary Information (continued) 20-2059762 Page 11 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) a Paid during the year SEE ATTACHED SCHEDULE NONE CHARITABLE PURPOSES 1,733,545. 1,733,545. **▶** 3a Total **b** Approved for future payment NONE Total **▶** 3b

Unrelated business income

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

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ided by section 512 513, or 514	(e)
•	(a) Business	(b)	(c) Exclu- sion	(d)	Related or exempt
1 Program service revenue	code	Amount	code	Amount	function income
a			<u> </u>		
b			<u> </u>		
c	 				
d	 		├ ──		
e	1		}		
1			-		
g Fees and contracts from government agencies					
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash					
Investments 4 Dividends and interest from securities			 		
5 Net rental income or (loss) from real estate:	1,3		14		1 1 1 1 1 1 1 1 1
a Debt-financed property	**	7.4.4.	* *	,	***************************************
b Not debt-financed property			 		
6 Net rental income or (loss) from personal	—				
property	1 1		İ		
7 Other investment income			1		 -
8 Gain or (loss) from sales of assets other			<u> </u>		
than inventory					
9 Net income or (loss) from special events			1		<u> </u>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.	ķ	0	
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acco	mplishment of Exc	empt	Purposes	
Line No. Explain below how each activity for which inco			contril	outed importantly to the acci	omplishment of
the foundation's exempt purposes (other than	by providing lan	us for such purposes).			
					
					
		·			·
		····			
					
					
					
823621 11-23-16					Form 990-PF (2016)

Form 990-PF (2	016) RAY &	SHARON H						059762	Pa	nge 13
Part XVII	Information Re Exempt Organ		sfers To a	nd Transa	ctions a	nd Relationsh	ips With Noncl	naritable		
1 Did the or	ganization directly or indi		of the followin	g with any othe	r organizatio	in described in secti	on 501(c) of	7	Yes	No
	other than section 501(c)							*	5	
a Transfers	from the reporting found:	ation to a noncharitat	ole exempt org	ganization of				~-4	2000	۱
(1) Cash								1a(1)	<u> </u>	X
(2) Other								1a(2)		X
b Other trans	sactions: of assets to a noncharita	ble everet erganizat	100					16/1)	-	х
· ,	nases of assets from a no	, ,						1b(1) 1b(2)		X
	il of facilities, equipment,		gamzanon					1b(3)		Х
• •	bursement arrangements							1b(4)		Х
(5) Loans	s or Ioan guarantees							1b(5)		Х
(6) Perfo	rmance of services or me	embership or fundrais	sıng solıcıtatıo	ns				1b(6)		X
-	f facilities, equipment, ma	-						<u> </u>	L .	Х
	ver to any of the above is		-		•				ets,	
	s given by the reporting for the yoods,			eo iess man iair	market valu	e in any transaction	or snaring arrangeme	nt, snow in		
	(b) Amount involved			e exempt organ	ızatıon	(d) Description	of transfers, transactions,	and sharing arra	angemen	ıts
3,7	<u> </u>		N/A		-					
			-							
										—
				_						
-										
	<u> </u>									
										
										
	ndation directly or indirec	tly affiliated with or i	related to one	or more tax-ex	emnt organi	zations described				
	501(c) of the Code (othe	•			compt or gam	241.0110 000011000		Yes	X	No
	omplete the following sch									
	(a) Name of or	ganization		(b) Type of o	rganization		(c) Description of rela	tionship		
	N/A									
										
-		<u> </u>		 		 				
								-		
Under	penalties of perjury I declare							May the IRS o	hecuse t	hie
Sign 🛌	elief, it is true, correct and con	mplete Declaration of pre	parer (other than	taxpayer) is base	on all informa	tion of which preparer h	as any knowledge	return with the shown below	prepare	er e
Here			<u>-</u> -	<i>_\Y</i>	1117	PRESI	ENT	X Yes	`] No
Sign	nature of officer of trustee	_,	T	Date	1./	Title	011-			
	Print/Type preparer's na	ame	Preparer's s	ignature		Date		TIN		
Paid	LEE M COULE	N CDA	1 Lu	m we		00/02/17	self- employed	D000E7	E C 0	
Preparer	LEE M COHE Firm's name ► LM		O T.T.D			08/02/17	Firm's EIN ► 46	<u>P00057</u> -41337		
Use Only	roms name > 1111	COMMIN & C	יונע ט.				THIN SEIN P 30	******	-	
•	Firm's address ▶ 1	WEST 34TH	STREE	T, 8TH	FL					
		W YORK, N					Phone no. 212	-967-2	<u> 300</u>	

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. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

its instructions is at www irs gov/form990 .

OMB No 1545-0047

Employer identification number

R	AY & SHARON HABER FOUNDATION INC	20-2059762					
Organization type (check of	ne)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
· · ·	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special f	Rule. See instructions					
General Rule							
	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions						
Special Rules							
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppo and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16 or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amo , line 1 Complete Parts I and II.	a, or 16b, and that received from					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.							
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B I Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

۷	ame	of	org	anization	
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Employer identification number

RAY_&	SHARON HABER FOUNDATION INC		20-2059762
Part I	Contributors (See instructions) Use duplicate copies of Part I if a	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
1	STUDIO RAY LLC C/O RAYMOND HABER 512 7TH AVE. NEW YORK, NY 10018	\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) S Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) S Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
623452 10-18	3-16	Schedule B	(Form 990, 990-EZ, or 990-PF) (2016)

Employer identification number

	HARON HABER FOUNDATION INC Ioncash Property (See instructions) Use duplicate copies of Part		20-2059762
	Concession Froberty (See instructions) Use duplicate copies of Part	II II additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- =		s	
		^Ψ	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_	Ì
		\$	-
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			
-		 	·
(a) No.	(b)	(c) FMV (or estimate)	(d)
rom Part I	Description of noncash property given	(See instructions)	Date received
_ _			
			n 990, 990-EZ, or 990-PF) (2

Name of orga	inization			Employer identification number				
RAY &	SHARON HABER FOUNDATION	INC		20~2059762				
Part III	Exclusively religious, charitable, etc., contributor. Complete completing Part III enter the total of exclusively religious. Use duplicate copies of Part III if additional	ibutions to organizations described columns (a) through (e) and the following charitable, etc. contributions of \$1,000 or	WING line entry For property	r (10) that total more than \$1,000 for				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	scription of how gift is held				
		(e) Transfer of gr	t					
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of tr	ansferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	scription of how gift is held				
	(e) Transfer of gift							
-	Transferee's name, address, an	nd ZIP + 4	Relationship of tr	ansferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held				
-	(e) Transfer of gift							
-	Transferee's name, address, an	Relationship of tr	ansferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) De:	scription of how gift is held				
-	(e) Transfer of gift							
}	Transferee's name, address, an	nd ZIP + 4	Relationship of tr	ansferor to transferee				
{ -								
1								

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES	
ACCOUNTING FEE	2,000.	0.		2,000.	
TO FORM 990-PF, PG 1, LN 16B	2,000.	0.		2,000.	
FORM 990-PF	TAXES		STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
NYS REGISTRATION FEE	25.	0.		25.	
TO FORM 990-PF, PG 1, LN 18 =	25.	0.		25.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	NET INVEST-		CHARITABLE	
OFFICE	126.	0.		126.	
TO FORM 990-PF, PG 1, LN 23	126.	0.		126.	