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Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation**
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

OMB No 1545-0052

2009

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

For calendar year 2009, or tax year beginning , 2009, and ending , 20

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name changeUse the IRS
label.
Otherwise,
print
or type.
See Specific
Instructions.

Name of foundation

FRANK & ROSLYN GROBMAN FOUNDATION

A Employer identification number

11-3241420

Number and street (or P O box number if mail is not delivered to street address)

C/O DUNS SUPREME SUPERMARKETS, INC
474 FULTON AVENUE

Room/suite

B Telephone number (see page 10 of the instructions)

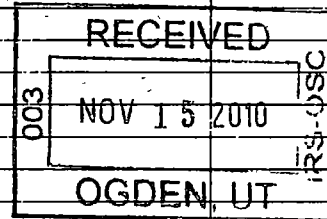
() -

City or town, state, and ZIP code

HEMPSTEAD, NY 11550

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐H Check type of organization. ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundationI Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 2,365,506.
J Accounting method: ☒ Cash ☐ Accrual
☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)**Part I Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions).)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)				
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments	26,111.	26,111.	26,111.	ATCH 1
4 Dividends and interest from securities	84,974.	84,974.	84,974.	ATCH 2
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	-308,180.			
b Gross sales price for all assets on line 6a	292,797.			
7 Capital gain net income (from Part IV, line 2)				
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)	-32,420.	-32,420.	-32,420.	ATCH 3
12 Total. Add lines 1 through 11	-229,515.	78,665.	78,665.	
13 Compensation of officers, directors, trustees, etc.	0.			
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule)				
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see page 14 of the instructions)	5,880.	5,880.	5,880.	
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule) ATCH 5	1,412.	1,412.	1,412.	
24 Total operating and administrative expenses. Add lines 13 through 23	7,292.	7,292.	7,292.	
25 Contributions, gifts, grants paid	122,886.			122,886.
26 Total expenses and disbursements. Add lines 24 and 25	130,178.	7,292.	7,292.	122,886.
27 Subtract line 26 from line 12	-359,693.			
a Excess of revenue over expenses and disbursements		71,373.		
b Net investment income (if negative, enter -0-)			71,373.	
c Adjusted net income (if negative, enter -0-)			71,373.	



Operating and Administrative Expenses

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

JSA ** ATCH 4

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		234,792.	105,501.	105,501.
	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 page 16 of the 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				
	10 a	Investments - U.S. and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule) ATCH 6	261,581.	229,721.	273,150.	
	c	Investments - corporate bonds (attach schedule) ATCH 7	619,292.	606,379.	545,437.	
	11	Investments - land, buildings, and equipment basis				
	Less: accumulated depreciation (attach schedule)					
12	Investments - mortgage loans					
13	Investments - other (attach schedule) ATCH 8	1,217,748.	1,032,119.	1,441,418.		
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)	2,333,413.	1,973,720.	2,365,506.		
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)				
23	Total liabilities (add lines 17 through 22)					
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/>					
	and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>					
	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	2,333,413.	1,973,720.		
	30	Total net assets or fund balances (see page 17 of the instructions)	2,333,413.	1,973,720.		
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	2,333,413.	1,973,720.			

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)	1	2,333,413.
2	Enter amount from Part I, line 27a	2	-359,693.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	1,973,720.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,973,720.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate 2-story brick 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 SEE PART IV SCHEDULE					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)			2	-308,180.	
{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }					
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			3		
If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8.					

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☐ No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008			
2007			
2006			
2005			
2004			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of ruling letter if necessary - see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	1,427.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	
3 Add lines 1 and 2		3	1,427.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	1,427.
6 Credits/Payments			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	3,602.	
b Exempt foreign organizations-tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	3,602.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	2,175.	
11 Enter the amount of line 10 to be Credited to 2010 estimated tax	11	2,175.	Refunded

Part 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?	1a		X
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)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b		X
c Did the foundation file Form 1120-POL for this year?	1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ (2) On foundation managers \$			
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? If "Yes," attach a detailed description of the activities.	2		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 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 XV	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions)			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV	9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of, section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ▶ N/A				
14	The books are in care of ▶ D'ANS SUPREME SUPERMARKETS, INC Telephone no ▶ 516-483-2400			
Located at ▶ 474 FULTON AVENUE HEMPSTEAD ZIP + 4 ▶ 11550				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	▶ <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the year		15		

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	X
	Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/>		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	If "Yes," list the years ▶		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b	X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

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))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? ☐ Yes ☒ No
Organizations relying on a current notice regarding disaster assistance check here ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No
If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☐ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☐ No
If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
FRANK GROBMAN	DIRECTOR	0.	0.	0.
RICHARD GROBMAN	DIRECTOR	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE."

(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
NONE				

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services** (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services **NONE****Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3	

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the 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	1a	1,021,882.
b	Average of monthly cash balances	1b	112,174.
c	Fair market value of all other assets (see page 24 of the instructions)	1c	985,892.
d	Total (add lines 1a, b, and c)	1d	2,119,948.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,119,948.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions)	4	31,799.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,088,149.
6	Minimum investment return. Enter 5% of line 5	6	104,407.

Part XI Distributable Amount (see page 25 of the 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	104,407.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	1,427.
b	Income tax for 2009 (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	1,427.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	102,980.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	102,980.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	102,980.

Part XII Qualifying Distributions (see page 25 of the 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	122,886.
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	0.
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	122,886.
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 page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	122,886.

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

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7			-	102,980.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only				
b Total for prior years 20 07, 20 06, 20 05				
3 Excess distributions carryover, if any, to 2009				
a From 2004	32,903.			
b From 2005	80,339.			
c From 2006				
d From 2007	35,638.			
e From 2008	52,066.			
f Total of lines 3a through e	200,946.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 122,886.				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d Applied to 2009 distributable amount				102,980.
e Remaining amount distributed out of corpus	19,906.			
5 Excess distributions carryover applied to 2009. (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	220,852.			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	32,903.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	187,949.			
10 Analysis of line 9				
a Excess from 2005	80,339.			
b Excess from 2006				
c Excess from 2007	35,638.			
d Excess from 2008	52,066.			
e Excess from 2009	19,906.			

Form 990-PF (2009)

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9) NOT APPLICABLE

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see page 28 of the instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2))

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed

N/A

b The form in which applications should be submitted and information and materials they should include:

N/A

c Any submission deadlines

N/A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

N/A

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year ATTACHMENT 9				
Total.			3a	122,886.
b Approved for future payment				
Total.			3b	

Form 990-PF (2009)

Part XVII

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

- | | | | |
|---|--|-----|----|
| 1 | <p>Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p>a Transfers from the reporting foundation to a noncharitable exempt organization of</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p>b Other transactions</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received</p> | Yes | No |
| | | | |
| | 1a(1) | | X |
| | 1a(2) | | X |
| | | | |
| | 1b(1) | | X |
| | 1b(2) | | X |
| | 1b(3) | | X |
| | 1b(4) | | X |
| | 1b(5) | | X |
| | 1b(6) | | X |
| | 1c | | X |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer or trustee

Date _____

Title

**Paid
Preparer's
Use Only**

Preparer's
signature

Date _____

Check if self-employed ☐

Preparer's identifying
number (See **Signature** on
page 30 of the instructions)
122-36-4004

Firm's name (or yours if self-employed), address, and ZIP code

ARTHUR YORKES & COMPANY LLP
520 EIGHTH AVENUE - 18TH FLOOR
NEW YORK, NY 10018

EIN ▶	13-3247887
Phone no	212-764-8888

FORM 990-PF - PART IV**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				P or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL SHORT-TERM CAPITAL GAIN DIVIDENDS					470.	
		TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS					150.	
		SEE ATTACHMENT				P	VARIOUS	VARIOUS
100,078.		PROPERTY TYPE: SECURITIES					27,795.	
		72,283.						
		SEE ATTACHMENT				P	VARIOUS	VARIOUS
192,099.		PROPERTY TYPE: SECURITIES					-336,595.	
		528,694.						
TOTAL GAIN (LOSS)							<u>-308,180.</u>	

ATTACHMENT 1FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>
INTEREST INCOME	26,111.	26,111.	26,111.
TOTAL	<u>26,111.</u>	<u>26,111.</u>	<u>26,111.</u>

ATTACHMENT 2FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>
DIVIDENDS	84,974.	84,974.	84,974.
TOTAL	<u>84,974.</u>	<u>84,974.</u>	<u>84,974.</u>

ATTACHMENT 3FORM 990PF, PART I - OTHER INCOME

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
OTHER INCOME / LOSS	-32,420.	-32,420.	-32,420.
TOTALS	-32,420.	-32,420.	-32,420.

ATTACHMENT 4FORM 990PF, PART I - TAXES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>
FOREIGN TAX PAID	380.	380.	380.
IRS TAXES	5,000.	5,000.	5,000.
NYS FILING FEE	500.	500.	500.
TOTALS	<u>5,880.</u>	<u>5,880.</u>	<u>5,880.</u>

ATTACHMENT 5FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
BANK FEES	150.	150.	150.
MISCELLANEOUS	1,262.	1,262.	1,262.
TOTALS	<u>1,412.</u>	<u>1,412.</u>	<u>1,412.</u>

FORM 990PF, PART II - CORPORATE STOCKATTACHMENT 6DESCRIPTIONENDING
BOOK VALUEENDING
FMV

CORPORATE SECURITIES

229,721.

273,150.

TOTALS

229,721.273,150.

FORM 990PF, PART II - CORPORATE BONDS

<u>DESCRIPTION</u>	<u>ATTACHMENT 7</u>	
	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
CORPORATE BONDS	606,379.	545,437.
TOTALS	<u>606,379.</u>	<u>545,437.</u>

FORM 990PF, PART II - OTHER INVESTMENTSATTACHMENT 8

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
MUTUAL FUNDS	632,822.	455,526.
INVESTMENT IN PARTNERSHIPS	399,297.	985,892.
TOTALS	<u>1,032,119.</u>	<u>1,441,418.</u>

SCHEDULE D
(Form 1041)

Department of the Treasury
Internal Revenue Service

Capital Gains and Losses

► **Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).**

OMB No 1545-0092

2009

Name of estate or trust

FRANK & ROSLYN GROBMAN FOUNDATION

Employer identification number

11-3241420

Note: Form 5227 filers need to complete *only* Parts I and II.

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a SHORT-TERM CAPITAL GAIN DIVIDENDS					470.

b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b	1b	27,795.
2 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	2	
3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts	3	
4 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss Carryover Worksheet	4	()
5 Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back ►	5	28,265.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo, day, yr)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a LONG-TERM CAPITAL GAIN DIVIDENDS					150.

b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b	6b	-336,595.
7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824	7	
8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts	8	
9 Capital gain distributions	9	
10 Gain from Form 4797, Part I	10	
11 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss Carryover Worksheet	11	()
12 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back ►	12	-336,445.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

Part III Summary of Parts I and II		(1) Beneficiaries' (see page 5)	(2) Estate's or trust's	(3) Total
Caution: Read the instructions before completing this part.				
13	Net short-term gain or (loss)	13		28,265.
14	Net long-term gain or (loss):			
a	Total for year	14a		-336,445.
b	Unrecaptured section 1250 gain (see line 18 of the wrksh)	14b		
c	28% rate gain	14c		
15	Total net gain or (loss). Combine lines 13 and 14a	15		-308,180.

Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and **do not** complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

Part IV Capital Loss Limitation

16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of	16	(3,000)
a	The loss on line 15, column (3) or b \$3,000		

Note: If the loss on line 15, column (3), is more than \$3,000 or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** on page 7 of the instructions to figure your capital loss carryover.

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part **only** if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the worksheet on page 8 of the instructions if:

- Either line 14b, col (2) or line 14c, col (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part **only** if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col (2) or line 14c, col (2) is more than zero.

17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17	
18	Enter the smaller of line 14a or 15 in column (2) but not less than zero	18	
19	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	19	
20	Add lines 18 and 19	20	
21	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	21	
22	Subtract line 21 from line 20. If zero or less, enter -0-	22	
23	Subtract line 22 from line 17. If zero or less, enter -0-	23	
24	Enter the smaller of the amount on line 17 or \$2,300	24	
25	Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> Yes. Skip lines 25 and 26; go to line 27 and check the "No" box. <input type="checkbox"/> No. Enter the amount from line 23.	25	
26	Subtract line 25 from line 24.	26	
27	Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> Yes. Skip lines 27 thru 30, go to line 31. <input type="checkbox"/> No. Enter the smaller of line 17 or line 22.	27	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28	
29	Subtract line 28 from line 27	29	
30	Multiply line 29 by 15% (15)	30	
31	Figure the tax on the amount on line 23. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	31	
32	Add lines 30 and 31	32	
33	Figure the tax on the amount on line 17. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36)	34	

Schedule D (Form 1041) 2009



Merrill Lynch

RANK & ROSLYN GROBMAN

Fiscal Statement

SUMMARY OF CHECKING ACTIVITY

Date Cleared	Date Written	Check Number	Payee	Amount
01/16/09	12/08/08	00000181	ALPERT JEWISH FAM & CHILDREN S	200 00
02/04/09	12/09/08	00000201	COALITION FOR THE HOMELESS	3 000 00
01/14/09	01/08/09	00003107	FRIENDS OF MORSI LIFE INC	150 00
02/25/09	02/12/09	00003109	WASHINGTON DC MARTIN LUTHERAN	150 00
03/04/09	02/16/09	00000202	CONSUMER REPORTS FDN	25 00
02/25/09	02/16/09	00000203	REMOTE AREA MED FDN	1 000 00
03/03/09	02/19/09	00000204	PALM BEACH RESCUE	100 00
02/26/09	02/20/09	00003110	MORSE LIFE	300 00
03/11/09	02/23/09	00003112	ENDHAVEN PPA	50 00
03/05/09	03/01/09	00003113	FRENCHMANS CHARITY FOUND	306 25
03/17/09	03/05/09	00003114	CONSUMERS REPORTS	25 00
04/13/09	03/27/09	00000205	NYU LAW SCHOOL	200 00
04/06/09	03/27/09	00000206	ADL	18 00
03/31/09	03/27/09	00000208	ACLU	2 500 00
03/31/09	03/27/09	00000209	ISRAEL CHILDRENS CTR	2 000 00
04/20/09	04/02/09	00000210	HEWLETT CHAPTER OF HADASSAH	125 00
04/13/09	04/06/09	00000211	DWC-SCHOLARSHIP STUDENT AID EU	2,000 00
04/14/09	04/09/09	00003117	AMERICAN INSTITUTE OF PHILANTH	50 00
05/08/09	04/14/09	00000212	THIRTEEN	100 00
04/21/09	04/14/09	00000213	AMERICAN HEART ASSOC	250 00
04/21/09	04/14/09	00000214	UNION OF CONCERNED SCIENTISTS	120 00
04/22/09	04/14/09	00000216	WPBT	75 00
04/28/09	04/14/09	00000217	SALVATION ARMY	500 00
04/21/09	04/14/09	00000218	AMER FRIENDS OF BEER SHEVA	500 00
05/22/09	04/14/09	00000219	CYSTIC FIBROSIS FDN	250 00
05/26/09	04/14/09	00000224	CLARKE SCH FOR THE DEAF	1 000 00
05/21/09	04/14/09	00000225	CARE	2 250 00
05/21/09	04/14/09	00000228	JEWISH COMM CENTER-STOWNS	100 00
05/21/09	05/14/09	00000222	JEWISH NAT'L FUND	1 000 00
05/26/09	05/14/09	00000223	JEWISH FUNDS FOR JUSTICE	5 000 00
05/21/09	05/14/09	00000226	MLK JR NATL MEM PROP FDN	100 00
06/03/09	05/14/09	00000227	HABITAT FOR HUMANITY	2 000 00
05/19/09	05/14/09	00000229	AJC	1 500 00
05/20/09	05/14/09	00000230	THANC	400 00
06/11/09	05/22/09	00000231	WORLD MUSIC INSTITUTE	50 00
06/19/09	05/22/09	00000234	UNICEF	1 000 00
06/17/09	05/22/09	00000236	CANCER CARE	500 00
05/07/09	05/22/09	00000237	US OLYMPIC COMM	100 00
09/01/09	05/26/09	00000000	PROVISIONAL DEBIT	1,782 00
	08/01/09	00000264	SO FLORIDA SCIENCE MUSEUM	100 00

PLEASE SEE REVERSE SIDE
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Statement Period
Year Ending 12/31/09
Account No 841-04A63



Merrill Lynch

FRANK & ROSLYN GROBMAN

Fiscal Statement

SUMMARY OF CHECKING ACTIVITY

Date Cleared	Date Written	Check Number	Payee	Amount
08/28/09	08/12/09	00000238	AMERICAN JEWISH WORLD SERV	6,000.00
09/01/09	08/12/09	00000239	ALZHEIMER'S ASSN	200.00
09/15/09	08/12/09	00000240	AMER RED CROSS	2,000.00
08/31/09	08/12/09	00000241	AMNESTY INTL USA	150.00
09/14/09	08/12/09	00000242	BIG BROS & BIG SISTERS HAMPSHI	100.00
08/27/09	08/12/09	00000243	CAMERA	1,000.00
09/04/09	08/12/09	00000244	COALITION FOR THE HOMELESS	3,000.00
08/28/09	08/12/09	00000245	DOCTORS WITHOUT BORDERS	10,000.00
08/28/09	08/12/09	00000246	DOROT	1,500.00
08/27/09	08/12/09	00000247	FRESH AIR FUND	1,500.00
09/04/09	08/12/09	00000248	FOUNTAIN HOUSE	50.00
09/01/09	08/12/09	00000249	FED-GAP	250.00
08/31/09	08/12/09	00000250	GLAUCOMA FDN	500.00
09/02/09	08/12/09	00000251	HEIFER INT'L	1,000.00
09/08/09	08/12/09	00000252	US HOLOCAUST MEM MUSEUM	200.00
08/28/09	08/12/09	00000253	HADASSAH	1,000.00
08/28/09	08/12/09	00000254	HOSPICE OF PALM BEACH CO	250.00
08/28/09	08/12/09	00000255	JEWISH GUILD FOR THE BLIND	150.00
08/27/09	08/12/09	00000256	JEWISH FDN FOR RIGHTEOUS	500.00
09/01/09	08/12/09	00000259	MOMA	120.00
08/28/09	08/12/09	00000260	NEWSDAY CHARITIES-KIDS	1,000.00
08/28/09	08/12/09	00000261	PLANNED PARENTHOOD NY	300.00
09/30/09	08/12/09	00000262	JOHN-FREDERICKS CAMP FUND	100.00
09/08/09	08/12/09	00000263	RONALD MCDONALD HOUSE NY	3,000.00
09/08/09	08/12/09	00000265	SPECIAL OLYMPICS	300.00
09/01/09	08/12/09	00000266	SIERRA CLUB	50.00
09/04/09	N/A	00000267#	MARINE TOYS FOR	100.00
08/31/09	08/12/09	00000268	UNICEF	500.00
09/01/09	08/12/09	00000269	VNS NY	500.00
09/03/09	08/12/09	00000270	UNITED WAY PALM BEACH CO	1,000.00
09/11/09	08/12/09	00000271	WHITNEY MUSEUM	100.00
09/10/09	08/12/09	00000272	YCS FDN	200.00
09/08/09	08/12/09	00000273	SAVE THE CHILDREN	300.00
09/09/09	08/12/09	00003687	VJA	10,000.00
09/14/09	08/12/09	00000274	PROJECT HOPE	500.00
09/24/09	08/12/09	00000275	MPLI	500.00
09/17/09	08/12/09	00000276	FISHER HOUSE FDN	1,000.00
09/18/09	08/12/09	00000257	JEWISH MUSEUM	100.00
09/17/09	08/12/09	00000277	HERJG	1,000.00
10/16/09	09/14/09	00000278	HAFTR	5,000.00

PLEASE SEE REVERSE SIDE

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Statement Period Year Ending 12/31/09
Account No 841-04A63



Fiscal Statement

SUMMARY OF CHECKING ACTIVITY

Date Cleared	Date Written	Check Number	Payee	Amount
10/13/09	10/06/09	00000280	CITY MEALON WHEELS	5,000 00
10/19/09	10/06/09	00000281	PALM BEACH JEWISH FILM SOC	500 00
10/15/09	10/06/09	00000282	SMILE TRAIN	250 00
10/20/09	10/06/09	00000283	ABRAHAM JOSHUA HESCHEL SCHOOL	1,000 00
10/27/09	10/06/09	00000284	GLEN OAKS AMBULANCE CORPS	75 00
10/20/09	10/06/09	00000285	SCRIPPS RESEARCH INST	500 00
10/15/09	10/06/09	00000286	OXFAM	1,000 00
10/22/09	10/06/09	00000287	NAACP LEGAL DEFENSE & ED	300 00
10/14/09	10/06/09	00000288	MAZON	2,000 00
10/27/09	10/06/09	00000289	INTL RESUCE COMM	1,000 00
10/20/09	10/13/09	00000290	JEWISH FED OF PALM BEACH CO	20,000 00
11/13/09	11/09/09	00000291	INCISIVE MEDIA ALM	120 00
11/30/09	11/11/09	00000295	THE FUND FOR NYU	2,000 00
12/02/09	11/16/09	00000293	PLACE OF HOPE GENERAL FUND	1 000 00
11/30/09	11/17/09	00000294	CLASSICAL 89 7	60 00
12/09/09	11/17/09	00000296	CONSUMER REPORT	35 00
11/25/09	11/21/09	00003688	MORSE LIFE FDN	500 00
12/17/09	12/10/09	00000298	THE CHURCHILL SCH	500 00
12/30/09	12/16/09	00003118	JUPITER MED CTR	500 00
12/29/09	12/21/09	00000299	AMERICAN INSTITUTE OF PHILANTH	100 00
12/30/09	12/21/09	00000301	CONSUMER REPORTS	50 00
12/29/09	12/24/09	00003121	JEWISH FEDERATION OF PALM BEAC	500 00

Total Checking Activity

122,886 25

FORM 990FF, PART XV -- GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

VARIOUS ORGANIZED CHARITIES

NONE

NONPROFIT ORGANIZATION

FOR CHARITABLE PURPOSES

122,886

TOTAL CONTRIBUTIONS PAID

122,886

ATTACHMENT 9

THE FRANK AND ROSLYN GROBMAN FOUNDATION						
SCHEDULE OF REALIZED SHORT-TERM CAPITAL GAINS & LOSSES						
2009						
		ACQ DATE	SALE DATE	SALE PRICE	COST BASIS	GAIN / (LOSS)
134 000	NFJ DIV INT PREM STRAT	4/23/2008	4/21/2009	1,397 60	3,063 77	(1,666 17)
1,000 000	SEASPAN CORP	12/31/2008	5/12/2009	5,889 85	8,896 00	(3,006 15)
1,000 000	BANK OF AMERICA	9/12/2008	6/1/2009	13,399 64	7,200 00	6,199 64
100 000	BANK OF AMERICA	12/3/2008	6/1/2009	1,339 97	632 49	707 48
500 000	BANK OF AMERICA	12/3/2008	6/1/2009	6,704 82	3,162 50	3,542 32
900 000	BANK OF AMERICA	12/3/2008	6/1/2009	12,077 68	5,692 50	6,385 18
1,500 000	BANK OF AMERICA	12/3/2008	6/1/2009	19,979 47	9,487 51	10,491 96
1,000 000	BANK OF AMERICA	5/19/2009	6/1/2009	13,319 66	9,120 00	4,199 66
1,000 000	ROYAL BK OF SCOTLAND PLC	12/31/2008	11/6/2009	8,709 77	8,250 50	459 27
1,200 000	ROYAL BK OF SCOTLAND PLC	12/31/2008	11/6/2009	10,451 73	10,066 80	384 93
800 000	ROYAL BK OF SCOTLAND PLC	12/31/2008	11/6/2009	6,807 82	6,711 20	96 62
						-
	TOTALS			100,078.01	72,283.27	27,794.74

Department of the Treasury
Internal Revenue Service

► See instructions for Schedule D (Form 1041).

▶ **Attach to Schedule D to list additional transactions for lines 1a and 6a.**

2009

Name of estate or trust

FRANK & ROSLYN GROBMAN FOUNDATION

Employer identification number

11-3241420

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less[illegible]

1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b	27,795.
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For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

THE FRANK AND ROSLYN GROBMAN FOUNDATION, INC.						
SCHEDULE OF REALIZED LONG-TERM CAPITAL GAINS & LOSSES						
2009						
		ACQ DATE	SALE DATE	SALE PRICE	COST BASIS	GAIN / (LOSS)
900 000	ARBOR RLTY TR INC	5/25/2005	4/2/2009	689 84	24,138 00	(23,448 16)
100 000	ARBOR RLTY TR INC	5/27/2005	4/2/2009	76 64	2,700 50	(2,623 86)
500 000	ARBOR RLTY TR INC	8/26/2005	4/2/2009	383 25	13,837 50	(13,454 25)
500 000	ARBOR RLTY TR INC	3/14/2006	4/2/2009	383 26	13,407 50	(13,024 24)
2,000 000	NFJ DIV INT PREM STRAT	2/23/2005	4/21/2009	20,859 45	50,000 00	(29,140 55)
44 000	NFJ DIV INT PREM STRAT	7/6/2005	4/21/2009	458 90	1,027 40	(568 50)
47 000	NFJ DIV INT PREM STRAT	10/11/2005	4/21/2009	490 19	1,089 64	(599 45)
56 000	NFJ DIV INT PREM STRAT	1/18/2006	4/21/2009	584 06	1,249 13	(665 07)
837 000	NFJ DIV INT PREM STRAT	1/23/2006	4/21/2009	8,729 71	18,773 91	(10,044 20)
163 000	NFJ DIV INT PREM STRAT	1/23/2006	4/21/2009	1,700 04	3,656 09	(1,956 05)
1,000 000	NFJ DIV INT PREM STRAT	3/14/2006	4/21/2009	10,429 72	23,255 00	(12,825 28)
94 000	NFJ DIV INT PREM STRAT	4/12/2006	4/21/2009	980 39	2,174 50	(1,194 11)
98 000	NFJ DIV INT PREM STRAT	7/12/2006	4/21/2009	1,022 11	2,236 06	(1,213 95)
94 000	NFJ DIV INT PREM STRAT	10/11/2006	4/21/2009	980 39	2,273 01	(1,292 62)
92 000	NFJ DIV INT PREM STRAT	1/22/2007	4/21/2009	959 53	2,324 84	(1,365 31)
92 000	NFJ DIV INT PREM STRAT	4/16/2007	4/21/2009	959 53	2,389 05	(1,429 52)
92 000	NFJ DIV INT PREM STRAT	7/18/2007	4/21/2009	959 53	2,404 32	(1,444 79)
103 000	NFJ DIV INT PREM STRAT	10/10/2007	4/21/2009	1,074 26	2,482 60	(1,408 34)
138 000	NFJ DIV INT PREM STRAT	1/23/2008	4/21/2009	1,439 30	3,225 06	(1,785 76)
400 000	NFJ DIV INT PREM STRAT	3/5/2008	4/21/2009	4,171 90	8,920 00	(4,748 10)
500 000	NFJ DIV INT PREM STRAT	3/5/2008	4/21/2009	5,214 88	11,165 00	(5,950 12)
1,500 000	ALPINE GLOBAL PREMIER	4/25/2007	4/17/2009	5,469 29	30,000 00	(24,530 71)
10 000	ALPINE GLOBAL PREMIER	6/25/2007	4/17/2009	36 46	182 86	(146 40)
11 000	ALPINE GLOBAL PREMIER	8/14/2007	4/17/2009	40 10	184 74	(144 64)
12 000	ALPINE GLOBAL PREMIER	8/31/2007	4/17/2009	43 75	195 92	(152 17)
12 000	ALPINE GLOBAL PREMIER	10/15/2007	4/17/2009	43 76	198 66	(154 90)
12 000	ALPINE GLOBAL PREMIER	11/13/2007	4/17/2009	43 75	186 33	(142 58)
15 000	ALPINE GLOBAL PREMIER	12/5/2007	4/17/2009	54 71	201 64	(146 93)
	ALPINE GLOBAL PREMIER	12/5/2007	4/17/2009	2 04	-	2 04
	ALPINE GLOBAL PREMIER	12/5/2007	4/17/2009	6 77	-	6 77
2,000 000	PENGROWTH ENERGY TR	11/20/2006	4/2/2009	11,779 93	35,180 00	(23,400 07)
1,000 000	SL GREEN REALTY CORP	10/18/2004	4/2/2009	10,369 94	26,110 00	(15,740 06)
1,000 000	GENERAL MOTORS CORP	6/23/2004	5/12/2009	1,069 97	25,000 00	(23,930 03)
900 000	SEASPAN CORP	7/2/2007	5/12/2009	5,300 86	30,340 80	(25,039 94)
100 000	SEASPAN CORP	7/2/2007	5/12/2009	588 93	3,369 20	(2,780 22)
2,219 000	CGM ADV TARGET EQ CL C	5/13/2008	5/18/2009	15,111 39	25,008 13	(9,896 74)
1,700 000	MADISON/CLAY COVERED CAL	7/27/2004	6/24/2009	11,372 70	25,500 00	(14,127 30)
300 000	MADISON/CLAY COVERED CAL	7/27/2004	6/24/2009	2,000 94	4,500 00	(2,499 06)
1,000 000	MADISON/CLAY COVERED CAL	3/15/2005	6/24/2009	6,669 83	15,540 00	(8,870 17)
5,000 000	NEW YORK ST DORM AUTH	2/10/2005	7/1/2009	5,000 00	5,000 00	-
800 000	DELAWE INVTS GLB DIV INC	10/29/1999	7/10/2009	4,195 89	9,748 68	(5,552 79)
999 000	EATON VANCE TAX-MANAGED	2/22/2007	7/10/2009	10,384 33	19,980 00	(9,595 67)
23 000	EATON VANCE TAX-MANAGED	6/1/2007	7/10/2009	239 08	460 46	(221 38)
27 000	EATON VANCE TAX-MANAGED	9/14/2007	7/10/2009	280 66	492 26	(211 60)
30 000	EATON VANCE TAX-MANAGED	12/10/2007	7/10/2009	311 84	496 29	(184 45)
1 000	EATON VANCE TAX-MANAGED	12/21/2007	7/10/2009	10 39	-	10 39
31 000	EATON VANCE TAX-MANAGED	3/12/2008	7/10/2009	322 25	511 99	(189 74)
	EATON VANCE TAX-MANAGED	3/12/2008	7/10/2009	6 08	-	6 08
1,000 000	PENN WEST ENERGY TR	5/13/2008	7/9/2009	11,384 70	32,650 00	(21,265 30)
648 861	V ECK GLB HARD ASTS CL C	7/20/2007	7/10/2009	18,434 13	30,021 84	(11,587 71)
208 000	V ECK GLB HARD ASTS CL C	5/13/2008	7/10/2009	5,909 28	10,000 64	(4,091 36)
43 000	V ECK GLB HARD ASTS CL C	12/31/2007	7/10/2009	1,221 63	1,952 63	(731 00)
65 000	V ECK GLB HARD ASTS CL C	12/31/2007	7/10/2009	1,846 66	2,951 65	(1,104 99)
						-
	TOTALS			192,098.97	528,693.83	(336,594.86)

Employer identification number

[illegible]

6b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 6b	-336,595.
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- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization FRANK & ROSLYN GROBMAN FOUNDATION	Employer identification number 11-3241420
	Number, street, and room or suite no. If a P O box, see instructions 474 FULTON AVENUE	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions HEMPSTEAD, NY 11550	

Check type of return to be filed (File a separate application for each return)

<input type="checkbox"/> Form 990	<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **DANS SUPREME SUPERMARKETS, INC**
Telephone No **516 483-2400** FAX No _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until **11/15/2010**
- 5 For calendar year **2009**, or other tax year beginning _____, and ending _____
- 6 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension **NEED FURTHER INFORMATION IN ORDER TO COMPLETE THE RETURN.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$	0.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c \$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ►

Title ►

Date ►

Form **8868** (Rev 4-2009)

ARTHUR YORKE & COMPANY LLP
520 EIGHTH AVENUE - 18TH FLOOR
NEW YORK, NY 10018

Application for Extension of Time To File an
Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization	FRANK & ROSLYN GROBMAN FOUNDATION	Employer identification number	11-3241420
	FRANK & ROSLYN GROBMAN FOUNDATION			
	Number, street, and room or suite no. If a P.O. box, see instructions 474 FULTON AVENUE			
City, town or post office, state, and ZIP code. For a foreign address, see instructions HEMPSTEAD, NY 11550				

Check type of return to be filed (file a separate application for each return)

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- The books are in the care of ▶ DANS SUPREME SUPERMARKETS, INC.

Telephone No ▶ 516 483-2400

FAX No ▶ _____

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶ ☒ calendar year 2009 or
▶ ☐ tax year beginning _____, _____, and ending _____, _____

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)