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Return of Private Foundation

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

OMB No 1545-0052

Depa	rtmen	t of the Treasury venue Service	Note	The foundation may		o as a Privat			rtına reauırements.	2009
		dar year 2009, o					and e		<u>g . 0 4 2</u>	
-		all that apply:		al return		Initial return of a fo			Final return	
•			Am	ended return		Address chan	•		Name change	
	the abel		ındatıon						A Employer identification	number
		se, THE AL		AMILY FOU					20-5116468	
	print r type		•	x number if mail is not o	delivered to s	street address)		Room/suite	B Telephone number 203-431-90'	71
	Spe	52 510	, state, and ZI	SE ROAD				l	1_	
	ructio	I CHIV DI IDWII			7				C If exemption application is per D 1. Foreign organizations,	· ·
H C	heck	type of organizat		Section 501(c)(3) e		rate foundation			Foreign organizations mee check here and attach corr	ting the 85% test,
Ϊ	_	ction 4947(a)(1)		· '		able private founda	ition		1	
1 Fa		rket value of all a					Acc	rual	E If private foundation state under section 507(b)(1)(A), check here
		Part II, col. (c), li	ne 16)		Other (spec	:ıfy)			F If the foundation is in a 6	•••
				00 . (Part I, coll	umn (d) n	nust be on cash l	basis.)		under section 507(b)(1)(
Pa	rt I	Analysis of Rev (The total of amounecessarily equal	nts in columns (b), (c), and (d) may not	(a)	Revenue and enses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gi			2	296,748.			N/A	(casir basis diliy)
	2		=	t required to attach Sch B						
	3	Interest on savings cash investments				5,619.		5,619.		STATEMENT 2
	4	Dividends and in	terest from se	ecurities		9,596.		9,596.		STATEMENT 3
	5a	Gross rents				•				
	b	Net rental income o	r (loss)							
a	6a	Net gain or (loss) fro				164,322.				TATEMENT 1
'n	b	Gross sales price for assets on line 6a	x all 2,	811,033.						
Revenue	7	Capital gain net inc	ome (from Part I	V, line 2)			2,46	1,070.		
-	8	Net short-term c	apıtal gaın 🏢	•						
	9	Income modifica Gross sales less rel			ļ					
	10a	and allowances	FIVED		ļ					
	D	Less Cost or goods	s sold	<u> </u>	 	· · · · · · · · · · · · · · · · · · ·				
		Gross profit or (I	1 6 2010	191	_			<u> </u>		
	11 12	Votal. Add lines		- 1851 ·	2	476,285.	2 47	6,285.		
	13				~_~	0.		0.		0.
	14	Other employee	salaries and W	vages						
	15	Pension plans, e			_			•		
ses	16a	Legal fees					•			
nec.	b	Accounting fees		STMT 4		2,500.		2,500.		0 .
EX	C	Other profession	al fees	STMT 5		12,644.	1	2,644.		0 .
ΪÝ	17	Interest								
and Administrative Expenses	18	Taxes	•	STMŢ 6		17,119.		0.		0
inis	19	Depreciation and	depletion		<u> </u>					 -
튕	20	Occupancy								
and Ad		Travel, conference	•	ings						
	22 23	Printing and pub	nications	STMT 7		4.		0.		0
		Other expenses Total operating	and administ	-		- 4.		<u> </u>		
, e	24	expenses. Add I				32,267.	1	5,144.		0
Oper	25	Contributions, gi		-		157,000.		<u> </u>		157,000.
		Total expenses	-							
<u> </u>		Add lines 24 and		•		189,267.	1	5,144.		157,000.
2	27	Subtract line 26	from line 12:							
	а	Excess of revenue of	over expenses ar	nd disbursements .	2,	287,018.		_ 		
ا ر		Net investment i			<u> </u>		2,46	1,141.	25.1-	
	<u>C</u>	Adjusted net inc							N/A	5 000 DE
92350 02-02	-10	LHA For Priva	acy Act and P	aperwork Reduction	n Act Notic	e, see the instruct	ions.			Form 990-PF (2009)

Fo	rm 99	0-PF(2009) THE ALMIRA FAMILY FOUND	· · · · · · · · · · · · · · · · · · ·	20-5	116468 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	(b) Book Value	(c) Fair Market Value
_	T •	Cash - non-interest-bearing		(6) 2001. 12.00	(o) the manual value
	2		201,905.	821,054.	821,173.
		Accounts receivable	202/3001		022/2/51
	"	Less; allowance for doubtful accounts	1		
	A	Pledges receivable			
	7	Less: allowance for doubtful accounts	1		
	5	Grants receivable			
	ء ا	Receivables due from officers, directors, trustees, and other	· · · · · · · · · · · · · · · · · · ·		
	0				
	7	Other notes and loans receivable			
	'	Less: allowance for doubtful accounts			
		Inventoring for cells or use			-
Assets	8	Prepaid expenses and deferred charges			
Ass	9	Investments - U.S. and state government obligations			
_	1		298,558.	414,082.	488,200.
	1		230,330.	414,002.	400,200.
	1	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	, ,	204 027	1 027 202	1 052 627
	13	Investments - other STMT 9	284,937.	1,837,282.	1,853,627.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe >)			
			505 400	2 252 442	2 462 222
_		Total assets (to be completed by all filers)	785,400.	3,072,418.	3,163,000.
	17				
	18	Grants payable			
e S	19	Deferred revenue			
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31			
Fund Balances	24	Unrestricted			
au	25	Temporarily restricted			
Ва	26	Permanently restricted			
п		Foundations that do not follow SFAS 117, check here			
Ť	ļ	and complete lines 27 through 31.			
s or	27	Capital stock, trust principal, or current funds	0.	0.	
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	785,400.	3,072,418.	
Net	30	Total net assets or fund balances	785,400.	3,072,418.	
_			•		
	31	Total liabilities and net assets/fund balances .	785,400.	3,072,418.	
		_			
ГЬ	art	Analysis of Changes in Net Assets of Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	785,400.
	-	amount from Part I, line 27a	•	2	2,287,018.
		rincreases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	3,072,418.
		eases not included in line 2 (itemize)	• • • • • • • • • • • • • • • • • • • •	5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	. 6	3,072,418.
					Form 990-PF (2009)

(a) List and desc	ribe the k	cind(s) of property sold (e.g. ; or common stock, 200 shs	., real estate,	· moonie	(b)	How acc - Purch - Dona	quired ase tion	(c) Date aco	quired , yr.)	(d) Date sold (mo., day, yr.)
1a										
b SEE ATTACHED	STA	TEMENT			-					
<u>c</u>										
<u>d</u>					-					
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain (e) plus (f	or (loss)) minus (
<u>a</u>										
<u>b</u>										
<u>C</u>			<u>-</u>							
e 2,811,033.				349,96	3					2,461,070
Complete only for assets show		column (h) and owned by t	the foundation		, , ,			Gains (Col.		
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (ı)				(k), but not Losses (fr	less than	-0-) or
a										
b										
С								_		
_d										
е	l									2,461,070.
2 Capital gain net income or (net c	apital loss	$\begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0-} \end{cases}$	in Part I, line - in Part I, line	7 7	}	2				2,461,070
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8	, column (d (6):		}				N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inco	ome	N/A	
Was the foundation liable for the sec If "Yes," the foundation does not qua 1 Enter the appropriate amount in	lify under	section 4940(e). Do not co	mplete this pa	ırt.						Yes X No
(a) Base periód years Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying dist	tributions	Net value of no	(c) ncha		se assets	(cc) Dıstribu ol. (b) dıvıd	(d) ition ratio ded by col. (c))
2008			0,808.				,909	•		.082465
2007			9,636.		1		3,642			.055288
2006		2	<u>9,000.</u>			860	351,	•		.033707
2005						_				
2004				<u> </u>				 		
2 Total of line 1, column (d)3 Average distribution ratio for the	F.voor bo		on line 2 hy 5	or by the number	of vo			2		.171460
the foundation has been in existe	-	•						3		.057153
4 Enter the net value of noncharital	ole-use as	ssets for 2009 from Part X, I	ine 5					4	2	2,063,804.
5 Multiply line 4 by line 3								5		117,953.
6 Enter 1% of net investment incor	ne (1% o	f Part I, line 27b)	• ••					6		24,611.
7 Add lines 5 and 6							• •	7	-	142,564.
8 Enter qualifying distributions from		•	 1b, and comp	 Hete that part using	g a 1º	 % tax ra	te.	8		157,000.
See the Part VI instructions.										000 PE (0000)

Form 990-PF (2009) THE ALMIRA FAMILY FOUNDATION Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	20-	51164	168	otio	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 1a Exempt operating foundations described in section 4940(d)(2), check here \to	1340	- 566 111	Suu	Ctio	115)
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1		2	4 6	11.
of Part I, line 27b	†			 , ∪	<u> </u>
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	Ì				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				Λ.
3 Add lines 1 and 2	3		2	4,6	11.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			<u> </u>	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		2	4 6	11.
6 Credits/Payments:	-	 		-,,	
a 2009 estimated tax payments and 2008 overpayment credited to 2009 [6a] 17,000					
b Exempt foreign organizations - tax withheld at source 6b	1				
c Tax paid with application for extension of time to file (Form 8868) 6c 7,713	1				
d Backup withholding erroneously withheld	1				
7 Total credits and payments. Add lines 6a through 6d	7		2	4.7	13.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				2.
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	1		1	00.
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax	11	<u> </u>			0.
Part VII-A Statements Regarding Activities		<u> </u>			<u> </u>
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	е іл			Yes	No
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 definition)?	•		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or	ľ			
distributed by the foundation in connection with the activities.					
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:		<u> </u>			<u> </u>
(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0.	_				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				
managers. > \$ 0.					
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		x
If "Yes," attach a detailed description of the activities.		<u> </u>			
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	0.	ĺ	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?	. N	/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		' <i>'</i>	5		X
If "Yes," attach the statement required by General Instruction T.		F			
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 sta 	e 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?		"	7	х	
If "Yes," complete Part II, col. (c), and Part XV.					
8a Enter the states to which the foundation reports or with which it is registered (see instructions)					1
CT					}
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)					1
of each state as required by General Instruction G? If "No," attach explanation			8ь	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 call	endar	·			
year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x
10. Did any persons become substantial contributors during the tay year?		.	10	_	X

		-5116	468	_	Page 5
	art 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		ļ		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	••	_11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17, 2008?		12_		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 ▶ PABLITO A. ALMIRA Telephone no. ▶ 2	<u> 103-43</u>	1-9	071	
	Located at ▶32 BLUE RIDGE ROAD, RIDGEFIELD, CT Z	06 ►+4	877		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			. •	$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year	5	N	/A	
Pa	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.			Yes	No
18	During the year did the foundation (either directly or indirectly):				
		X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
		X No			
	<u> </u>	X No			
	\ \	X No	:		
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
		X 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				
		X No			
,	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		l		
1	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	1b		
			10		
	Organizations relying on a current notice regarding disaster assistance check here				
			4.		Х
	before the first day of the tax year beginning in 2009?		1c_		Α_
2					
	defined in section 4942(j)(3) or 4942(j)(5)):				
ā	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	V 11-			
		X No			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,				
	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	37/3	ا ا		
		N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	<u> </u>				
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		'		
		X No			
t	olf "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	se	,		
	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,				
	•	N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		<u>X</u>
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	t			
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		<u> </u>

Form 990-PF (2009) THE ALMIRA FAMILY FOUNDA		Deguired ()	20-51164	.68 Pa	age 6
Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be	Required (contin	luea)		
5a During the year did the foundation pay or incur any amount to:	40.454.330		¬ •		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)		•	es X No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or mail		es X No		
any voter registration drive?		· · · =	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose			ו או בבו פי		
(4) Provide a grant to an organization other than a charitable, etc., organization	on acsorbed in section		s X No		
509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary	.v. or oducational nurnoces or		a A NU		
the prevention of cruelty to children or animals?	y, or educational purposes, or		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	nder the excentions described	•	:5 LAL 140		
section 53.4945 or in a current notice regarding disaster assistance (see insti		iii riogalations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check		• • • • • • • • • • • • • • • • • • • •			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		uned			
expenditure responsibility for the grant?		1/A 🔲 🔀	es No		
If "Yes," attach the statement required by Regulations section 53 49-		·,			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				1 1	
a personal benefit contract?		Y ₆	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	X
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?	🗀 🗺	s X No		
b If yes, did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trus	tees, Foundation Ma	anagers, Highly	/		
1 List all officers, directors, trustees, foundation managers and their	·	(c) Compensation	(d) Contributions to	(-) Fyna	
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exper account, o allowand	other ces
LINDA K. ALMIRA	TRUSTEE				
32 BLUE RIDGE ROAD					
RIDGEFIELD, CT 06877	0.00	0.	0.		0.
PABLITO A. ALMIRA	TRUSTEE			•	
32 BLUE RIDGE ROAD		ļ		<u> </u>	
RIDGEFIELD, CT 06877	0.00	0.	0.		0.
	_				
	_				
				ļ	
	4				
	\dashv				
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none.	enter "NONE."		<u> </u>	—
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Exper	nșe
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, o	ither ses
NONE			- Composed Con		
	7				
					_
	7		_		
Total number of other employees paid over \$50,000					0

Form 990-PF (2009) THE ALMIRA FAMILY FOUNDATION	20-	5116468 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities	·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers product		Expenses
1 N/A		
2	 	
3		
4		<u>. </u>
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lin	es 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, 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	1a	1,261,651.
b	Average of monthly cash balances	1b	833,581.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,095,232.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	O.
3	Subtract line 2 from line 1d	3	2,095,232.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	31,428.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,063,804.
6	Minimum investment return. Enter 5% of line 5	6	103,190.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	103,190.
2a	Tax on investment income for 2009 from Part VI, line 5 2a 24, 611.		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	24,611.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	78,579.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	78,579.
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	7	78,579.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		455 000
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	157,000.
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:	_	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	4.5.7. 000
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	157,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	04 644
_	income. Enter 1% of Part I, line 27b	5	24,611.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	132,389.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies fo	or the section
	4940(e) reduction of tax in those years.		

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				
line 7				78,579.
2 Undistributed income, if any, as of the end of 2009				,,,,,,,,
a Enter amount for 2008 only			0.	
b Total for prior years:				
b total to prior yourse		0.		
3 Excess distributions carryover, if any, to 2009:		<u>_</u> <u>_</u>		· · · · · · · · · · · · · · · · · · ·
a From 2004				
b From 2005				
c From 2006 26,923.				
d From 2007 6, 432.				
e From 2008 32,197.				
f Total of lines 3a through e	65,552.			
4 Qualifying distributions for 2009 from	05,552.			
Part XII, line 4: > \$ 157,000.				
			0.	
a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior		·		
		0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	0.			70 570
d Applied to 2009 distributable amount	70 421			<u>78,579.</u>
e Remaining amount distributed out of corpus	78,421.			0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			<u>U.</u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	143,973.			
b Prior years' undistributed income. Subtract	= <u> 7 </u>			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				•
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line		·		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.	-	-		
Subtract lines 7 and 8 from line 6a	143,973.			
0 Analysis of line 9:				
a Excess from 2005	İ			
b Excess from 2006 26, 923.				
c Excess from 2007 6, 432.				
d Excess from 2008 32, 197.				
e Excess from 2009 . 78,421.				
				Form 990-PF (2000)

	IRA FAMILY		A guestion Q)		L16468 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for				4040(2(0) ==	040(\)(5)
b Check box to indicate whether the found		ng roundation described i	Prior 3 years	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(4) 2003	(8) 2000	(6) 2007	(4) 2000	(6) 10141
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	<u> </u>				
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		Ì			
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	f the foundation	had \$5,000 or m	ore in assets
at any time during t	he year-see the i	instructions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who	o have contributed more	than 2% of the total conti	butions received by the	foundation before the cl	ose of any tax
year (but only if they have contributed m	iore than \$5,000). (See s	section 507(d)(2).)			
NONE					
b List any managers of the foundation who			or an equally large portu	on of the ownership of a p	partnership or
other entity) of which the foundation has	ia 10% or greater interes	Si.			
NONE					
2 Information Regarding Contributi					
Check here ► X If the foundation o					
the foundation makes gifts, grants, etc. (<u> </u>			ompiete items za, b, c, an	<u>u u</u>
a The name, address, and telephone number	er of the person to who	m applications should be	addressed:		
					
b The form in which applications should b	e submitted and informat	tion and materials they sh	ovia include:		
e Any submission deadlines:			 		
c Any submission deadlines:					
d Any restrictions or limitations on awards	e cuch as by geographic	al areas charitable fields	kinde of inetitutions or a	ther factors	· · · · · · · · · · · · · · · · · · ·
a rang resultations of minitations on awaitus	, odon do by geograpillo	a arces, charnable licids,	minus or misuludons, Of C	Juliot Tuotot J.	
923601 02-02-10					Form 990-PF (2009)

923601 02-02-10

	<u> </u>			
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment		
Name and address (home as hyperson)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
•				
				,
SEE STATEMENT 10			<u> </u>	157 000
Total b Approved for future payment		<u> </u>	> 3a	157,000.
• Approved for future payment				
NONE				
,				
Total		l	▶ 3b	0.
i Vlaj	· · ·			

Form **990-PF** (2009)

923621 02-02-10 Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ed by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Cone	· 	Code		
a	_		1 1	 -	
b			+ +		
C	_		+ +		
d	_		1 1		
e	_	<u> </u>	1 1		
f	_				
g Fees and contracts from government agencies			1.		
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash			1		
investments			14	5,619.	
4 Dividends and interest from securities		****	14	9,596.	17 - 14 - 17 W -
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			1		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	845.	163,477.
9 Net income or (loss) from special events					
10.0	•				
IU Gross profit or (loss) from sales of inventory 11 Other revenue;			1		
a b	-		† †		
			+ +		
C			+		-, ,
d	-		+		
e			+	16 060	163,477.
12 Subtotal. Add columns (b), (d), and (e)	L	0.	<u>. L</u>	16,060.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1/9,00/.
(See worksheet in line 13 instructions to verify calculations.				_	
Part XVI-B Relationship of Activities	to the Acco	omplishment of Ex	xempt	Purposes	
Line No. Explain below how each activity for which in	come is reported	ın column (e) of Part XVI-A	\ contribu	ited importantly to the accomp	lishment of
the foundation's exempt purposes (other th	an by providing fu	nds for such purposes).			
N/A					
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	•				

		,		-	
·				 	
				 	
				 	
					
					
					
1				•	

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X 1a(1) X **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization X (2) Purchases of assets from a noncharitable exempt organization X (3) Rental of facilities, equipment, or other assets X (4) Reimbursement arrangements X 1b(4) (5) Loans or loan guarantees X (6) Performance of services or membership or fundraising solicitations X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees Х 1c 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. (c) Name of noncharitable exempt organization (b) Amount involved (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 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? X No Yes b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct Under penalties of peril and complete Declarat Sign Here Signature-of officer or trustee Title Check if self-employed > X Preparer's identifying number Preparer's signature EIN ▶ 06 203-438-0161 Phone no. Form **990-PF** (2009)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number Name of the organization THE ALMIRA FAMILY FOUNDATION 20-5116468 Organization type (check one): Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III ___ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Name of organization

Employer identification number

THE ALMIRA FAMILY FOUNDATION

20-5116468

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	PABLITO & LINDA ALMIRA 32 BLUE RIDGE ROAD RIDGEFIELD, CT 06877	\$ 2,296,748.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	, address, and Ear 7-4	\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
NO.	Name, address, and zir + 4	\$	Person Payroll Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number

THE ALMIRA FAMILY FOUNDATION

20-5116468

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	29740 SHS NOVO-NORDISK AS ADR		,
		\$ 2,296,748.	06/15/09
(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
		*	
(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
			0, 990-EZ, or 990-PF) (2

CINTINUALION	FUR 990-	PF,	PART
20-5116468	PAGE	1	OF

1 4	Capital dallis allu Lui	2262 IOL LAY OIL HIMESTHICHT HICOHIC					
-	(a) List and 2-story br	I describe the kind(s) of property solo rick warehouse; or common stock, 20	f, e.g., real estate, 10 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
10	U.S TRUST SCHE			$\neg \neg$		VARIOUS	VARIOUS
			· · · · · · · · · · · · · · · · · · ·				
	U.S TRUST SCHE						VARIOUS
	U.S TRUST SCHE						<u>VARIOUS</u>
d i	U.S TRUST SCHE	DULE				06/17/09	VARIOUS
	U.S TRUST SCHE	DULE			P	VARIOUS	VARIOUS
	CAPITAL GAINS						
	CALITAL GAIND	DIVIDENDE					-
9							
<u>h</u>							
J					_		
k							
							-
m							
			·				
<u>_n</u>							
0						L	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) (e) p	Gain or (loss) lus (f) minus (g)	
<u>_</u>	119,261.		116,386.				2,875.
<u>a</u>	61,975.		89,636.	 			$\frac{2,673.}{-27,661.}$
<u>b</u>			37,030.	-			0 642
C	47,388.		37,746.				9,642.
d	2,475,939.		<u>.</u>			2,	475,939.
е	105,625.		106,195.				<u>-570.</u>
f	845.						845.
g							
		· · · · · · ·					
<u>h</u>				-			
<u> </u>					****		
\perp							
k							
1.							
m							
n					-		
0	Complete only for accets showing	ng gain in column (h) and owned by t	he foundation on 12/31/69		(1) Loc	ses (from col. (h))	
	Complete only for assets shown			1	(1) LUS	of col. (h) gain ove	r col (k)
	(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		but n	ot less than "-0-")	001. (1.7),
			(),				2 075
a							2,875.
<u>b</u>						 	-27,661.
С				<u> </u>			9,642.
d		<u> </u>				2,	475,939.
e							-570.
f							845.
<u>g</u>							
<u>h</u>		-		 			
1_	 -			├ ─			
1				<u> </u>			
k							
1							
m							-
n							
				 		· -	
0		L		1			
2 C	apital gain net income or (net ca	apital loss) { If gain, also enter "-0"	in Part I, line 7	2		2,	461,070.
	,		_				
3 N	et snort-term capital gain or (los	ss) as defined in sections 1222(5) and	u (o).	}			
lī lf	gain, also enter in Part I, line 8, (loss), enter "-0-" in Part I, line 8	टिनामामा (८). १	r	,		N/A	
	(1000), EILER -U" III FAILI, IIIIE (<u> </u>		3		IV/FA	

FORM 990-	PF G	AIN OR (LOSS) F	FROM SALE	OF A	ASSETS	STA	ATEMENT 1
DESCRIPTI	(A) ON OF PROPERTY				MANNER CQUIRED	DATE ACQUIRED	DATE SOLD
U.S TRUST	SCHEDULE	_		PU	RCHASED	VARIOUS	VARIOUS
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E)	C. GAIN	(F) OR LOSS
	119,261.	116,386.		0.		0.	2,875.
DESCRIPTI	(A) ON OF PROPERTY				MANNER CQUIRED	DATE ACQUIRED	DATE SOLD
U.S TRUST	SCHEDULE	_		PU	RCHASED	VARIOUS	VARIOUS
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E)	C. GAIN	(F) N OR LOSS
	61,975.	89,636.		0.		0.	-27,661.
DESCRIPTI	(A) ON OF PROPERTY				MANNER CQUIRED	DATE ACQUIRED	DATE SOLD
U.S TRUST	SCHEDULE	_		PU	RCHASED	VARIOUS	VARIOUS
	(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)	a ar	(F)
	47,388.	OTHER BASIS 37,746.	SALE	0.	DEPRE	O. GAIN	9,642.

(A) DESCRIPTION OF PROPERTY	ď			MANNER CQUIRED	DA ACQU	TE IRED	DATE SO	LD
U.S TRUST SCHEDULE			D	ONATED	06/1	7/09	VARIOU	S
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF AC	(D) EXPENSE Q. SALE	OF	(E) DEPRE		CA TN	(F) OR LOSS	
2,475,939.	2,296,74		0.	————	0.	GAIN	179,19	
2,473,939.	2,290,7	±0•	<u> </u>		-	-	1/9,19	-
(A) DESCRIPTION OF PROPERTY	ď			MANNER CQUIRED	DA ACQU	TE	DATE SO	LD
U.S TRUST SCHEDULE			PU	RCHASED	VARI	ous	VARIOU	S
(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
SALES PRICE	OTHER BASIS	S SALE		DEPRE	IC.	GAIN	OR LOSS	
105,625.	106,19	95.	0.		0.		-57	0.
FORM 990-PF INTEREST (ND TEMPORARY	CASI	H INVEST	MENTS	STA	164,32	2
SOURCE							AMOUNT	
U.S. TRUST							5,61	9.
TOTAL TO FORM 990-PF, 1	PART I, LINE	3, COLUMN A					5,61	9.
FORM 990-PF D	IVIDENDS AND	INTEREST FRO	OM S	ECURITIE	s	STA	TEMENT	3
SOURCE		GROSS AMOUN		CAPITAL DIVIDE			LUMN (A) AMOUNT	
U.S. TRUST	-	10,44	1.		845.		9,59	6.
TOTAL TO FM 990-PF, PAI	RT I, LN 4	10,44	1.		845.		9,59	6.
	=		=					

DESCRIPTION PER BOOKS MENT INCOME ACCOUNTING FEES 2,500. 2,500. TO FORM 990-PF, PG 1, LN 16B 2,500. CAN EXPENSES NET INVEST- PER BOOKS MENT INCOME (A) EXPENSES NET INVEST- PER BOOKS MENT INCOME INVESTMENT MGT FEES 12,644. 12,644.	(D) CHARITABLE PURPOSES 0. 0. ATEMENT 5 (D) CHARITABLE PURPOSES 0.
TO FORM 990-PF, PG 1, LN 16B 2,500. 2,500. FORM 990-PF OTHER PROFESSIONAL FEES STATE (A) (B) (C) EXPENSES NET INVEST- ADJUSTED OF ADJUSTED NET INCOME INVESTMENT MGT FEES 12,644. 12,644.	0. ATEMENT 5 (D) CHARITABLE PURPOSES
FORM 990-PF OTHER PROFESSIONAL FEES (A) EXPENSES NET INVEST- ADJUSTED PER BOOKS MENT INCOME INVESTMENT MGT FEES 12,644. 12,644.	(D) CHARITABLE PURPOSES
(A) (B) (C) EXPENSES NET INVEST- ADJUSTED PER BOOKS MENT INCOME NET INCOME INVESTMENT MGT FEES 12,644. 12,644.	(D) CHARITABLE PURPOSES
DESCRIPTION EXPENSES NET INVEST- ADJUSTED OF THE PER BOOKS MENT INCOME INVESTMENT MGT FEES 12,644. 12,644.	CHARITABLE PURPOSES
	0.
TO FORM 990-PF, PG 1, LN 16C 12,644. 12,644.	0.
FORM 990-PF TAXES STA	ATEMENT 6
(A) (B) (C) EXPENSES NET INVEST- ADJUSTED OF THE BOOKS MENT INCOME NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES 17,083. 0. FOREIGN TAXES 36. 0.	0.
TO FORM 990-PF, PG 1, LN 18	0.
FORM 990-PF OTHER EXPENSES STATE	ATEMENT 7
(A) (B) (C) EXPENSES NET INVEST- ADJUSTED (DESCRIPTION PER BOOKS MENT INCOME NET INCOME	(D) CHARITABLE PURPOSES
MISCELLANEOUS CHARGES 4. 0.	0.
TO FORM 990-PF, PG 1, LN 23 4. 0.	0.

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
EQUITY		414,082.	488,200.
TOTAL TO FORM 990-PF, PART	II, LINE 10B	414,082.	488,200.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
FORM 990-PF DESCRIPTION	OTHER INVESTMENTS VALUATION METHOD	BOOK VALUE	STATEMENT 9 FAIR MARKET VALUE
	VALUATION	BOOK VALUE 1,837,282.	FAIR MARKET

FORM 990-PF

STATEMENT 10

	DURING THE YEAR	STAT	EMENT 10
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
CONNECTICUT FOOD BANK 150 BRADLEY STREET EAST HAVEN, CT 06512	NONE SUPPORT LOCAL FOOD PANTRY, NEW HAVEN CT	501(C)(3)	8,000.
DANBURY HOSPITAL HOSPITAL AVENUE DANBURY, CT 06810	NONE CARDIOLOGY & COMPLEMENTARY MEDICINE	501(C)(3)	40,000.
ENGLEWOOD HOSPITAL AND MEDICAL CENTER FOUNDATION 350 ENGLE STREET ENGLEWOOD, NJ 07631	NONE NEW EMERGENCY DEPARTMENT	501(C)(3)	30,000.
NATIONAL MULTIPLE SCLEROSIS SOCIETY P.O. BOX 4527 NEW YORK, NY 10163	NONE FOR RESEARCH AND DEVELOPMENT	501(C)(3)	15,000.
PHELPS MEMORIAL HOSPITAL CENTER 701 NORTH BROADWAY SLEEPY HOLLOW, NY 10591	NONE NEONATAL VENTILATOR SYSTEM	501(C)(3)	25,000.
RIDGEFIELD BOYS & GIRLS CLUB GOVERNOR STREET RIDGEFIELD, CT 06877	NONE EXPANSION PROJECT	501(C)(3)	2,500.
ST. ELIZABETH SETON CHURCH OF RIDGEFIELD RIDGEBURY ROAD RIDGEFIELD, CT 06877	NONE DEBT REDUCTION CAMPAIGN	501(C)(3)	3,500.
MILL RIDGE PRIMARY SCHOOL 49A HIGH RIDGE ROAD DANBURY, CT 06811	NONE SPECIALIZED SCHOOL PROGRAMS	501(C)(3)	10,000.

GRANTS AND CONTRIBUTIONS

THE ALMIRA FAMILY FOUNDATION			20-5116468
UNIVERSITY OF CONNECTICUT 2390 ALUMNI DRIVE STORRS, CT 06269.	NONE ATHLETIC DEVELOPMENT FUND	501(C)(3)	2,500.
WESTCHESTER MEDICAL CENTER 100 WOODS ROAD VAHALLA, NY 10595	NONE MEMORY OF BRITTA PEDERSEN	501(C)(3)	5,000.
VASSAR COLLEGE 124 RAYMOND AVENUE POUGHKEEPSIE, NY 12604	NONE GENERAL SCHOLARSHIP FUND	501(C)(3)	2,500.
YALE UNIVERSITY P.O. BOX 2038 NEW HAVEN, CT 06521	NONE SCHOOL OF MANAGEMENT HEALTH CONF.	501(C)(3)	3,000.
DANBURY VOLUNTEER CENTER 58 DIVISION STREET DANBURY, CT 06810	NONE GENERAL FUND	501(C)(3)	2,500.
FAIRFIELD COUNTY COMMUNITY FOUNDATION 383 MAIN AVENUE NORWALK, CT 06851	NONE FUNDS FOR WOMEN & GIRLS, HEALTH & HUMAN SERVICES	501(C)(3)	5,000.
WOMENS CENTER OF GREATER DANBURY 2 WEST STREET DANBURY, CT 06810		501(C)(3)	2,500.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		157,000.

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No. 1545-1709

	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box		ightharpoons				
	If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)						
Do n	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	led Fo	orm 8868				
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		·				
A cor	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con	nplete					
	only .	٠.	▶□				
All ot	her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar	exter	nsion of time				
to file	income tax returns.						
noted (not a you n	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronical automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or construction the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits	cally rinsolid	f (1) you want the additional ated Form 990-T Instead,				
Type print		Emp	loyer identification number				
	THE ALMIRA FAMILY FOUNDATION	20-5116468					
File by due da filing yo	te for Number, street, and room or suite no. If a P O. box, see instructions out 3.2. BLUE RIDGE ROAD		<u> </u>				
return instruc							
Chec	k type of return to be filed (file a separate application for each return)						
	Form 990 Form 990-T (corporation) Form 47	20					
	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 52	227					
	Form 990-EZ Form 990-T (trust other than above) Form 60	069					
X	Form 990-PF	370					
• Th	PABLITO A. ALMIRA e books are in the care of > 32 BLUE RIDGE ROAD - RIDGEFIELD, CT 068	77					
Te	lephone No ▶ 203-431-9071 FAX No ▶						
	the organization does not have an office or place of business in the United States, check this box		▶□				
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)						
oox j	► ☐ If it is for part of the group, check this box ► ☐ and attach a list with the names and EINs of all	memb	ers 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 unt <u>AUGUST 15, 2010</u> , to file the exempt organization return for the organization named a		The extension				
	is for the organization's return for.						
	► X calendar year 2009 or tax year beginning , and ending						
	, and ending, and ending		_				
2	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period				
За	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_	<u>\$</u> 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.				
С	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	s0.				
	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form						
	on in you are going to make an electronic rulid withdrawal with this north cooc, see north 6403°EO and north	ひひ/ ゴー	LO TOT PAYTHETIC INSTRUCTIONS.				

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

Form 8868 (Rev. 4-2009)