

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



### Form **990-PF**

### **Return of Private Foundation**

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

Department of the Treasury Internal Revenue Service

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

2009

For	a nev	de ver 2000 es ter ver heringing		and anding		<del></del>
		dar year 2009, or tax year beginning	Industrial and an effective	, and ending	Freelookus	
G	neck	all that apply Initial return  Amended return	Address change	ormer public charity	Final retur	Π
			Address clians	·	A Employer identificatio	n number
	the I				A Employer wentingano	n number
	abel. Ierwis	THE PROPERTY AND MADERALES	E DIASSI FOU	иоттали	26-0141688	3
	print	Number and street (or P O box number if mail is not de		Room/suite	B Telephone number	
	r type	· · ·	, ,		973-360-06	511
See	Spec	City or town, state, and ZIP code			C If exemption application is	
Inst	ructio	FLORHAM PARK, NJ 079	32		D 1. Foreign organization	
H C	heck	type of organization X Section 501(c)(3) ex		··	Foreign organizations makes here and attach contacts.	eeting the 85% test,
	_		Other taxable private founda	ition		
l Fa		rket value of all assets at end of year   J   Accounti		Accrual	E If private foundation st under section 507(b)(1	(A), check here
			her (specify)		F If the foundation is in a	
_	\$	830,975. (Part I, colu	mn (d) must be on cash t	basis)	under section 507(b)(1	
Pa	irt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessanty equal the amounts in column (a))	(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	34,000.		N/A	
	2	Check In the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	li l			
	4	Dividends and interest from securities	2.	2.		STATEMENT 2
	5a	Gross rents				
	b	Net rental income or (loss)				
0	6a	Net gain or (loss) from sale of assets not on line 10	<416,901.	>		STATEMENT 1
nue	b	Gross sales price for all assets on line 6a 181,644.	4	1 1 1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
ш	8	Net short-term capital gain		······································		
	9	Income modifications Gross sales less returns				
	10a	and allowances			**************************************	
	1	Less Cost of goods sold				
	1	Gross profit or (loss)				
	11	Other income  Total Add lines 1 through 11	<382,899.	> 2.	· · · · · · · · · · · · · · · · · · ·	
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages			<del></del>	
	15	Pension plans, employee benefits				
ses	1	Legal fees				
		Accounting fees				
Exp	C	Other professional fees STMT 3	2,322.	22.		2,300.
Operating and Administrative Expen	17	Interest RECEIVED				
trat	18	Taxes STMT	33,740.	0.		0.
nis	19	Taxes STMT & STM				
Ē	20	occupanty]				
ďΡ	21	Traver, quinciences-and-meetings	ļ			
ē	22	Printing and policine EN. UT	2 200		-	2 200
ing	23	Other expenses STMT 5	3,200.	0.		3,200.
era	24	Total operating and administrative	39,262.	22.		5,500.
ô	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	177,250.	22.		177,250.
	26	Total expenses and disbursements.	1111250		<u> </u>	11,7250
	20	Add lines 24 and 25	216,512.	22.		182,750.
	27	Subtract line 26 from line 12				
		Excess of revenue over expenses and disbursements	<599,411.	>		
		Net investment income (if negative, enter -0-)		0.		
		Adjusted net income (if negative, enter -0-)			N/A	

SCAMNED NOV 2 2 2010

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of y	<del></del>
Part II Qualifice Sifeets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	91.	<12,525.>	<12,525.
2 Savings and temporary cash investments	500.	<u> </u>	
3 Accounts receivable ► 12,250.			
Less allowance for doubtful accounts		12,250.	12,250.
4 Pledges receivable ►			
Less allowance for doubtful accounts ▶			
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
7 Other notes and loans receivable			
Less allowance for doubtful accounts		1	
8 Inventories for sale or use			·
8 Inventories for sale or use 9 Prepaid expenses and deferred charges			<del></del>
10a Investments - U.S. and state government obligations			
b Investments - corporate stock STMT 6	2,614,920.	2,016,375.	831,250.
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
Less accumulated depreciation			
12 Investments - mortgage loans			····
13 Investments - other			
14 Land, buildings, and equipment basis ▶			<del></del>
Less accumulated depreciation			
15 Other assets (describe ►			
16 Total assets (to be completed by all filers)	2.615.511.	2,016,100.	830,975.
17 Accounts payable and accrued expenses			000/0101
18 Grants payable			
a lan para de la constante de			
20 Loans from officers, directors, trustees, and other disqualified persons			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
22 Other liabilities (describe )			
Ctrief 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			
0 24 Unrestricted			
25 Temporarily restricted			
25 Permananthy restricted			
26 Permanently restricted Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
O 27 Control stock trust proposal or correct funds	2,615,511.	2,016,100.	
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	2,615,511.	2,016,100.	
30 Total net assets or fund balances	2,013,311.	2,010,100.	
31 Total liabilities and net assets/fund balances	2,615,511.	2,016,100.	
		2,010,100.	
Part III Analysis of Changes in Net Assets or Fund Ba	lances		
Total net assets or fund balances at beginning of year - Part II, column (a), line 3	10		
(must agree with end-of-year figure reported on prior year's return)	-	1	2,615.511.
2 Enter amount from Part I, line 27a		2	2,615,511. <599,411.
Other increases not included in line 2 (itemize)		3	0.
Add lines 1, 2, and 3		4	2,016,100.
5 Decreases not included in line 2 (itemize)		5	0.
5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (h) line 30	6	2,016,100.
- Total not assets of land balances at one of year finite 4 finites line 3) - Fall II, COI	armi (u), ilile ou		Form <b>990-PF</b> (2009)

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

Form **990-PF** (2009)

923521 02-02-10

Enter qualifying distributions from Part XII, line 4

8

Form	990-PF (2009) THE FRANK AND MARIANNE DIASSI FOUNDATION 26-	-01416	88		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see in	stru	ctior	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%				0.
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
3					0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
5	Tax based on Investment Income. Subtract line 4 from line 3 if zero or less, enter -0-	<del></del>			0.
	Credits/Payments				
	2009 estimated tax payments and 2008 overpayment credited to 2009				
	Exempt foreign organizations - tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)				
	Backup withholding erroneously withheld 6d				Λ
	Total credits and payments Add lines 6a through 6d	+			0.
		<del>                                     </del>	_		0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	+			<del>••</del>
	Enter the amount of line 10 to be Credited to 2010 estimated tax ► Refunded ► 11  Int VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
14	any political campaign?		1a		X
h	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 published or		·		<del>1177111</del>
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
_	(1) On the foundation ▶ \$ 0 • (2) On foundation managers ▶ \$ 0 •				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	į			
	managers ▶ \$ 0.	İ			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	L	2		X
	If "Yes," attach a detailed description of the activities.	[	, ,		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	L	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	.	4a		Х
b	of "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	ļ.,.	5	<del>~~~</del>	X
	If "Yes," attach the statement required by General Instruction T	ŀ			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	j			
	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	Ì	_	v	
_	remain in the governing instrument?	-	6	<u>X</u>	
1	Did the foundation have at least \$5,000 in assets at any time during the year?	ļ-,	7	X	
0-	If "Yes," complete Part II, col (c), and Part XV.		ļ		
øa	Enter the states to which the foundation reports or with which it is registered (see instructions)  NJ				
		—			
٥	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If "No," attach explanation</i>		8b	Х	
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	·	<u> </u>	41	ļ
3	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	1	9	:	Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10		X
	11 165, attach a schiedule listing their hallies and douresses	Form		PF (	

923531 02-02-10

X

4a

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?

Orm 990-PF (2009) THE FRANK AND MARIANNE D			26-01416	88 Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be R	equired (continu	ued)	<del></del>
<ul> <li>5a During the year did the foundation pay or incur any amount to</li> <li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section)</li> <li>(2) Influence the outcome of any specific public election (see section 4955), or any voter registration drive?</li> <li>(3) Provide a grant to an individual for travel, study, or other similar purposes</li> <li>(4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?</li> <li>(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?</li> <li>b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the context of the context of the prevention of cruelty to children or animals?</li> </ul>	n 4945(e))? or to carry on, directly or indire ? n described in section or educational purposes, or fo	ctly, Ye Ye Ye Ye	s X No	
section 53 4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h  c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.494.	rom the tax because it maintain ${f N}$	ned /A Ye	es No	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		s X No	
<ul> <li>a personal benefit contract?</li> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a part of the form 8870</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax of the foundation receive any proceeds or have any net income attributed.</li> </ul>		es X No	6b X	
Part VIII Information About Officers, Directors, Trust		nagers, Highly	/	
Paid Employees, and Contractors  List all officers, directors, trustees, foundation managers and their	compensation	<del></del> -		
(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 P DIASSI	PRESIDENT AND	TREASURE	R	
25 B HANOVER ROAD	1 00		0	
FLORHAM PARK, NJ 07932 MARIANNE R. DIASSI 25 B HANOVER ROAD	1.00 VICE PRESIDEN	T 0.	0.	0.
FLORHAM PARK, NJ 07932	1.00	0.	0.	0.
DIANE GIAIMO 25 B HANOVER ROAD	SECRETARY			
FLORHAM PARK, NJ 07932	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in	T	enter "NONE."	(d) Contributions to	(a) F
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000			<b>&gt;</b>	<u>0</u>

Total. Add lines 1 through 3

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign f	oundations, see	e instructions.)
1 F	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	592,398. 37,195.
b A	Average of monthly cash balances	1b	37,195.
c f	Fair market value of all other assets	10	
<b>d</b> 1	Total (add lines 1a, b, and c)	1d	629,593.
e i	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	0.
3	Subtract line 2 from line 1d	3	629,593.
4 (	Cash deemed held for charitable activities  Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,444. 620,149.
5 I	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	620,149.
6	Minimum investment return. Enter 5% of line 5	6	31,007.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here  and do not complete this part )	s and certain	
1 1	Minimum investment return from Part X, line 6	1	31,007.
2a '	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	31,007.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	31,007.
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	31,007.
	urt XII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1a	182.750.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1b	182,750. 0.
	Program-related investments - total from Part IX-B	2	
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	-	
	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3a	
	•	3b	
	Cash distribution test (attach the required schedule)  Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	182,750.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	7	
	income Enter 1% of Part I, line 27b	5	0.
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	182,750.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years		<del></del>

Page 9

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				31,007.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			57,681.	
b Total for prior years				
<u>2007</u> ,,		112,468.		<del>!!'</del>
3 Excess distributions carryover, if any, to 2009				
a From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 182,750.			55 601	
a Applied to 2008, but not more than line 2a			57,681.	·····
<b>b</b> Applied to undistributed income of prior		110 460		
years (Election required - see instructions) *		112,468.		<del></del>
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.	m-therinamedar-Inkain - ma		12 (01
d Applied to 2009 distributable amount	0			12,601.
e Remaining amount distributed out of corpus	0.	trability lebelled that the many	<del></del>	
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
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				18,406.
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	0.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009  * SEE STATEMENT 7				Form 000 DE (2000)

	NK AND MARI				41688 Page 10
Part XIV Private Operating F	<del></del>		I-A, question 9)	N/A	
1 a If the foundation has received a ruling of		· · · · · ·			
foundation, and the ruling is effective fo	r 2009, enter the date of t	the ruling	▶	<del> </del>	<del></del>
<b>b</b> Check box to indicate whether the found		ng foundation described		4942(j)(3) or49	42( <u>j)(</u> 5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	40.000	
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for	]		,		
each year listed					
b 85% of line,2a					
<ul> <li>Qualifying distributions from Part XII,</li> </ul>					
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				<del></del>	
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					ı
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					<del></del>
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)				-	
(3) Largest amount of support from	•			1	
an exempt organization					
(4) Gross investment income					· · · · · · · · · · · · · · · · · · ·
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or mo	re in assets
at any time during				,	
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	no have contributed more		tributions received by th	e foundation before the clos	se of any tax
year (but only if they have contributed i	more than \$5,000) (See s	section 507(d)(2) )			
SEE STATEMENT 8					
b List any managers of the foundation who other entity) of which the foundation had			(or an equally large port	ion of the ownership of a pa	irtnership or
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan,	, Scholarship, etc., P	rograms:		
Check here  if the foundation of the foundation makes gifts, grants, etc.	•		-	not accept unsolicited requi	
a The name, address, and telephone num	<del></del>			<del></del>	
N/A		арриодионо оновна ос			
N/A, NA					
b The form in which applications should	be submitted and informa	tion and materials they s	hould include	<del> 10</del>	
NA/		,			
c Any submission deadlines					
N/A	le queb es bu geographie	ol arono, oberstable fields	lundo of institutions, or	other feeters	
${f d}$ Any restrictions or limitations on award ${f N/A}$	is, such as by geographic	ai areas, charitadie tields	, kinas ot institutions, or	other factors	
					- 000 DE
923601 02-02-10					Form <b>990-PF</b> (2009)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ear or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
		;		
SEE STATEMENT 9	<u> </u>		<b>▶</b> 3a	177,250
Total  b Approved for future payment	<u> </u>		33	111,230
a reproved for fatore payment				
NONE				
NONE				1
Total			<b>▶</b> 3h	0

Part XVI-A	Analysis	of Income	-Producing	<b>Activities</b>
------------	----------	-----------	------------	-------------------

Fater areas amounts unless etherwise indicated	Unrelated	business income	Exclud	ed by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue	code	Amount	∞de	Amount	Tunction income
a	_		+		<del></del>
b		***	++	···	<del></del>
<u> </u>	<del>-    </del>		1 1		<del></del>
d	_	·	+ +	· <del></del> -	
<u> </u>	_	<del></del>	<del>  </del>		
1	_	<del> </del>			
g Fees and contracts from government agencies			<del> </del> +	<del></del>	<del></del>
2 Membership dues and assessments			<del> </del>	· · · · · · · · · · · · · · · · · · ·	
3 Interest on savings and temporary cash					
Investments			14	2.	<del></del>
4 Dividends and interest from securities	ļ	<del></del>	1 4	4.	<del></del>
5 Net rental income or (loss) from real estate	-				
a Debt-financed property			<del>  </del>		
b Not debt-financed property			+		
6 Net rental income or (loss) from personal			1		
property		···	1		
7 Other investment income			+		<del> </del>
8 Gain or (loss) from sales of assets other			18	<116 001	
than inventory			10	<416,901.	<del></del>
9 Net income or (loss) from special events			+		<del></del>
10 Gross profit or (loss) from sales of inventory			+		
11 Other revenue					
<u>a</u>	1			<del></del>	
b	-		++		
<u> </u>				·	
d	_ <del>                                    </del>		1		
E	_	0.	1	<416,899.	> 0.
12 Subtotal Add columns (b), (d), and (e)	1	<u> </u>	• 1		<416,899.
13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations	<b>\</b>			13	V410,000.
Part XVI-B Relationship of Activities		mplishment of E	xempt	Purposes	_
Line No. Explain below how each activity for which in					nplishment of
▼ the foundation's exempt purposes (other th	an by providing fun	ds for such purposes)			
N/A					
			····		
		·			
	<del>-</del>				
		<del>-</del>		• •	
					·
923621					Form <b>990-PF</b> (2009)

12

P	art X	Information Re Exempt Organ		o and Transactions an	d Relationships With Nonc	haritable	•	<u>40 .0</u>
1	Did th	e organization directly or indi	rectly engage in any of the follo	owing with any other organization	described in section 501(c) of		Yes	No
				n 527, relating to political organiza				
а	Trans	fers from the reporting found:	ation to a noncharitable exemp	t organization of				ĺ
	(1)	ash				1a(1)		Х
	(2)	Other assets				1a(2)		X
b	Other	transactions						
	(1) 8	ales of assets to a noncharita	ble exempt organization			1b(1)		X
	(2) F	urchases of assets from a no	ncharitable exempt organizatio	n		1b(2)		X
	(3) F	Rental of facilities, equipment,	or other assets			1b(3)		X
	(4) F	Reimbursement arrangements				1b(4)		X
	(5) t	oans or loan guarantees.				1b(5)		Х
	(6) F	erformance of services or me	mbership or fundraising solici	tations		1b(6)		X
C	Shari	ng of facilities, equipment, ma	illing lists, other assets, or paid	l employees		10		X
	or se	rvices given by the reporting f	oundation If the foundation re other assets, or services receiv	ceived less than fair market value	ys show the fair market value of the goo in any transaction or sharing arrangeme	ent, show in		
(4)	Line no	(b) Amount involved	N/	· •	(0) Description of transfers, transactions,	and sharing an	rangeme	nts
			147	<u> </u>				
_								
				· · · · · · · · · · · · · · · · · · ·				
-								
				···				
-								
				·-				
				·				
				······································				
				··· - · · · · · · · · · · · · · · · · ·		-		
	ın sed	•	r than section 501(c)(3)) or in	one or more tax-exempt organiza section 527?	tions described	Yes	X	☐ No
		(a) Name of org	janization	(b) Type of organization	(c) Description of relat	ionship		
		N/A						
		····						
Here	and cor	gnature of officer or trustee		od on all information of which preparer had on the preparer had o	President Title	, it is true, corre		mber
Sign Here	Paid Preparer's Use Only	Preparer's signature  Firm's name (or yours BESS	Trag Stah,	Dat /	Self- employed EIN	PO032		
	Paid Preparer' Use Only	if self-employed), 630	FIFTH AVENUE YORK, NEW YOR	к 10111		2-708-	910	0

### Schedule B (Form 990, 990-EZ, or 990-PE)

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 FRANK AND MARIANNE DIASSI FOUNDATION 26-0141688 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 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 that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

923451 02-01-10

for Form 990, 990-EZ, or 990-PF.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

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

	4	1	
Page	⊥ of	⊥ of Part I	

Name of organization

Employer identification number

### THE FRANK AND MARIANNE DIASSI FOUNDATION

26-0141688

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	FRANK P. DIASSI  25B HANOVER ROAD  FLORHAM PARK, NJ 07932	\$ 34,000.	Person X 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
		<b></b> \$	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
		<b> \$</b>	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
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

(A) DESCRIPTION OF PROPERTY  CENVEO INC CO  (B) (C) GROSS VALUE SALES PRICE TIME OF COMMERCE TIME OF COMMERCE TO THE OF COMMERCE TO COMMER	E AT	(D) EXPENSE OF SALE		ED ACQU VARIO	IRED DATE SOLD
(B) (C GROSS VALU SALES PRICE TIME O	E AT F ACQ.	EXPENSE OF		(E)	
GROSS VALU	E AT F ACQ.	EXPENSE OF		. ,	(F)
SALES PRICE TIME O	F ACQ.	SALE		DDEC	
181,644. 5	98,545.			PREC.	GAIN OR LOSS
		(	).	0.	<416,901.
CAPITAL GAINS DIVIDENDS FROM P.	ART IV				0.
TOTAL TO FORM 990-PF, PART I,	LINE 6A			:	<416,901.
FORM 990-PF DIVIDENDS	AND INTE	REST FROM	SECURI	TIES	STATEMENT 2
SOURCE	GROS	S AMOUNT		AL GAINS IDENDS	COLUMN (A) AMOUNT
BESSEMER TRUST		2.		0.	2.
TOTAL TO FM 990-PF, PART I, LN	4	2.		0.	2.
FORM 990-PF OT	HER PROFE	SSIONAL FI	EES		STATEMENT 3
	(A) EXPENSES PER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTE NET INCO	
CUSTODY FEES FINANCIAL SERVICE FEES	22,300		22.		2,300.
TO FORM 990-PF, PG 1, LN 16C	2,322		22.		2,300.

FORM 990-PF	TAX	ES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
2008 EXCISE TAX	33,740.	0.	•		0.
TO FORM 990-PF, PG 1, LN 18	0-PF, PG 1, LN 18 33,740. 0.				
FORM 990-PF	OTHER E	XPENSES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM		
	3,200.	0 .	•	3,2	00.
TO FORM 990-PF, PG 1, LN 23	FORM 990-PF, PG 1, LN 23 3,200. 0.				00.
	,				
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	6
DESCRIPTION		ВС	OOK VALUE	FAIR MARKE VALUE	Т
CENVEO INC COM			2,016,375.	831,250.	
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		2,016,375.	831,2	50.

7

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION
53.4942(A)-3(D)(2) TO APPLY
EXCESS QUALIFYING DISTRIBUTIONS
TO PRIOR YEAR'S UNDISTRIBUTED INCOME

STATEMENT

SEE ATTACHED

### FRANK AND MARIANNE DIASSI FOUNDATION 25B HANOVER ROAD FLORHAM PARK, NJ 07932

### FORM 990-PF EIN 26-0141688 TAX PERIOD ENDED 12/31/2009

### **Supplemental Schedule of Information**

Part XIII, Undistributed Income, Line 4b

Tax Year

Election Under IRC Reg. Sec. 53-4942(a)-3(d)(2)

Pursuant to IRC Section 4942(h)(2) and Regulation 53.4942(a)-3(d)(2), The Frank and Marianne Diassi Foundation hereby elects to treat current year's qualifying distributions in excess of the immediately preceding tax year's undistributed income as being made out of (check one):

**Amount** 

X Undistributed income from the tax year(s) ending:

<u>2007</u>	<u>\$112,468</u>
<u>2008</u>	<u>\$57,681</u>
Corpus	
Signature Signature	/1/8/2010 Date

FRANK P. DIASSI, PRESIDENT Name & Title

FORM 990-PF PART XV - LINE 1A 8 STATEMENT LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

FRANK P DIASSI MARIANNE R. DIASSI

FORM 990-PF GRANTS PAID	STATEMENT 9				
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT		
BRIDGE FUND OF NEW YORK INC 271 MADISON AVENUE NEW YORK, NY 10016	NONE GENERAL PURPOSE	PUBLIC	1,000.		
BRITTANY SAMPSON COLLEGE TRUST C/O LUTHERAN CHURCH OF GOD 791 NEWTOWN-YARDLEY RD NEWTOWN, PA 18940	NONE GENERAL PURPOSE	PUBLIC	1,000.		
DIOCESE OF METUCHEN 146 MELTARS LN PISCATAWAY, NJ 08854	NONE OPERATIONAL	PUBLIC	1,000.		
FAR HILLS-BEDMINISTER FIRE DEPT. 100 MILLER LANE BEDMINSTER, NJ 07921		PUBLIC	1,000.		
LOYOLA HOUSE OF RETREAT 161 JAMES ST. MORRISTOWN , NJ 07960	NONE GENERAL PURPOSE	PUBLIC	30,000.		
RERITAN BAY MEDICAL CENTER FOUNDATION 471 LAWRIE STREET PERTH AMBOY, NJ 08861	NONE GENERAL PURPOSE	PUBLIC	100,000.		

THE FRANK AND MARIANNE DIASSI FO	OUNDATION		26-0141688
ST. BRIGID'S CATHOLIC CHURCH 129 MAIN STREET PEAPACK, NJ 07977	NONE GENERAL PURPOSE	PUBLIC	5,000.
THE ALZHEIMER'S ASSOCIATION 360 LEXINGTON AVENUE NEW YORK, NY 10017	NONE GENERAL PURPOSE	PUBLIC	1,000.
THE METROPOLITAN OPERA ASSOCIATION INC. 30 LINCOLN CENTER NEW YORK, NY 10023	NONE GENERAL PURPOSE	PUBLIC	25,250.
THE UNIVERSITY OF CHICAGO BOOTH SCHOOL OF BUSINESS 5807 SOUTH WOODLAWN AVENUE CHICAGO, IL 60637	NONE GENERAL PURPOSE	PUBLIC	10,000.
THE V FOUNDATION 106 TOWERVIEW COURT CARY, NC 27513	NONE GENERAL PURPOSE	PUBLIC	2,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		177,250.

# Bessemer Trust

Account Details	lls				Repo Amoi Trade	Report dated Decer Amortized tax cost Trade date basis	Report dated December 31, 2009 Amortized tax cost Trade date basis			•	
Security no Security name	0	CJSIP/ ISIN/ SEDOL	Shares/ units	Average cost per share/unit	183 183	Market vælue per share/unit	Market value	Percent of asset class	Unrealized gain/(loss)	Estimated annual income	Current yield
FRANKA	FRANK AND MARIANNE DIASSI FDN CUST	SSI FDN CUST									
CASH AND SHORT TERM	FERM										
CASH AVAILABLE											
999994 PRINCIPAL CASH	CASH		0.000	\$0.00	0%	\$0.000	0\$	0.0%	80	9	
999995 INCOME CASH	ASH		0.000	\$0.00	S\$	\$0.000	\$0	%0.0	S.	\$0	
999996 NET CASH			· ·	\$0.00	ı Î	\$0.000	P	0.1%	80	\$0	0.00%
Total CASH AVAILABLE					]   			0.1%	S	0\$	0.00%
CASH											
CHECKTAR					(1) (1) (2)	\$1.000	(22)	99.9%	\$0	\$10	0.01%
Total					(272)		(2%)	89.9%	S	\$10	0.01%
Total CASH					(25)		(275) 100.0%	100.0%	2	\$10	0.01%
OTHER											
MISC ASSETS-NO COMMISSION	MISSION										
815852 CENVEO INC COM	NC COM	15670S105	95,000.000	#	# 2,010,375	\$8.750	\$831,250	100.0%	(\$451,250)	\$0	0.00%
Total MISC ASSETS-NO COMMISSION	COMMISSION			7#	# 2,016,375		\$831,250	100.0%	(\$451,250)	\$	0.00%
Total OTHER				\$2	\$2,016, m	\	\$831,250	100.0%	(\$451,250)	S	0.00%
Total				¥2	82,016,100	0	#830,975		(\$451,250)	\$10	0.00%

## Form **8868**' (Rev. April 2009)

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complete only Part I and check this box			<b>▶ X</b>	
• If you	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)			
Do not c	omplete Part II unless you have already been granted an automatic 3-month extension on a previously fi	led Fo	rm 8868.		
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed).				
A corpora	ntion required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete			
Part I onl		.,		▶ □	
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	evte	nsion of time		
	ome tax returns.	exte.	ision of time		
noted be (not auto you must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file ov/efile and click on e-file for Charities & Nonprofits.	cally i nsolid	f (1) you want ated Form 990	the additional D-T. Instead,	
Type or	Name of Exempt Organization	Emp	loyer identific	cation number	
print		ł			
File by the	THE FRANK AND MARIANNE DIASSI FOUNDATION	2	6 - 01416	88	
due date for filing your return See					
Instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. FLORHAM PARK, NJ 07932				
Check ty	pe of return to be filed (file a separate application for each return):		<del>.</del>		
_	n 990 Form 990-T (corporation) Form 47				
=	n 990-BL				
==	m 990-EZ Form 990-T (trust other than above) Form 60				
LA_ For	n 990-PF	70			
Teleph If the c	THE FRANK AND MARIANNE DIASSI FDN oks are in the care of ▶ 25B HANOVER ROAD - FLORHAM PARK, NJ 079 one No. ▶ 973-360-0611  FAX No. ▶ rganization does not have an office or place of business in the United States, check this box of for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	s is fo			
ıs fo	uest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time untial AUGUST $15$ , $2010$ , to file the exempt organization return for the organization named a rathe organization's return for:  X calendar year $2009$ or, and ending, and ending		The extension		
2 If th	s tax year is for less than 12 months, check reason: Initial return Final return		Change in acc	counting period	
	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
	efundable credits. See instructions.	3a	_\$	0.	
	s application is for Form 990-PF or 990-T, enter any refundable credits and estimated			•	
	payments made. Include any prior year overpayment allowed as a credit.	<u>3b</u>	\$	0.	
	nce Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	-			
-	sit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			^	
See	nstructions.	_3c	\$	0.	
Caution. I	you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	EO for paymer	nt instructions.	
	r Privacy Act and Paperwork Reduction Act Notice, see Instructions.		-	368 (Rev. 4-2009)	
	· · · · · · · · · · · · · · · · · · ·		1 01111 00	ノン・(1107. サームリリン)	

923831

Form 88	368 (Rev 4-2009)				Page	2	
• If yo	to are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and c	heck this box	κ	_	► X		
•	Only complete Part II if you have already been granted an automatic 3-month extension on a pre			868.			
If you	u are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)						
Part	Additional (Not Automatic) 3-Month Extension of Time. Only file the o	riginal (no co	pies n	eeded).		_	
Туре о	Name of Exempt Organization		Empl	oyer identific	ation number		
print	THE FRANK AND MARIANNE DIASSI FOUNDATION	<i>#</i>	20	5-01416	88		
File by the extended due date	Number, street, and room or suite no. If a P.O. box, see instructions.		For IP	S use only		_	
filing the return Se instruction			3.				
Check type of return to be filed (File a separate application for each return):  Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 990-BL Form 990-PF Form 990-PF Form 990-T (trust other than above) Form 4720 Form 6069							
STOP!	Do not complete Part II if you were not already granted an automatic 3-month extension o	n a previous	ly file	d Form 8868.		_	
Telepoint Telepo	THE FRANK AND MARIANNE DIASSI FDN books are in the care of ▶ 25B HANOVER ROAD - FLORHAM PARK, phone No. ▶ 973-360-0611 FAX No. ▶ error or a Group Return, enter the organization's four digit Group Exemption Number (GEN) and attach a list with the names and provided in the control of the group, check this box ▶ and attach a list with the names and provided in the control of the group, check this box ▶ ANOVEMBER 15 2010	NJ 079	s is for			 5	
		nd ending					
	this tax year is for less than 12 months, check reason: Initial return Final r	return	<b>(</b>	Jnange in acc	ounting period	J	
I	tate in detail why you need the extension  NFORMATION NEEDED TO FILE A COMPLETE AND ACCURA  VAILABLE.	TE RET	URN	IS NOT	YET	_	
		) nov			<del>-</del> -		
	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less a correfundable credits. See instructions.	arry	8a	\$	0	_	
_	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estil	mated	- 00			÷	
	x payments made. Include any prior year overpayment allowed as a credit and any amount pair		Ì				
	reviously with Form 8868.		8b	\$	0	•	
c B	alance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, or	deposit					
w	th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See it	nstructions.	8c	\$	0	<u>•</u>	
	Signature and Verification						
Under pe	natties of perjury, I declare that I have examined this form, including accompanying schedules and statement correct, and complete, and that apparent or prepare this form	nts, and to the	best of	my knowledge	and belief,		
			Data	× 8/			
Signature	avag turu Title Agent	<del> </del>	Date		70 // O 168 (Rev 4-200	<u></u>	
				70IIII <b>00</b>	100 (NEV 4-200	<b>' ' '</b>	