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Form '990-PF

Return of Private Foundation

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

OMB No 1545-0052

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.							
For calendar year 2010, or tax year beginning OCT 21, 2010 , and ending DEC 31, 2010							
G	Check	all that apply: X Initial return Amended return	Initial return of a fo	ormer public charity	Final return Name change		
Name of foundation JOANNE AND AL DALOISIO FAMILY FOUNDATION C/O ALFONSO DALOISIO, JR. A Employer 27-3						number	
Nu	nber a	nd street (or P 0 box number if mail is not delivered to street 75-77 GROVE STREET	address)	Room/suite	B Telephone number (973) 684-	0362	
Cit	y or to	own, state, and ZIP code PATERSON, NJ 07503			C if exemption application is po D 1. Foreign organizations	, check here	
H_(_	type of organization: X Section 501(c)(3) ex	• •		Foreign organizations mer check here and attach col	mputation Last,	
			Other taxable private founda		E If private foundation stat	us was terminated	
		arket value of all assets at end of year J Accounting	ng method: X Cash her (specify)	Accrual	under section 507(b)(1)		
	•\$	Part II, col. (c), line 16) 0t 44,718. (Part I, colu		pasis)	F If the foundation is in a 6 under section 507(b)(1).		
	art I		(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	45,860.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	2	Check In the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	161.	161.	161.	STATEMENT 1	
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a					
ě	7	Capital gain net income (from Part IV, line 2)		0.		,	
	8	Net short-term capital gain	-				
	9 10a	Income modifications Gross sales less returns and allowances					
		Less Cost of goods sold					
	l	Gross profit or (loss)					
	11	Other income	46,021.	161.	161.		
	12	Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc	40,021.	0.	0.	0.	
	14	Other employee salaries and wages	•		•		
	15	Pension plans employee henefits					
Expenses		Legal fees SECFIVED					
X		Other professional fees					
		Interest III JUN 1 3 2011					
t & v &⊌∤ફ Administrative	18						
, '	19	Depreciation and depletonEN, UT					
₽ Ё	20	Occupancy					
ž	21	Travel, conferences, and meetings					
and	22	Printing and publications	750				
Operating	23	Other expenses STMT 2	750.	0.	0.	0.	
rat E	24	Total operating and administrative	750.	0.	0.	0.	
ď	0.5	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	730.		0.	0.	
3	25 26	Total expenses and disbursements.				.	
)	20	Add lines 24 and 25	750.	0.	0.	0.	
	27	Subtract line 26 from line 12:					
		Excess of revenue over expenses and disbursements	45,271.				
		Net investment income (if negative, enter -0-)		161.			
	c	Adjusted net income (if negative, enter -0-)			161.		

023501 LHA For Paperwork Reduction Act Notice, see the instructions.

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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 ye	<u>ar </u>
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing		4,411.	4,411.
2 Savings and temporary cash investments			
3 Accounts receivable ►			
Less: allowance for doubtful accounts ▶			
4 Pledges receivable ▶			
Less: allowance for doubtful accounts			
5 Grants receivable			· · · · · · · · · · · · · · · · · · ·
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
Ι			
7 Other notes and loans receivable Less: allowance for doubtful accounts			
		····	
8 Inventories for sale or use 9 Prepaid expenses and deferred charges 4 to Prepaid expenses and deferred charges		··	- -
9 Prepaid expenses and deferred charges			· · · · · · · · · · · · · · · · · · ·
Tya mivesuments - 0.5. and state government obligations		40.050	10 005
b Investments - corporate stock STMT 3	0.	40,860.	40,307.
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 ▶			
Less accumulated depreciation			
15 Other assets (describe ►)			
			N
16 Total assets (to be completed by all filers)	0.	45,271.	44,718.
17 Accounts payable and accrued expenses		13,2,11	11,710.
18 Grants payable	-		
<u>u</u> i			
20 Loans from officers, directors, trustees, and other disqualified persons			
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.			
24 Unrestricted			
25 Temporarily restricted		<u></u>	
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	0.	0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
24 Unrestricted 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	0.	45,271.	
30 Total net assets or fund balances	0.	45,271.	
2 00 10141 101 200010 01 1411 2410 1000			
31 Total liabilities and net assets/fund balances	0.	45,271.	
Part III Analysis of Changes in Net Assets or Fund Ba			
			
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 3	00		_
(must agree with end-of-year figure reported on prior year's return)		1	0.
2 Enter amount from Part I, line 27a		2	45,271.
Other increases not included in line 2 (itemize)		3	<u> </u>
4 Add lines 1, 2, and 3		4	45,271.
5 Decreases not included in line 2 (itemize)	<u> </u>	5	0.
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	umn (b), line 30	6	45,271.

023511 12-07-10

		nd(s) of property sold (e.g or common stock, 200 sh			(b)	How acqu - Purcha) - Donatio	ired se on	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
a					_				
<u> NC</u>	NE				1				
<u> </u>									
					-				
<u> </u>			T			I			
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		expense of sale				(h) Gain or (loss) (e) plus (f) minus (
<u> </u>	 		 					· · · · · · · · · · · · · · · · · · ·	
-	-								_
	<u> </u>								_
	 		 						
Complete only for assets shown	00 0010 10	column (h) and owned by	the foundation	n on 12/31/69) Cours (Cal (b) sous	
Complete only for assets snown			-T) Gains (Col. (h) gain . (k), but not less thar	
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		xcess of col. (I) r col. (J), If any				Losses (from col. (I	1))
<u> </u>									
	<u> </u>								
	<u> </u>		ļ						
	ļ		ļ						
	<u></u>		<u> </u>						
Capital gain net income or (net capital	apıtal loss	If gain, also ente	er in Part I, line)- in Part I, line	e 7 e 7	}	2			
		`		• •					
Net short-term capital gain or (lo If gain, also enter in Part I, line 8,			110 (6).)				
If (loss), enter -0- in Part I, line 8		o <i>).</i>			Ţ,	3			
art V Qualification L	Jnder S	Section 4940(e) for	r Reduce	d Tax on Net	Inv	estme	nt Inc	ome	_
s the foundation liable for the sec <u>(es," the foundation does not qua</u> Enter the appropriate amount in	lify under	section 4940(e). Do not c	omplete this p	art.					Yes
(a)	Cacil Cold		dollons bolor	o making any one					(d) ution ratio
Base period years Calendar year (or tax year beginn	ıng ın)	(b) Adjusted qualifying dis	stributions	Net value of no	(c) oncha	rıtable-us	e assets	Distrib (col. (b) div	ùtión ratio ded by col. (c))
2009				ļ. <u> </u>					
2008								ļ	
2006		-		 				 	
2005									
Total of line 1, column (d)	_							2	
Average distribution ratio for the	-		on line 2 by 5	, or by the number	r of ye	ars			
the foundation has been in existe	ence if less	inan 5 years						3	
.		(0040 (D+ V	1 5						
Enter the net value of noncharital	DIE-USE AS	sets for 2010 from Part X,	line 5					4	
Multiply line 4 by line 3								5	
Enter 1% of net investment incor	me (1% of	Part I, line 27b)						6	_
	,	,						7	
Add lines 5 and 6									
Enter qualifying distributions from								8	
If line 8 is equal to or greater that	n line 7, cl	neck the box in Part VI, line	e 1b, and com	plete that part usir	ng a 1	% tax rate	€.		
See the Part VI instructions.									rm 000-DE /2

JOANNE AND AL DALOISIO FAMILY FOUNDATION

	1.990-PF (2010) C/O ALFONSO DALOISIO, JR. 27-373 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	6371	ıctio	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	1113010	ictio	113)
Id	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			3.
Ü	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).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
				3.
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-			3.
6	Credits/Payments:			
a	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a			
	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			<u>3.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities			,
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for 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			
	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:	j i		
	(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$ O .			
е	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.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	46	ļ	177
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or Positive to the affect with the state law.			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	6		x
7	remain in the governing instrument?	7	X	A_
′	Did the foundation have at least \$5,000 in assets at any time during the year?	'-	- 23	
0.	If "Yes," complete Part II, col. (c), and Part XV. Enter the states to which the foundation reports or with which it is registered (see instructions) NONE			
oa	Little the states to which the foundation reports of with which it is registered (see instructions)	·]
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
U	of each state as required by General Instruction G? If "No," attach explanation	8b	х	
۵	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>	
3	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		x
40	Did any persons become substantial contributors during the tay year?	10		v

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during the year?

Yes X No

N/A

3b

4a

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X

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2010.)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

'JOANNE AND AL DALOISIO FAMILY FOUNDATION C/O ALFONSO DALOISIO, Form 990-PF (2010) 27-3736371 JR Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained Yes No expenditure responsibility for the grant? N/A If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred (c) Compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances compensation SEE STATEMENT 4 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (e) Expense account, other (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances compensation NONE

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

6

023561

All other program-related investments. See instructions.

Total. Add lines 1 through 3

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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:		
а	Average monthly fair market value of securities	1a	40,307.
b	Average of monthly cash balances	1b	40,307.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	44,719.
	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
_	1c (attach detailed explanation) 1e 0.	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	44,719.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	671.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	44,048.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	434.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	434.
2a	Tax on investment income for 2010 from Part VI, line 5		
Ь	Income tax for 2010. (This does not include the tax from Part VI.)	1 [
C	Add lines 2a and 2b	2c	3.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	431.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	431.
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	431.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		_
а		1a	0.
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	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	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.	qualifies fo	r the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				424
line 7				431.
2 Undistributed income, if any, as of the end of 2010			0	
a Enter amount for 2009 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2010:		<u> </u>		
1 1				
a From 2005				
b From 2006 c From 2007				
d From 2008				
e From 2009				
	0.			
f Total of lines 3a through e				
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 0.			0.	
a Applied to 2009, 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.			
d Applied to 2010 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				431.
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 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008			ļ	
d Excess from 2009			j	
e Excess from 2010				
6 FVCG22 HOHI SO IO				Form QQ0-DF (2010)

JOANNE AND AL DALOISIO FAMILY FOUNDATION

	<u>ONSO DALOIS</u>				736371 Page 10
Part XIV Private Operating Fo				N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	•		▶ ∟	 	
b Check box to indicate whether the found		g foundation described			942())(5)
2 a Enter the lesser of the adjusted net	Tax year	41,0000	Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
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			ļ.—		ļ
e Qualifying distributions made directly					
for active conduct of exempt activities.					j
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)	2000				
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:		<u> </u>			
(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					
Part XV Supplementary Info	mation (Comple	te this part only	if the founda	tion had \$5,000 or m	ore in assets
at any time during the			n the rounda	11011 1124 40,000 01 111	ore in assets
1 Information Regarding Foundation		· · · · · · · · · · · · · · · · · · ·	-		1
a List any managers of the foundation who		than 2% of the total cor	tributions received I	by the foundation before the clo	ose of any tax
year (but only if they have contributed m				oy wild four during the bold of the dis	oo or any lan
ALFONSO DALOISIO, JR	•				
b List any managers of the foundation who		e stock of a corporation	(or an equally large	portion of the ownership of a p	partnership or
other entity) of which the foundation has					
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
				does not accept unsolicited req	
the foundation makes gifts, grants, etc. (see instructions) to indiv	iduals or organizations	under other condition	ons, complete items 2a, b, c, an	d d
a The name, address, and telephone numb		n applications should b	e addressed:		
JOANNE DALOISIO, (97	3) 684-0362				
378 LAWRENCE CT, WYC					
b The form in which applications should be	e submitted and informat	ion and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographica	l areas, charitable fields	, kınds of institution	s, or other factors:	
					5 000 DE (0040)

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Part XV Supplementary Informa	tion (continued)			
3 Grants and Contributions Paid During t	he Year or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
NONE				
NONE				
	1			
	Ì			
		!		
	į			
Total		l	<u>▶</u> 3a	(
b Approved for future payment				
v pproved for factore payment				
NONE				
Total 3811 12-07-10			<u>▶ 3b</u>	m 990-PF (201

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

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
			1 3030		
			_		
c					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					1.01
Investments			-		161.
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:	-		 		
 a Debt-financed property b Not debt-financed property 		·-· · · · · · · · · · · · · · · · · · ·	 -		
b Not debt-financed property6 Net rental income or (loss) from personal					
property					
7 Other investment income		<u> </u>			
8 Gain or (loss) from sales of assets other	 				
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory		-			
11 Other revenue:					
a					
b	ľ				
C		~-			· · · · · · · · · · · · · · · · · · ·
d	1				
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	161.
13 Total Add line 12, columns (b), (d), and (e)					161.
(See worksheet in line 13 instructions to verify calculations	s.)				
Part XVI-B Relationship of Activitie	es to the Acc	omplishment of Ex	emp	t Purposes	
					anliah mant of
Explain below how each activity for which the foundation's exempt purposes (other to			COILLIE	nated importantly to the accord	npusument of
1 TO ASSIST OTHER CHAR			IN	ACCOMPLISHING	THEIR
2 CHARITABLE MISSION					
					<u></u>
	 -				
				· · · · · · · · · · · · · · · · · · ·	
				· 	
	 	<u> </u>			
					
		 			
			 -		
					
023821					Form 990-PF (2010)
12-07-10					. 5 (2010)

				IO FAMILY 1	CINUO	ATION				
	PF (2010) C/O A	LFONSO DAI	<u>LOISIO</u>	<u>, JR</u>			27-3	<u>736371</u>	Pa	ige 13
Part X	VII Information Re Exempt Organ		sfers To a	nd Transaction	s and F	Relations	ships With Nonc	haritable) 	
1 Did ti	he organization directly or indi	rectly engage in any o	f the following	g with any other organiz	ation desc	cribed in sec	tion 501(c) of		Yes	No
the C	ode (other than section 501(c))(3) organizations) or	ın section 52	7, relating to political or	ganization	s?				
a Trans	sfers from the reporting found	ation to a noncharitab	le exempt org	janization of:						
(1)	Cash							1a(1)		X
	Other assets							1a(2)		X
b Other	r transactions:									
(1)	Sales of assets to a noncharital	ble exempt organization	on					1b(1)		X
(2)	Purchases of assets from a no	ncharitable exempt or	ganization					1b(2)		X
	Rental of facilities, equipment,							16(3)		X
	Reimbursement arrangements							1b(4)		X
	Loans or loan guarantees							1b(5)		X
	Performance of services or me	mbership or fundrais:	ing solicitation	ns				1b(6)		X
c Shar	ing of facilities, equipment, ma	aling lists, other assets	s, or paid emp	oloyees				1c		X
	answer to any of the above is				1 always sl	how the fair	market value of the goo	ds, other ass	ets,	
	rvices given by the reporting form			ed less than fair market	value in an	y transactio	n or sharing arrangeme	ent, show in		
a) Line no	(b) Amount involved			exempt organization		(d) Description	on of transfers, transactions	and sharing arr	angeme	ents
	(2)		N/A				·			
		-						•		
				(2						
										
							•			
										
_										
		-								
	 		·							
					_					

ın se	e foundation directly or indirec ction 501(c) of the Code (othe es," complete the following sch	r than section 501(c)(anizations	described		Yes	X	□ No
	(a) Name of org	janization		(b) Type of organizati	on		(c) Description of rela	tionship		
	N/A				$-\!$					
										
	·····								-	
				1						
	Under penalties of perjury, I declar and complete Declaration of prepare	e that I have examined thi arer (other than taxpaver c	is return, includi or fiduciary) is ba	ing accompanying schedule ased on all information of wi	s and staten tich prepare	nents, and to t r has any knov	ine best of my knowledge a vledge	no pellel, it is tru	ie, corre	ici,
Sign	11.						T \.			
Here	- May Dak	UDIO,		6-6	<u> </u>	- 🕨 -	inastee_			
	Signature of officer or tri		. ·	Date			Title	TIM		
	Print//ype preparer's na	ame	Preparer's s		Date,		Check if P self- employed	TIN		
Paid	4 TALL	~ YOWA	ko K. E	ST. DIM	_ /³	rb (11	[
Prepa Use O		DOWORTH &		HN, LLC	•	•	Firm's EIN ►	-		
230 0	•••••••••••••••••••••••••••••••••••••••									

023622 04-26-11

856-235-0600

Form **990-PF** (2010)

Phone no.

704 C EAST MAIN STREET

MOORESTOWN, NJ 08057

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

2010

Name of the organization

JOANNE AND AL DALOISIO FAMILY FOUNDATION

C/O ALFONSO DALOISIO, JR.

Employer identification number

27-3736371

Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (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** 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 Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

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

Page 1 of 1 of Part I

Name of organization

JOANNE AND AL DALOISIO FAMILY FOUNDATION C/O ALFONSO DALOISIO, JR.

27-3736371

Employer identification number

Part I Contributors	(see instructions)
---------------------	--------------------

(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ALFONSO DALOISIO, JR. 378 LAWRENCE CT. WYCKOFF, NJ 07481	\$\$0,860.	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
2	ALFONSO DALOISIO, JR. 378 LAWRENCE CT. WYCKOFF, NJ 07481	\$5,000.	Person X Payroll
(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) 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) <u>No.</u>	(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)

Name of organization

Employer identification number

JOANNE AND AL DALOISIO FAMILY FOUNDATION C/O ALFONSO DALOISIO, JR.

27-3736371

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
	SECRURITIES	_	-
_1			
		\$ 40,860.	12/02/10
(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
aiti			

Name of organization

Employer identification number

JOANNE AND AL DALOISIO FAMILY FOUNDATION

C/O ALFONSO DALOISIO, JR.

27-3736371

Part III	more than \$1,000 for the year. Complete Part III, enter the total of exclusively religion	e columns (a) through (e) and tl ous, chantable, etc , contributio	tion 501(c)(7), (8), or (10) organizations aggregating he following line entry For organizations completing has of					
(a) No. from Part I	\$1,000 or less for the year (Enter this inf							
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
								
		(e) Transfer of g	aift					
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
ĺ								
		<u> </u>						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I	(c), a specie of give	(0,000.00	(w) a see a passe of the see a gardeness					
		(e) Transfer of g	pift					
	Transferee's name, address, a	nd 7IP + 4	Relationship of transferor to transferee					
	Transfered a traine, usaress, a		Trotationing of Daniel of to datasered					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Tart								
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
L								
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY	CASH II	NVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
MERRILL LYNCH					1	61.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMIN A			1	61.
FORM 990-PF	OTHER E	XPENSE	S		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTEI NET INCOM		
ORGANIZATIONAL FEES	750.	·	0.		0.	0.
TO FORM 990-PF, PG 1, LN 23	750.		0.		0.	
FORM 990-PF	CORPORAT	E STOC	K		STATEMENT	3
DESCRIPTION			во	OK VALUE	FAIR MARKE VALUE	T
INVESTMENTS				40,860.	40,3	07.
TOTAL TO FORM 990-PF, PART II, LINE 10B				40,860.	40,3	07.

FORM 990-PF	PART VIII - LIST	STATEMENT 4			
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ALFONSO DALOISIO, 378 LAWRENCE CT WYCKOFF, NJ 07481	JR.	PRESIDENT 5.00	0.	0.	0.
JOANNE DALOISIO 378 LAWRENCE CT WYCKOFF, NJ 07481		VICE PRESIDENT 5.00	0.	0.	0.
MARY DALOISIO 437 GREENWOOD AVE WYCKOFF, NJ 07481		SECRETARY 5.00	0.	0.	0.
MATTHEW DALOISIO 378 LAWRENCE CT WYCKOFF, NJ 07481		TREASURER 5.00	0.	0.	0.
KATHRYN DALOISIO 378 LAWRENCE CT WYCKOFF, NJ 07481		TRUSTEE 5.00	0.	0.	0.
TOTALS INCLUDED OF	N 990-PF, PAGE 6,	– , PART VIII =	0.	0.	0.

Form **8868**

(Rev January 2011)

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 a	re filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			► LX
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of this	form).		
Do not co	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previously fi	led Fo	rm 8868	
Electroni	c filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of time t	o file (i	6 months for a	corporation
equired t	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 8	868 to request	an extension
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for Trans	sfers	Associated Witl	n Certain
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details on ti	he elec	ctronic filing of t	this form,
	irs gov/efile and click on e-file for Chanties & Nonprofits.		,		· ·	
Part I	Automatic 3-Month Extension of Time		bmit original (no copies needed).			
	tion required to file Form 990-T and requesting an autor			plete		
art I only				•		
All other o	corporations (including 1120-C filers), partnerships, REM ome tax returns.	IICs, and t	rusts must use Form 7004 to request ar	exter	ision of time	
Type or	Name of exempt organization			Emp	loyer identifica	tion number
orint	JOANNE AND AL DALOISIO FAM.	LLY F	OUNDATION		,	
	C/O ALFONSO DALOISIO, JR.			2	7-373637	71
file by the	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions		, 0,000	
due date for iling your	75-77 GROVE STREET	ee mande	10113			
eturn See nstructions	City, town or post office, state, and ZIP code. For a fo	reign add	Iress see instructions			
	PATERSON, NJ 07503	Jieigii aud	noss, acc mandenons			
	PATERSON, NO 07303				 -	
Entar tha	Return code for the return that this application is for (file		to application for each return)			0 4
inter the	Return code for the return that this application is for this	a separa	te application for each return)			U =
		D-4	Amuliantian		· ,	Deturn
Applicati	on	Return	Application			Return
s For		Code	Is For			Code
orm 990		01	Form 990-T (corporation)			07
orm 990		02_	Form 1041-A			08
Form 990		03	Form 4720			09
Form 990		04	Form 5227			10
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 99 <u>0</u>	-T (trust other than above)	06	Form 8870			12
	THE FOUNDATION					
	poks are in the care of \triangleright $75-77$ GROVE STI	REET				
Teleph	one No ► <u>(973) 684-0362</u>		FAX No 🕨			
	organization does not have an office or place of busines					▶ ∐
If this	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If th	ıs ıs fo	r the whole gro	up, check this
oox 🕨	If it is for part of the group, check this box	and atta	ach a list with the names and EINs of all	memb	ers the extensi	on is for.
1 re-	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time unt	:il		
	AUGUST 15, 2011 , to file the exemp	t organiza	tion return for the organization named a	bove	The extension	
IS fo	or the organization's return for.					
▶[calendar year or					
▶[X tax year beginning OCT 21, 2010	, an	d ending <u>DEC 31, 2010</u>		_	
2 If th	ne tax year entered in line 1 is for less than 12 months, o	heck reas	on X Initial return Fina	al retur	'n	
	Change in accounting period					
3a If th	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	inter the tentative tax, less any			
	refundable credits. See instructions		•	3a	s	0.
	nis application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			`
	mated tax payments made Include any prior year overp	•		3b	\$	0.
_	ance due. Subtract line 3b from line 3a Include your pa			35	*	
	using EFTPS (Electronic Federal Tax Payment System)	•	• •	3c	s	0.
	If you are going to make an electronic fund withdrawal v					
			Onn 3000, 300 i Oini 0403 EO and FOIII	0019-		
F	or Paperwork Reduction Act Notice, see Instructions	s.			rorm 886	8 (Rev 1-2011)

023841 01-03-11