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· 990-PF

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

2010

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

|                           |           |   | and ending                | _          | ſ  | <b>T</b>                             |                         |  |  |
|---------------------------|-----------|---|---------------------------|------------|--|--------------------------------------|-------------------------|--|--|
| <b>G</b> Ch               | heck at   |   | turn of a former public o |            |  | Final return                         |                         |  |  |
|                           |           |   | ress change               | Name       | e change  A Employer identification number |                                      |                         |  |  |
|                           |           | AND LUCIANA DICLEMENTE  |                           |            |  | loyer identification num<br>-3440485 | ber                     |  |  |
|                           |           | AND LOCIANA DICLEMENTE  |                           |            |  | hone number (see page 10             | of the instructions)    |  |  |
|                           |           | d street (or P O box number if mail is not delivered to street address                                      | e) Ro                     | om/suite   | B Telep                                    | none number (see page 10             | of the instructions)    |  |  |
|                           |           | IRON GATE   | ,   "                     | omisanc    | C If exe                                   | mption application is pendi          | ng check here           |  |  |
|                           |           | i, state, and ZIP code  |                           |            | 1  | reign organizations, check           | . —                     |  |  |
| •                         |           | FIELD HILLS MI 48304-3  | 737                       |            | 1  | reign organizations meetin           |                         |  |  |
|                           |           | pe of organization X Section 501(c)(3) exempt private   |                           |            | 1  | % test, check here and att           |                         |  |  |
|                           | -         |   | le private foundation     |            | E Ifpnv                                    | ate foundation status was            | terminated under        |  |  |
| I Fa                      | ır mark   | tet value of all assets at J Accounting method  | Cash X Acc                | rual       | section                                    | on 507(b)(1)(A), check here          | <b>▶</b>                |  |  |
| en                        | d of ye   | ar (from Part II, col (c), Other (specify)  |                           |            | F if the                                   | foundation is in a 60-mont           | h termination           |  |  |
| line                      | e 16) 🕨   | \$ 863,928 (Part I, column (d) must I   | be on cash basis )        |            | under                                      | section 507(b)(1)(B), chec           | ck here                 |  |  |
| Pa                        | rt I      | Analysis of Revenue and Expenses (The total of  | (a) Revenue and           | 41.3.41.4  |  | 4.5 4.1                              | (d) Disbursements       |  |  |
|                           |           | amounts in columns (b), (c), and (d) may not necessarily equal  | expenses per<br>books     | (b) Net in | vestment<br>ome                            | (c) Adjusted net income              | for charitable purposes |  |  |
|                           |           | the amounts in column (a) (see page 11 of the instructions) )   |                           |            |  |                                      | (cash basis only)       |  |  |
|                           | 1         | Contributions, gifts, grants, etc , received (attach schedule)  | 7,000                     |            |  |                                      |                         |  |  |
|                           | 2         | Check ▶ ☐ If the foundation is <b>not</b> required to attach Sch B  | 2 613                     |            | 0 640                                      | 0 610                                |                         |  |  |
|                           | 3         | Interest on savings and temporary cash investments  | 2,643                     |            | 2,643                                      | 2,643                                |                         |  |  |
|                           | 4         | Dividends and interest from securities  | 23,111                    |            | 23,111                                     | 23,111                               |                         |  |  |
| ]                         | 5a        | Gross rents   |                           |            |  |                                      |                         |  |  |
| Revenue                   | b         | Net rental income or (loss)   | -4,013                    |            |  |                                      |                         |  |  |
| ē                         | 6a<br>b   | Net gain or (loss) from sale of assets not on line 10  Gross sales price for all assets on line 6a  124,563 | 4,013                     |            |  |                                      |                         |  |  |
| è                         | 7         | Capital gain net income (from Part IV, line 2)  |                           |            | 0  |                                      |                         |  |  |
| -                         | 8         | Net short-term capital gain   |                           |            |  | 10                                   |                         |  |  |
|                           | 9         | Income modifications  |                           |            |  |                                      |                         |  |  |
|                           | 10a       | Gross sales less returns & allowances   |                           |            |  |                                      |                         |  |  |
|                           | b         | Less Cost of goods sold   |                           |            |  |                                      |                         |  |  |
|                           | С         | Gross profit or (loss) (attach schedule)  |                           |            |  |                                      |                         |  |  |
|                           | 11        | Other income (attach schedule)  |                           |            |  |                                      |                         |  |  |
|                           | 12        | Total Add lines 1 through 11  | 28,741                    | ļ          | 25,754                                     | 25,764                               |                         |  |  |
| S                         | 13        | Compensation of officers, directors, trustees, etc  | 0                         |            |  |                                      |                         |  |  |
| ]<br>penses               | 14        | Other employee salaries and wages   |                           |            |  |                                      |                         |  |  |
| Jer                       | 15        | Pension plans, employee benefits  |                           |            |  |                                      | -                       |  |  |
| &@∭<br>e Exp              | 16a       | Legal fees (attach schedule)  Accounting fees (attach schedule)  STMT 1                                     | 900                       |            |  | ECEIVED -                            | 900                     |  |  |
| ق ∑                       | b         | ,   | 900                       |            | ၈  | 3                                    |                         |  |  |
| ම <b>ද්</b>               | C<br>  17 | Other professional fees (attach schedule) Interest  |                           |            |  | JL 0 5 2011   3                      | <u> </u>                |  |  |
| JUL ∑ ③ i<br>ministrative | 18        | Taxes (attach schedule) (see page 14 of the instructions) STMT 2  | 507                       |            | 100 J                                      | 2 9 3 16                             | 507                     |  |  |
| JUL<br>Iminis             | 19        | Depreciation (attach schedule) and depletion  |                           |            |  |                                      |                         |  |  |
| <u></u>                   | 20        | Occupancy   |                           |            |  | SDEN, UT                             | j                       |  |  |
| <u>-</u> }\₹              | 21        | Travel, conferences, and meetings   |                           |            |  |                                      |                         |  |  |
| and                       | 22        | Printing and publications   |                           |            |  |                                      |                         |  |  |
| S(C시시시키)<br>rating and Ad | 23        | Other expenses (att sch ) STMT 3  | 291                       |            |  |                                      | 291                     |  |  |
| Ĩ∰.                       | 24        | Total operating and administrative expenses.  |                           |            |  |                                      |                         |  |  |
| ঙ্গুংগ্ৰে<br>Operating    |           | Add lines 13 through 23   | 1,698                     |            | 0  | 0                                    |                         |  |  |
| å                         | 25        | Contributions, gifts, grants paid   | 36,390                    | 1          |  |                                      | 36,390                  |  |  |
|                           | 26        | Total expenses and disbursements. Add lines 24 and 25   | 38,088                    |            | 0  | 0                                    | 38,088                  |  |  |
|                           | 27        | Subtract line 26 from line 12   |                           |            |  |                                      |                         |  |  |
|                           | a         | Excess of revenue over expenses and disbursements   | -9,347                    | -          | 25,754                                     |                                      |                         |  |  |
|                           | l b       | Net investment income (if negative, enter -0-)  |                           | ļ          | 25,154                                     |                                      |                         |  |  |
|                           | С         | Adjusted net income (if negative, enter -0-)  |                           |            |  | 25,764                               | Form 990-PF (2010       |  |  |

| Fc               | orm 990  | P-PF (2010) GINO AND LUCIANA DICLEMENTE   | 38-344048         | 5                                     | Page 2                                |
|------------------|----------|---|-------------------|---------------------------------------|---------------------------------------|
| ٠                | Part I   | Balance Sheets Attached schedules and amounts in the description column   | Beginning of year | End of                                | f year                                |
|                  | 1        | should be for end-or-year amounts only (See instructions )  | (a) Book Value    | (b) Book Value                        | (c) Fair Market Value                 |
|                  | 1        | Cash—non-interest-bearing   | 0.107             |                                       |                                       |
|                  | 2        | Savings and temporary cash investments  | 9,127             | 7,234                                 | 7,234                                 |
|                  | 3        | Accounts receivable   |                   |                                       |                                       |
|                  |          | Less allowance for doubtful accounts ▶  |                   |                                       | <del></del>                           |
|                  | 4        | Pledges receivable  |                   |                                       |                                       |
|                  | _        | Less allowance for doubtful accounts ▶  | <del></del>       |                                       |                                       |
|                  | 5        | Grants receivable   |                   |                                       | <del></del> .                         |
|                  | 6        | Receivables due from officers, directors, trustees, and other   |                   |                                       |                                       |
|                  |          | disqualified persons (attach schedule) (see page 15 of the  |                   |                                       |                                       |
|                  | 7        | Instructions)   |                   |                                       |                                       |
|                  | 7        | Other notes and loans receivable (att. schedule)  |                   |                                       |                                       |
| 'n               |          | Less allowance for doubtful accounts ▶ 0  |                   |                                       | <del>_</del>                          |
| 8                | 8        | Inventories for sale or use   |                   |                                       |                                       |
| Assets           | 9        | Prepaid expenses and deferred charges   |                   |                                       |                                       |
| 4                | 10a      | Investments—U.S and state government obligations (attach schedule)  | 71.6.062          | 056,000                               | 056.00                                |
|                  | b        | Investments—corporate stock (attach schedule)  SEE STMT 4   | 716,863           | 856,009                               | 856,009                               |
|                  | C        | Investments—corporate bonds (attach schedule)   |                   | <del></del>                           |                                       |
|                  | 11       | Investments—land, buildings, and equipment basis  |                   |                                       |                                       |
|                  | 40       | Less accumulated depreciation (attach sch ) ▶   |                   |                                       |                                       |
|                  | 12       | Investments—mortgage loans  |                   |                                       | <del>-</del> ·                        |
|                  | 13       | Investments—other (attach schedule)   |                   |                                       | <del></del>                           |
|                  | 14       | Land, buildings, and equipment basis  |                   |                                       |                                       |
|                  | 45       | Less accumulated depreciation (attach sch )   Other assets (describe   SEE STATEMENT 5  |                   | COF                                   | 605                                   |
|                  | 15       | ,   |                   | 685                                   | 685                                   |
|                  | 16       | Total assets (to be completed by all filers—see the   | 725 000           | 063 000                               | 0.63 000                              |
| _                | 47       | Instructions Also, see page 1, item I)  | 725,990           | 863,928                               | 863,928                               |
|                  | 17       | Accounts payable and accrued expenses   |                   |                                       |                                       |
| es               | 18       | Grants payable  |                   |                                       |                                       |
| iabilitie        | 19       | Deferred revenue  |                   |                                       |                                       |
| ᅙ                | 20       | Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable (attach schedule) |                   |                                       |                                       |
| Ĕ                | 21<br>22 | , , ,   |                   |                                       |                                       |
|                  | 23       | Other liabilities (describe )   | 0                 | 0                                     |                                       |
| _                | 23       | Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here                                     | - 0               |                                       |                                       |
| S                |          | Foundations that follow SFAS 117, check here X and complete lines 24 through 26 and lines 30 and 31.                          |                   |                                       |                                       |
| or Fund Balances | 24       | Unrestricted  | 725,990           | 863,928                               |                                       |
| 딞                | 25       | Temporarily restricted  | 123,330           | - 803,928                             |                                       |
| ğ                | 26       | Permanently restricted  |                   | <del></del>                           |                                       |
| 5                | 20       | Foundations that do not follow SFAS 117, check here   |                   |                                       |                                       |
| S                |          | and complete lines 27 through 31.   |                   |                                       |                                       |
| Ļ                | 27       | Capital stock, trust principal, or current funds  |                   |                                       |                                       |
|                  | 28       | Paid-in or capital surplus, or land, bldg, and equipment fund   |                   |                                       |                                       |
| Assets           | 29       | Retained earnings, accumulated income, endowment, or other funds  |                   | · · · · · · · · · · · · · · · · · · · |                                       |
| 881              | 30       | Total net assets or fund balances (see page 17 of the   |                   |                                       |                                       |
| ĭ                |          | instructions)   | 725,990           | 863,928                               |                                       |
| Š                | 31       | Total liabilities and net assets/fund balances (see page 17   | .23,550           | 555,526                               |                                       |
|                  |          | of the instructions)  | 725,990           | 863,928                               |                                       |
| _                | Part I   |   |                   |                                       | · · · · · · · · · · · · · · · · · · · |
|                  |          | net assets or fund balances at beginning of year—Part II, column (a), line 30 (must   | agree with        |                                       |                                       |
|                  |          | of-year figure reported on prior year's return)   | -5.00 11111       | 1                                     | 725,990                               |
| 2                |          | r amount from Part I, line 27a  |                   | 2                                     | -9,347                                |
|                  |          | r increases not included in line 2 (itemize) SEE STATEMENT 6  |                   | 3                                     | 147,285                               |

3

4

5

6

147,285

863,928

863,928

4 Add lines 1, 2, and 3

3 Other increases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

5 Decreases not included in line 2 (itemize) ▶

| Form 990-PF ( | (2010) | GINO | AND | LUCIANA | DICLEMENT |
|---------------|--------|------|-----|---------|-----------|
|               |        |      |     |         |           |

38-3440485

Page 3

| <u> </u>   | 'art IV Capital Gains a  | <u>nd Losses for Tax on Investme</u>                    | <u>nt Incc</u>   | me                                     |                                 |                               |                                  |   |
|--|--|---|------------------|--|---------------------------------|-------------------------------|----------------------------------|---|
| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.) |  |   |                  | (b) How acquired P—Purchase D—Donation |                                 | ate acquired<br>o , day, yr ) | (d) Date sold<br>(mo , day, yr ) |   |
| 1a   | SEE WORKSHEET  |   |                  |  |                                 |                               |                                  |   |
| b  | · · · · · · · · · · · · · · · · · · ·                                      |   |                  | <del></del>                            |                                 |                               |                                  |   |
| <u> </u>   | <del></del>  |   |                  |  |                                 |                               |                                  |   |
| _ <u>d</u>   | <del></del>  |   |                  |  |                                 |                               |                                  |   |
| 9  | · · · · · · · · · · · · · · · · · · ·                                      |   |                  |  | L                               |                               |                                  |   |
|  | (e) Gross sales price  | (f) Depreciation allowed (or allowable)                 |                  |  | other basis<br>nse of sale      |                               |                                  | or (loss)<br>minus (g)                                    |
| <u>a</u>   |  |   |                  |  | · · ·                           |                               |                                  |   |
| _ <u>b</u>   | · · ·  |   |                  |  |                                 |                               |                                  |   |
| <u>c</u><br>d  |  |   |                  |  |                                 |                               |                                  | <del></del> -   |
| e  |  |   |                  |  |                                 |                               |                                  | <u> </u>  |
| -  |  | gain in column (h) and owned by the four                | L.<br>ndation oi | 12/31/69                               |                                 |                               |                                  |   |
|  | (i) F M ∨ as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69                    |                  | (k) Exces                              | s of col (ı)<br>(j), ıf any     |                               | col (k), but not                 | (h) gain minus<br>less than -0-) <b>or</b><br>om col (h)) |
| a  |  |   |                  | <del></del>                            |                                 |                               | * '                              |   |
| b  |  |   |                  |  |                                 |                               |                                  |   |
| С  |  |   |                  |  |                                 |                               |                                  |   |
| d  |  |   |                  |  |                                 |                               |                                  |   |
| е  |  |   |                  |  |                                 |                               |                                  |   |
| 2 Capital gain net income or (net capital loss)  If gain, also enter in Part I, line 7  If (loss), enter -0- in Part I, line 7     |  |   |                  |  |                                 | 2                             |                                  | -4,013  |
| 3  | Net short-term capital gain or (los  | s) as defined in sections 1222(5) and (6)               |                  |  |                                 |                               |                                  |   |
|  | If gain, also enter in Part I, line 8,                                     | column (c) (see pages 13 and 17 of the in               | struction        | s)                                     |                                 |                               |                                  |   |
|  | If (loss), enter -0- in Part I, line 8                                     |   |                  |  |                                 | 3                             |                                  | 10  |
| _  |  | nder Section 4940(e) for Reduc                          |                  |  |                                 | <u>ne</u>                     |                                  | <del></del>   |
|  | r optional use by domestic private<br>ection 4940(d)(2) applies, leave thi | foundations subject to the section 4940(a) s part blank | tax on n         | et investme                            | nt income )                     |                               |                                  |   |
|  |  | on 4942 tax on the distributable amount of              | f any yea        | r in the beer                          | nonod?                          |                               |                                  | Yes X No  |
|  |  | fy under section 4940(e). Do not complete               |                  |  | е репост                        |                               |                                  | Yes X No  |
| _  |  | each column for each year, see page 18 of               |                  |  | re making any entries           |                               |                                  |   |
| <u> </u>   | (a)  |   | the msur         | uctions belo                           |                                 | <u> </u>                      |                                  | (d)   |
|  | Base period years Calendar year (or tax year beginning                     | (b) Adjusted qualifying distribution                    | s                | Net value                              | (c)<br>of noncharitable-use ass | ets                           |                                  | ibution ratio<br>ivided by col (c))                       |
| _  | 2009   |   | ,703             |  | 586,                            | 710                           | (001 (0) 0                       | 0.052331  |
|  | 2008   |   | ,160             |  | 704,                            |                               |                                  | 0.049911  |
|  | 2007   |   | ,670             |  | 908,                            |                               | *                                | 0.060147  |
|  | 2006   | 45  | ,025             |  | 842,                            |                               |                                  | 0.053426  |
|  | 2005   |   | ,852             |  | 797,                            | 226                           |                                  | 0.046225  |
|  |  |   |                  |  |                                 |                               |                                  |   |
| 2  | Total of line 1, column (d)  |   |                  |  |                                 |                               | 2                                | 0.262040  |
| 3  | Average distribution ratio for the 5                                       | 5-year base period—divide the total on line             | 2 by 5, c        | or by the                              |                                 |                               |                                  |   |
|  | number of years the foundation ha  | as been in existence if less than 5 years               |                  |  |                                 |                               | 3                                | 0.052408  |
| 4  | Enter the net value of noncharitab   | ole-use assets for 2010 from Part X, line 5             |                  |  |                                 |                               | 4                                | 757,657   |
| 5  | Multiply line 4 by line 3  |   |                  |  |                                 |                               | 5                                | 39,707  |
| 6  | Enter 1% of net investment incom   | ne (1% of Part I, line 27b)                             |                  |  |                                 |                               | 6                                | 258   |
| 7  | Add lines 5 and 6  |   |                  |  |                                 |                               | 7                                | 39,965  |
| 8  | Enter qualifying distributions from  | Part XII, line 4  |                  |  |                                 |                               | 8                                | 38,088  |
|  | · · ·  | I line 7, check the box in Part VI, line 1b, a          | nd compl         | ete that par                           | t using a 1% tax rate           | See the                       |                                  | <b>,</b> - <del></del> -                                  |

| Form | 990-PF (2010) GINO AND LUCIANA DICLEMENTE 38-3440485   |  |    | Р    | age 4    |
|------|--|--|----|------|----------|
| ` Pa | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instr                 | uctions)                                     |    |      |          |
| 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   | ı_   |    | _ !  | 515      |
|      | here ▶ and enter 1% of Part I, line 27b  |  |    |      |          |
| С    | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of                                     |  |    |      |          |
|      | Part I, line 12, col (b)   |  |    |      |          |
| 2    | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)                         | 2  |    |      | 0        |
| 3    | Add lines 1 and 2  | 3  |    |      | 515      |
| 4    | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                      | 1  |    |      | 0        |
| 5    | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-   | 5  |    |      | 515      |
| 6    | Credits/Payments   |  |    |      |          |
| а    | 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a  |  |    |      |          |
| b    | Exempt foreign organizations—tax withheld at source  |  |    |      |          |
| С    | Tax paid with application for extension of time to file (Form 8868)  |  |    |      |          |
| d    | Backup withholding erroneously withheld 6d   |  |    |      |          |
| 7    | Total credits and payments Add lines 6a through 6d   | <u>,                                    </u> |    |      |          |
| 8    | Enter any <b>penalty</b> for underpayment of estimated tax. Check here   | 3  |    |      | 2        |
| 9    |  | •  |    |      | 517      |
| 10   | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  | 0  |    |      |          |
| 11   | Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refunded ▶ 1  | 1  |    |      |          |
| 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                 |  |    | Yes  | No       |
|      | participate or intervene in any political campaign?  |  | 1a |      | X        |
| b    | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19                 |  |    |      |          |
|      | of the instructions for definition)?   |  | 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                                |  |    |      |          |
|      | (1) On the foundation > \$ (2) On foundation managers > \$   |  |    |      |          |
| ө    | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed                    |  |    |      |          |
|      | on foundation managers > \$  |  |    |      |          |
| 2    | Has the foundation engaged in any activities that have not previously been reported to the IRS?                                  |  | 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_      |
| 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?                                   |  | 5  |      | <u> </u> |
|      | 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  |  | l  |      |          |
|      | By state legislation that effectively amends the governing instrument so that no mandatory directions that                       |  |    |      |          |
|      | conflict with the state law remain in the governing instrument?  |  | 6  | X    |          |
| 7    | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, coi (c), and Part XV |  | 7  | X    |          |
| 8a   | Enter the states to which the foundation reports or with which it is registered (see page 19 of the                              |  |    |      |          |
|      | instructions) ▶ MI   |  |    |      |          |
| b    | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General                     |  |    |      |          |
|      | (or designate) of each state as required by General Instruction G? If "No," attach explanation                                   |  | 8b | X    |          |
| 9    | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or                  |  |    |      |          |
|      | 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page                   |  |    | ļ    |          |
|      | 27)? If "Yes," complete Part XIV   |  | 9  |      | X        |
| 10   | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their                   |  |    |      |          |
|      | names and addresses  |  | 10 |      | _X_      |
|      | 6/24 TNT 2 FTP 5 TOT   | 524 F  | qq | n.PF | (2010)   |

|           | 990-PF (2010) GINO AND LUCIANA DICLEMENTE 38-34404   | 85          |       |       | P    | age <b>5</b> |
|-----------|--|-------------|-------|-------|------|--------------|
| Pa        | rt VII-A Statements Regarding Activities (continued)   |             |       |       |      |              |
| 11        | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the  |             |       |       |      |              |
|           | meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)   |             |       | 11    |      | X            |
| 12        | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before   |             |       |       |      |              |
|           | August 17, 2008?   |             |       | 12    |      | X            |
| 13        | Did the foundation comply with the public inspection requirements for its annual returns and exemption applicati   | on?         |       | 13    | Х    |              |
|           | Website address ► N/A  |             |       |       |      |              |
| 14        | The books are in care of ► GINO DICLEMENTE Tel   | ephone no 🕨 | 248-5 | 69-   | 143  | 0            |
|           | 28105 GREENFIELD   |             |       |       |      |              |
|           | Located at ► SOUTHFIELD MI   | ZIP+4 ▶     | 48076 | ;     |      |              |
| 15        | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here  |             |       |       |      | ▶ [          |
|           | and enter the amount of tax-exempt interest received or accrued during the year  | ▶ _         | 15    | _     |      |              |
| 16        | At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority  |             |       |       | Yes  | No           |
|           | over a bank, securities, or other financial account in a foreign country?  |             |       | 16    |      | X            |
|           | See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter   |             |       |       |      |              |
|           | the name of the foreign country ▶  |             |       |       |      |              |
| <u>Pa</u> | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required   |             |       |       |      |              |
|           | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  |             |       |       | Yes  | No           |
| 1a        | During the year did the foundation (either directly or indirectly)   |             |       |       |      |              |
|           | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?   | Yes         | X No  |       |      |              |
|           | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a  |             | _     |       |      |              |
|           | disqualified person?   | Yes         | X No  |       |      |              |
|           | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   | Yes         |       |       |      |              |
|           | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   | Yes         | X No  |       |      |              |
|           | (5) Transfer any income or assets to a disqualified person (or make any of either available for  |             |       |       |      |              |
|           | the benefit or use of a disqualified person)?  | Yes         | 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  |             | ===   |       |      |              |
|           | termination of government service, if terminating within 90 days )   | Yes         | X No  |       |      |              |
| b         | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation  | ns          | 1-    |       |      |              |
|           | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?   |             | N/A   | 1b    |      |              |
|           | Organizations relying on a current notice regarding disaster assistance check here   |             | ▶ [_  |       |      |              |
| С         | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that   |             | /-    |       |      |              |
|           | were not corrected before the first day of the tax year beginning in 2010?   |             | N/A   | 1c    |      |              |
| 2         | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private  |             |       |       |      |              |
|           | operating foundation defined in section 4942(j)(3) or 4942(j)(5))  |             |       |       |      |              |
| а         | At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and  |             | ₹     |       |      |              |
|           | 6e, Part XIII) for tax year(s) beginning before 2010?  | Yes         | X No  |       |      |              |
|           | If "Yes," list the years ▶ 20 , 20 , 20 , 20   |             |       |       |      |              |
| b         | Are there any years listed in 2a for which the foundation is <b>not</b> 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   |             | N/A   | 25    |      |              |
|           | all years listed, answer "No" and attach statement—see page 22 of the instructions)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here |             | N/A   | 2b    |      |              |
| С         | the provisions of section 4542(a)(2) are being applied to any of the years listed in 2a, list the years here  20 , 20 , 20 , 20  |             |       |       |      |              |
| 3a        | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise  |             |       |       |      |              |
| Ja        | at any time during the year?   | Yes         | X No  |       |      |              |
| b         | If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or  |             | 110   |       |      |              |
| •         | disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the  |             |       |       |      |              |
|           | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of   |             |       |       |      |              |
|           | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the   |             |       |       |      |              |
|           | foundation had excess business holdings in 2010 )  |             | N/A   | 3ь    |      |              |
| 4a        | Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes'   | >           | ,     | 4a    |      | x            |
| b         | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its   |             |       |       |      | <del></del>  |
| -         | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20  | 10?         |       | 4b    |      | х            |
|           |  |             | Fo    | rm 99 | 0-PF |              |

| <u>orm</u>   | 990-PF (2010) GINO AND LUCIANA DICLEMENTE  | 38-3                   | 440485              |  |          | Pag   | <u>ge 6</u> |
|--|--|------------------------|---------------------|--|----------|---|-------------|
| Pa   | rt VII-B Statements Regarding Activities for Which Form 4  | 720 May Be Re          | equired (conti      | nued)                                  |          |   |             |
| 5a   | During the year did the foundation pay or incur any amount to                                      |                        |                     |  |          |   |             |
|  | (1) Carry on propaganda, or otherwise attempt to influence legislation (section 494                | 5(e))?                 | $\Box$              | Yes X No                               | .        |   |             |
|  | (2) Influence the outcome of any specific public election (see section 4955), or to c              | arry on,               | _                   |  |          |   |             |
|  | directly or indirectly, any voter registration drive?  |                        | П,                  | Yes X No                               |          |   |             |
|  | (3) Provide a grant to an individual for travel, study, or other similar purposes?                 |                        | <b>—</b> •          | Yes 🕱 No                               |          |   |             |
|  | (4) Provide a grant to an organization other than a charitable, etc., organization de              | scribed in             |                     |  |          |   |             |
|  | section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instruc                 | tions)                 | $\square$           | Yes X No                               |          |   |             |
|  | (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational |                        |                     |  |          |   |             |
|  | purposes, or for the prevention of cruelty to children or animals?                                 |                        |                     |  |          |   |             |
| b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in |  |                        |                     |  |          |   |             |
| n= /=  |  |                        |                     |  | 5b       |   |             |
|  | Organizations relying on a current notice regarding disaster assistance check here                 |                        | ·                   | <b>▶</b> [ ]                           |          |   |             |
| С  | If the answer is "Yes" to question 5a(4), does the foundation claim exemption from                 | the tax                |                     |  |          |   |             |
|  | because it maintained expenditure responsibility for the grant?                                    |                        | N/A 🗍               | Yes No                                 |          |   |             |
|  | If "Yes," attach the statement required by Regulations section 53 4945-5(d)                        |                        |                     |  |          |   |             |
| 6a   | Did the foundation, during the year, receive any funds, directly or indirectly, to pay p           | remiums                |                     |  |          |   |             |
|  | on a personal benefit contract?  |                        |                     | Yes X No                               |          |   |             |
| b  | Did the foundation, during the year, pay premiums, directly or indirectly, on a persoi             | nal 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            | er transaction?        | <u> </u>            | Yes X No                               |          | ļ   |             |
| b  | If Yes, did the foundation receive any proceeds or have any net income attributable                |                        | ,                   | _N/A                                   | 7b       |   |             |
|  | art VIII Information About Officers, Directors, Trustees, Fou                                      |                        |                     | Paid Employe                           | es,      | •   |             |
|  | and Contractors  |                        |                     |  | •        |   |             |
| 1 L  | ist all officers, directors, trustees, foundation managers and their compensati                    | on (see page 22 o      | f the instructions  | s).                                    |          |   |             |
|  |  | (b) Title, and average | (c) Compensation    | (d) Contributions to                   |          |   |             |
|  | (a) Name and address   | hours per week         | (If not paid, enter | employee benefit<br>plans and deferred |          | <ul><li>(e) Expense account,<br/>other allowances</li></ul> |             |
|  |  | devoted to position    | -0-)                | compensation                           | Outer    | anowario  | 63          |
| SE   | E STATEMENT 7  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   | _           |
|  |  |                        |                     |  | ]        |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   |             |
| 2  | Compensation of five highest-paid employees (other than those included on                          | line 1 — see page      | 23 of the instruc   | tions).                                |          |   |             |
|  | If none, enter "NONE."   |                        |                     |  |          |   |             |
|  |  | (b) Title, and average |                     | (d) Contributions to                   | I        |   |             |
|  | (a) Name and address of each employee paid more than \$50,000                                      | hours per week         | (c) Compensation    | employee benefit<br>plans and deferred |          | ense acc<br>allowanc  |             |
|  |  | devoted to position    |                     | compensation                           | 0.000    |   |             |
| NC   | ONE  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  | <u>L</u> |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  |          |   |             |
|  |  |                        |                     |  | T        | _   |             |
|  |  |                        | l                   |  |          |   |             |
| Fota   | I number of other employees paid over \$50,000   |                        |                     |  | <b>•</b> |   | 0           |

| Form 990-PF (2010) GINO AND LUCIANA DICLEMENTE  | 38-3440485                                | Page <b>7</b>    |  |  |  |
|---|---|------------------|--|--|--|
| Part VIII Information About Officers, Directors, Trustees, Founda   | ation Managers, Highly Paid Emp           | oloyees,         |  |  |  |
| and Contractors (continued)  3 Five highest-paid independent contractors for professional services (see page 23)  | of the instructions). If none, enter "NON | E."              |  |  |  |
| (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  |   |                  |  |  |  |
|   |   |                  |  |  |  |
| Part IX-A Summary of Direct Charitable Activities   |   |                  |  |  |  |
| List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. |   |                  |  |  |  |
| 1 P.I.M.E. MISSIONARIES - VARIOUS MISSIONS,   | ORPHANS,                                  |                  |  |  |  |
| ELDERLY   |   |                  |  |  |  |
| 2 CHROHNS & COLITIS FOUNDATION - MEDICAL RES  | EARCH                                     |                  |  |  |  |
|   |   |                  |  |  |  |
| 3 MICHIGAN STATE UNIVERSITY - EDUCATION   |   |                  |  |  |  |
|   |   |                  |  |  |  |
| 4 ST THOMAS MORE CHURCH - RELIGOUS PURPOSES   |   |                  |  |  |  |
|   |   |                  |  |  |  |
| Part IX-B Summary of Program-Related Investments (see page 2  | 24 of the instructions)                   |                  |  |  |  |
| Describe the two largest program-related investments made by the foundation during the tax year on lines  | 1 and 2                                   | Amount           |  |  |  |
| 1 N/A   |   |                  |  |  |  |
|   |   |                  |  |  |  |
| 2   |   |                  |  |  |  |
|   |   |                  |  |  |  |
| All other program-related investments See page 24 of the instructions   |   |                  |  |  |  |
| 3   |   |                  |  |  |  |
|   |   |                  |  |  |  |

Form 990-PF (2010)

Total. Add lines 1 through 3

Form 990-PF (2010)

38,088

38,088

3a 3b

4

5

6

ь

5

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

| Pa | rt XIII Undistributed Income (see page 26           | of the instructions) |                     |       |             |
|----|---|----------------------|---------------------|-------|-------------|
| •  |   | (a)                  | (b)                 | (c)   | (d)         |
| 1  | Distributable amount for 2010 from Part XI,         | Corpus               | Years prior to 2009 | 2009  | 2010        |
|    | line 7  | 1                    | T                   |       | 37,368      |
| 2  | Undistributed income, if any, as of the end of 2010 |                      |                     |       |             |
| а  | Enter amount for 2009 only                          |                      |                     | 3,764 |             |
| b  | Total for prior years 20 , 20 , 20                  |                      |                     |       |             |
| 3  | Excess distributions carryover, if any, to 2010     |                      |                     |       |             |
| а  | From 2005   |                      |                     |       |             |
| b  | From 2006   |                      |                     |       |             |
| С  | From 2007   |                      |                     |       |             |
| d  | From 2008   | -                    |                     |       |             |
| е  | From 2009   |                      |                     |       |             |
| f  | Total of lines 3a through e                         |                      | 1                   |       |             |
| 4  | Qualifying distributions for 2010 from Part XII,    |                      |                     |       |             |
|    | line 4 ▶ \$38,088                                   |                      |                     |       |             |
| а  | Applied to 2009, but not more than line 2a          |                      |                     | 3,764 |             |
| b  | Applied to undistributed income of prior years      |                      |                     |       |             |
|    | (Election required—see page 26 of the instructions) |                      |                     |       |             |
| С  | Treated as distributions out of corpus (Election    |                      |                     |       |             |
|    | required—see page 26 of the instructions)           |                      |                     |       |             |
| d  | Applied to 2010 distributable amount                |                      |                     |       | 34,324      |
| е  | Remaining amount distributed out of corpus          |                      |                     |       |             |
| 5  | Excess distributions carryover applied to 2010      |                      |                     |       |             |
|    | (If an amount appears in column (d), the same       |                      |                     |       |             |
|    | amount must be shown in column (a) )                |                      |                     |       |             |
| 6  | Enter the net total of each column as               |                      |                     |       |             |
|    | indicated below:                                    |                      |                     |       |             |
| а  | Corpus Add lines 3f, 4c, and 4e Subtract line 5     |                      |                     |       |             |
| b  | Prior years' undistributed income Subtract          |                      |                     |       |             |
|    | line 4b from line 2b                                |                      |                     |       |             |
| С  | Enter the amount of prior years' undistributed      |                      |                     |       |             |
|    | income for which a notice of deficiency has         |                      |                     |       |             |
|    | been issued, or on which the section 4942(a)        |                      |                     |       |             |
|    | tax has been previously assessed                    |                      |                     |       |             |
| d  | Subtract line 6c from line 6b Taxable               |                      |                     |       | <u></u>     |
|    | amount—see page 27 of the instructions              |                      |                     |       |             |
| е  | Undistributed income for 2009 Subtract line         |                      |                     |       |             |
|    | 4a from line 2a Taxable amount—see page             |                      |                     |       |             |
|    | 27 of the instructions                              |                      |                     |       |             |
| f  | Undistributed income for 2010 Subtract lines        |                      |                     |       |             |
|    | 4d and 5 from line 1. This amount must be           |                      |                     |       |             |
|    | distributed in 2011                                 |                      |                     |       | 3,044       |
| 7  | Amounts treated as distributions out of corpus      |                      |                     |       |             |
|    | to satisfy requirements imposed by section          |                      |                     |       |             |
|    | 170(b)(1)(F) or 4942(g)(3) (see page 27 of the      |                      |                     |       |             |
|    | instructions)                                       |                      |                     |       |             |
| 8  | Excess distributions carryover from 2005 not        |                      |                     |       |             |
|    | applied on line 5 or line 7 (see page 27 of the     |                      |                     |       |             |
|    | instructions)                                       |                      |                     |       | <del></del> |
| 9  | Excess distributions carryover to 2011.             |                      |                     |       |             |
|    | Subtract lines 7 and 8 from line 6a                 | ļ                    | <u> </u>            |       |             |
| 10 | Analysis of line 9                                  |                      |                     |       |             |
| а  | Excess from 2006                                    |                      |                     | }     |             |
| b  | Excess from 2007                                    |                      |                     |       |             |
| С  | Excess from 2008                                    |                      |                     | }     |             |
| d  | Excess from 2009                                    |                      |                     |       |             |
| е  | Excess from 2010                                    |                      |                     |       |             |

| •   | - | _  | - | - | - |   | -            |     |
|-----|---|----|---|---|---|---|--------------|-----|
| - 2 | u | -3 | л | _ | " | _ | u            |     |
|     | О |    | - | - | • | - | $\mathbf{c}$ | - 1 |

Page **10** 

| _Pa | rt XIV Private Operating Fou   | ndations (see p         | <u>age 27 of the instr</u>              | uctions and Part \         | /II-A, question 9)  |  |
|-----|--|-------------------------|---|----------------------------|---------------------|--|
| 1a  | If the foundation has received a ruling or d foundation, and the ruling is effective for 2 | etermination letter the | at it is a private operatin             |                            |                     |  |
| b   | Check box to indicate whether the foundat  |                         | •                                       | d in section 49            | 942(j)(3) or 4942   | (1)(5)   |
| 2a  | Enter the lesser of the adjusted net   | Tax year                |   | Prior 3 years              | 10.12               | <u>.                                      </u> |
|     | 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   |                         |   |                            |                     | <u>-</u>                                       |
| C   | Qualifying distributions from Part XII,  |                         |   |                            |                     | · · · · · · · · · · · · · · · · · · ·          |
|     | line 4 for each year listed  |                         |   |                            |                     |  |
| d   | Amounts included in line 2c not used directly  |                         |   |                            |                     |  |
|     | for active conduct of exempt activities  |                         |   |                            |                     |  |
| e   | Qualifying distributions made directly   |                         |   |                            |                     |  |
|     | for active conduct of exempt activities  |                         |   |                            |                     |  |
|     | Subtract line 2d from line 2c  |                         |   |                            |                     |  |
| 3   | Complete 3a, b, or c for the   |                         |   |                            |                     |  |
|     | alternative test relied upon   |                         |   |                            |                     |  |
| а   | "Assets" alternative test—enter  |                         |   |                            |                     |  |
|     | (1) Value of all assets  | <u> </u>                |   |                            |                     |  |
|     | (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 "Support" alternative test—enter                       |                         | <del></del>                             |                            |                     |  |
| С   | (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<br>organizations as provided in                                       |                         |   |                            |                     |  |
|     | section 4942(j)(3)(B)(iii)   |                         |   |                            |                     |  |
|     | (3) Largest amount of support from   |                         |   |                            |                     |  |
|     | an exempt organization   |                         |   |                            | _                   |  |
|     | (4) Gross investment income  |                         |   |                            |                     |  |
| Pa  | rt XV Supplementary Inform   | ation (Complet          | e this part only if t                   | he foundation ha           | d \$5,000 or more i | n assets at                                    |
|     | any time during the ye   | ear—see page 2          | 8 of the instructio                     | ns.)                       |                     |  |
| 1   | Information Regarding Foundation Mar   | _                       |   |                            |                     |  |
| а   | List any managers of the foundation who h  |                         |   | •                          | he foundation       |  |
|     | before the close of any tax year (but only if <b>N/A</b>                                   | they have contribute    | d more than \$5,000) (S                 | ee section 507(d)(2))      |                     |  |
| b   | List any managers of the foundation who  | own 10% or more of t    | he stock of a corporation               | ı (or an equally large po  | rtion of the        |  |
|     | ownership of a partnership or other entity)  | of which the foundati   | on has a 10% or greate                  | nterest                    |                     |  |
|     | N/A  |                         |   |                            |                     |  |
| 2   | Information Regarding Contribution, G  |                         |   |                            |                     |  |
|     | Check here ▶ X if the foundation only  |                         | •                                       | •                          | •                   |  |
|     | unsolicited requests for funds If the found  |                         | · · ·                                   | f the instructions) to ind | ividuals or         |  |
|     | organizations under other conditions, com  |                         |   |                            |                     |  |
| а   | The name, address, and telephone numbers / A   | er of the person to wh  | om applications should                  | be addressed               |                     |  |
|     | N/A  |                         |   |                            |                     |  |
|     | The form in which applications should be   | submitted and inform    | ation and materials they                | should include             |                     | <del></del>                                    |
|     | N/A  | Japania and interne     | and materials tricy                     | S. Said Molado             |                     |  |
| С   | Any submission deadlines   |                         | <del></del>                             |                            |                     | <del></del>                                    |
|     | N/A  |                         |   |                            |                     |  |
| d   | Any restrictions or limitations on awards, s   | uch as by geographi     | cal areas, charitable field             | ls, kinds of institutions, | or other            |  |
|     | factors  |                         |   |                            |                     |  |
|     | N/A  | <del> </del>            | · - · · · · · · · · · · · · · · · · · · |                            | <del></del>         |  |
| DAA |  |                         |   |                            |                     | Form <b>990-PF</b> (2010)                      |

Total

DAA

Page 11

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to any foundation manager or substantial contributor status of Amount contribution recipient Name and address (home or business) Paid during the year SEE STATEMENT 8 36,390 36,390 ▶ 3a Total **b** Approved for future payment N/A ▶ 3b

| F  | Part XVI-A     | Analysis of Income-Producing Activ   | vities               |                   |                  |                                       |   |
|----|----------------|--|----------------------|-------------------|------------------|---------------------------------------|---|
|    |                | unts unless otherwise indicated  |                      | d business income | Excluded         | by section 512, 513, or 514           | (e)   |
|    | -              |  | (a)<br>Business code | (b)<br>Amount     | (c)<br>Exclusion | (d)<br>Amount                         | Related or exempt<br>function income<br>(See page 28 of |
| 1  | Program sen    | vice revenue   |                      |                   | code             |                                       | the instructions)                                       |
|    |                |  |                      |                   | <del>  </del>    |                                       |   |
|    |                |  | <del></del>          |                   |                  |                                       | <del></del>   |
|    | ີ              | **   |                      |                   | + +              |                                       |   |
|    |                |  |                      | <u> </u>          | + +              | -                                     | · · -   |
|    | f              |  |                      |                   | +                |                                       |   |
|    |                | d contracts from government agencies   |                      |                   | 1                |                                       |   |
| 2  | _              | dues and assessments   |                      |                   |                  |                                       |   |
|    | =              | avings and temporary cash investments  |                      |                   | 14               | 2,643                                 |   |
|    |                | d interest from securities   |                      |                   | 14               | 23,111                                |   |
|    |                | come or (loss) from real estate  |                      |                   | 1                |                                       | · -   |
|    |                | anced property   |                      |                   |                  |                                       |   |
|    |                | -financed property   |                      |                   |                  |                                       | <del>, , _</del>  |
| 6  | Net rental inc | come or (loss) from personal property  |                      |                   |                  |                                       |   |
| 7  | Other investr  | ment income  |                      |                   |                  |                                       |   |
| 8  | Gain or (loss  | ) from sales of assets other than inventory  |                      |                   | 14               | -4,013                                |   |
|    |                | or (loss) from special events  |                      |                   |                  |                                       |   |
|    |                | or (loss) from sales of inventory  |                      |                   | 1                |                                       |   |
| 11 |                | ue <b>a</b>  | ļ                    |                   | -                | -                                     |   |
|    |                |  |                      |                   | -                |                                       |   |
|    |                |  |                      |                   |                  |                                       |   |
|    |                |  |                      |                   | +                |                                       |   |
| 40 | e              | d columns (b) (d) and (c)  |                      |                   | ,                | 21 741                                | 0   |
|    |                | d columns (b), (d), and (e)<br>ne 12, columns (b), (d), and (e)  |                      |                   | <u> </u>         | 21,741                                |   |
|    |                | n line 13 instructions on page 29 to verify calculations   | 1                    |                   |                  | 13                                    | 21,741  |
|    | Part XVI-B     | Relationship of Activities to the Ac   |                      | ent of Exempt Pi  | irnoses          | · · · · · · · · · · · · · · · · · · · |   |
|    | Line No.<br>▼  | Explain below how each activity for which income is accomplishment of the foundation's exempt purpose instructions )  NOT APPLICABLE |                      |                   |                  |                                       | ne  |
|    |                |  |                      |                   |                  |                                       |   |
|    |                |  |                      |                   |                  |                                       |   |
| _  |                |  |                      |                   |                  |                                       |   |
|    |                | <u> </u>   |                      | <del></del>       |                  |                                       |   |
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|    | <del></del>    |  |                      |                   |                  |                                       |   |
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|    |                |  |                      | ······            | <del></del>      |                                       |   |
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|    |                |  |                      |                   | •                |                                       | <del></del>   |
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| _  |                |  |                      |                   |                  |                                       |   |
| _  |                |  |                      |                   |                  |                                       |   |
| DA | A              |  |                      |                   |                  |                                       | Form 990-PF (2010)                                      |

| , alt A        | •                           | Exempt Organiza   | _                                 | ilisiers IV allu                                  | i i i alisaction                            | s and Relatio           | manipa with          | Hononani                              | aule           |          |                                 |
|----------------|-----------------------------|---|-----------------------------------|---|---|-------------------------|----------------------|---------------------------------------|----------------|----------|---------------------------------|
| 1 Did          |                             | nization directly or indire                               |                                   | in any of the follow                              | ring with any othe                          | r organization des      | scribed              |                                       |                | Yes      | No                              |
| ın se          | ection 50                   | 1(c) of the Code (other                                   | than section                      | 501(c)(3) organiza                                | ations) or in section                       | on 527, relating to     | political            |                                       |                |          |                                 |
| orga           | anızatıons                  | 3?  |                                   |   |   |                         |                      |                                       |                |          |                                 |
| a Trai         | nsfers fro                  | m the reporting founda                                    | tion to a non                     | charitable exempt                                 | organization of                             |                         |                      |                                       |                |          |                                 |
|                | Cash                        |   |                                   |   |   |                         |                      |                                       | 1a(1)          |          | <u> </u>                        |
| • • •          | Other as                    |   |                                   |   |   |                         |                      |                                       | 1a(2)          |          | <u> </u>                        |
|                | er transa                   |   |                                   |   |   |                         |                      |                                       | 45.41          |          | X                               |
|                |                             | assets to a noncharital<br>es of assets from a nor        |                                   |   |   |                         |                      |                                       | 1b(1)<br>1b(2) |          | X                               |
|                |                             | f facilities, equipment, o                                |                                   | . •   |   |                         |                      |                                       | 1b(2)          |          | $\frac{\mathbf{x}}{\mathbf{x}}$ |
|                |                             | sement arrangements                                       | n outer asse                      |   |   |                         |                      |                                       | 1b(4)          |          | X                               |
|                |                             | loan guarantees   |                                   |   |   |                         |                      |                                       | 1b(5)          |          | X                               |
|                |                             | ance of services or mei                                   | mbership or f                     | fundraising solicitat                             | tions                                       |                         |                      |                                       | 1b(6)          |          | X                               |
| c Sha          | iring of fa                 | cilities, equipment, mai                                  | ling lists, oth                   | er assets, or paid e                              | employees                                   |                         |                      |                                       | 1c             |          | X                               |
| <b>d</b> If th | e answei                    | to any of the above is                                    | "Yes," comp                       | lete the following s                              | chedule Column                              | (b) should always       | show the fair m      | arket                                 |                |          |                                 |
| valu           | e of the                    | goods, other assets, or                                   | services give                     | en by the reporting                               | foundation If the                           | foundation receive      | ed less than fair    | market                                |                |          |                                 |
|                |                             | transaction or sharing a                                  |                                   |   |   |                         |                      |                                       |                |          |                                 |
| (a) Lin        | e no                        | (b) Amount involved                                       | (c) Name                          | of noncharitable exen                             | npt organization                            | (d) Descript            | on of transfers, tra | nsactions, and sl                     | naring arrange | ments    |                                 |
| I/A            |                             |   |                                   |   |   |                         |                      | ·                                     |                |          |                                 |
| _              |                             |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                |                             |   |                                   | ***************************************           |   |                         |                      |                                       |                |          |                                 |
|                |                             |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                | -                           |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                |                             |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                |                             |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                |                             |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                |                             |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                |                             |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                |                             |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                |                             |   |                                   |   |   |                         |                      |                                       |                |          | —                               |
|                |                             |   |                                   |   |   | <u> </u>                |                      |                                       |                |          | —                               |
|                |                             |   |                                   |   |   | ·                       |                      |                                       |                |          |                                 |
| 2a Isti        | he found:                   | L   | v affiliated w                    | oth or related to o                               | ne or more tax-ex                           | empt organization       |                      |                                       |                |          |                                 |
|                |                             | section 501(c) of the C                                   | -                                 |   |   | •                       |                      |                                       | ΠY             | es X     | No                              |
|                |                             | plete the following sch                                   | ,                                 | ,,,   |   |                         |                      |                                       |                |          |                                 |
|                | (a)                         | Name of organization                                      |                                   | (b) Type of o                                     | organization                                |                         | (c) Descript         | ion of relationshi                    | р              |          |                                 |
| N/2            | 4                           |   |                                   |   |   |                         |                      |                                       |                |          |                                 |
|                | -                           |   |                                   |   |   |                         | · •                  |                                       |                |          |                                 |
|                |                             |   |                                   |   |   |                         |                      | · · · · · · · · · · · · · · · · · · · |                |          |                                 |
|                |                             | -   | ····                              | -   |   |                         |                      | <del> </del>                          |                |          |                                 |
| — Т            |                             | / / / / / / / / / / / / / / / / / / /                     | 45-415                            |   |   |                         |                      |                                       | dedee end      |          | —                               |
|                | belief it                   | palties of penury, I declare<br>Atrys correct, and comple | tnat i nave exi<br>te Declaration | amined this return, inc<br>of preparer (other the | auding accompanyir<br>an taxpayer or fiduci | ary) is based on all it | nformation of which  | preparer has an                       | y knowledge    |          |                                 |
| Sign           | $\mathbf{N} \mathbf{X} / 0$ | MI 1/11 (47) e  | OUNT                              | t.  | x 61  | 21/2011                 | A PRES               | IDENT                                 |                |          |                                 |
| Here           | Sign                        | ture of officer or trustee                                | <del>LIN.</del>                   |   | Date  | 7                       | Title                |                                       |                | -        |                                 |
|                | Print#                      | ype preparer's name                                       |                                   |   | Preparer's signat                           | ture                    | , _                  | ,                                     | Date           | Check    |                                 |
| aid            | /                           | •••   |                                   |   | -Ca   |                         |                      |                                       |                | self-em  | ployed                          |
| reparer        | RONA                        | LD LEMMING  |                                   |   | RONALD LE                                   |                         | <u> </u>             |                                       | 6/23/11        | <u> </u> |                                 |
| Jse Only       | Firm's                      | name PLOTN  |                                   | EINBERG,  |   | SSOC, P.                | C.                   |                                       | P00014         |          |                                 |
|                | Firm's                      | address ▶ 27313   |                                   | FIELD RO  |   |                         |                      |                                       | 38-243         |          |                                 |
|                |                             | LATHI   | RUP VII                           | LLAGE, MI   | 48076                                       |                         |                      | Phone no                              | 248-44         |          |                                 |
|                |                             |   |                                   |   |   |                         |                      |                                       | Form 99        | W-PF     | (2010)                          |

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

Department of the Treasury Internal Revenue Service

GINO AND LUCIANA DICLEMENTE

## **Schedule of Contributors**

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

OMB No 1545-0047

2010

**Employer identification number** 

FOUNDATION 38-3440485 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 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, chantable, 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)

Page 1 of 1 of Part I

Name of organization **Employer identification number** GINO AND LUCIANA DICLEMENTE 38-3440485 Part I Contributors (see instructions) (a) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 1 GINO & LUCIANA DICLEMENTE Person 5135 IRON GATE RD. Payroll 7,000 Noncash BLOOMFIELD MI 48304-3737 (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) Name, address, and ZIP + 4 No. Aggregate contributions Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** \$ Noncash (Complete Part II if there is a noncash contribution ) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution ) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person Payroli \$ Noncash (Complete Part II if there is a noncash contribution )

(11)

(12)

(13)

(14)

(15)

## Capital Gains and Losses for Tax on Investment Income 990-PF 2010 Form For calendar year 2010, or tax year beginning and ending Name Employer Identification Number GINO AND LUCIANA DICLEMENTE FOUNDATION 38-3440485 (b) How acquired P-Purchase D-Donation (a) List and describe the kind(s) of property sold, e.g., real estate 2-story brick warehouse, or common stock, 200 shs MLC Co (c) Date acquired (mo , day, yr ) (d) Date sold (mo, day, yr) **(1)** CASH IN LIEU DISCOVERY LABS P 12/30/10 12/30/10 CASH IN LIEU-FIRST AMERICAN FINCL P 06/16/10 06/16/10 (2)450SH APOLLO GROUP P **VARIOUS VARIOUS** (3)207SH AVON PRODUCTS ₽ 04/05/10 **VARIOUS** (4)600SH BOSTON SCIENTIFIC P **VARIOUS** 04/09/10 (5)183SH CMS ENERGY P **VARIOUS** 11/03/10 (6)156SH CINTAS CORP P **VARIOUS** 03/24/10 (7)12/19/01 1000SH COMPUWARE P 04/12/10 (8) 155SH DISCOVER FINC'L P 10/26/10 **VARIOUS** (9)(10) 500SH EXPEDIA INC. P **VARIOUS** 04/09/10 101SH EXPEDITORS INT'L P 03/24/10 **VARIOUS** (11)100SH GENERAL ELECTRIC P 10/08/08 10/26/10 (12)212SH LINEAR TECHNOLOGY P (13)**VARIOUS** 03/02/10 160SH MARSH & MCLENNAN CO'S P **VARIOUS** 11/03/10 (14)300SH RAYTHEON CO. P (15)**VARIOUS** 01/07/10 (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (e) Gross sales price (h) Gain or (loss) (e) plus (f) minus (g) 2 (1) 8 8 (2)5,362 19,738 14,376 (3)7,075 7,002 73 (4)4,162 9,784 -5,622 (5)3,578 3,317 -261 (6)4,461 5,720 -1,259 (7) 12,770 8,556 -4,214(8)<u>3,349</u> 2,688 -661 (9)12,313 10,118 (10)2,195 -749 3,887 4,636 (11)2,064 (12)1,610 -4546,581 5,861 -720 (13)4,870 -823 4,047 (14)15,430 10,489 4,941 (15)Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col (i) over col (j), if any 2 (1) 8 (2) 5,362 (3) 73 (4) -5,622 (5) -261 (6)-1,259 (7)-4,214(8) -661 (9)2,195 (10)-749

-454

-720

-823

4,941

(14) (15)

| 14                                 |  |   |  |  |
|------------------------------------|--|---|--|--|
| Form .990-PF                       |  | s for Tax on Investment Inco                    | ome  | 2010   |
|                                    | dar year 2010, or tax year beginning   | , and ending                                    | Employee Idea                                    | atification Number   |
| GINO AND LUCIANA                   | DICLEMENTE   |   | _ ⊏mployer ider                                  | ntification Number   |
| FOUNDATION                         |  |   | 38-3440  | 1485   |
| (a) List and desc<br>2-story brick | cribe the kind(s) of property sold, e.g., real esta<br>warehouse, or common stock, 200 shs MLC ( | ate, (b) How acquired P-Purchase D-Donation     | (c) Date acquired (mo , day, yr )                | (d) Date sold<br>(mo , day, yr )                           |
| 443SH TEXAS IN                     |  | P   | VARIOUS  | 06/28/10   |
| 500SH WELLS FA                     |  | P   | VARIOUS  | 11/01/10   |
| 402SH WESTERN                      | UNION CO   | P   | VARIOUS  | VARIOUS  |
| )                                  |  |   | -  | -  |
| )                                  |  |   |  |  |
| )                                  |  |   |  |  |
| )                                  |  |   |  |  |
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| 0)                                 |  |   |  |  |
| 1)                                 |  | -   |  |  |
| <u>2)</u><br>3)                    |  |   |  |  |
| <del>5)</del><br>4)                | ·  |   | <del> </del>                                     | <del> </del>   |
| 5)                                 |  |   |  |  |
|                                    |  |   |  |  |
| (e) Gross sales price              | (f) Depreciation allowed (or allowable)  | (g) Cost or other basis<br>plus expense of sale | (h) Gair<br>(e) plus (                           | n or (loss)<br>f) minus (g)                                |
| 10,818                             |  | 12,340  |  | -1,522   |
| 12,983                             |  | 11,586  |  | 1,397  |
| 7,607                              | <u> </u>   | 9,313   |  | -1,706   |
| 1                                  |  | ·   | -  | ···  |
| )                                  | 1  | <del>-  </del>                                  |  |  |
| )                                  |  |   |  |  |
| )                                  |  |   |  |  |
| )                                  |  |   |  |  |
| 0)                                 |  |   |  |  |
| 1)                                 |  |   |  |  |
| 2)                                 |  |   |  |  |
| 3)<br>4)                           |  |   |  |  |
| 5)                                 | •  |   |  |  |
|                                    |  |   |  |  |
| (i) F M V as of 12/31/69           | ng gain in column (h) and owned by the f<br>(j) Adjusted basis<br>as of 12/31/69                 | (k) Excess of col (i) over col (j), if any      | (I) Gains (C<br>col (k), but not l               | ol (h) gain minus<br>ess than -0-) <b>or</b><br>m col (h)) |
|                                    | as of 12/31/69   | over coi (j), if any                            |  |  |
| <u>)</u>                           | <del> </del>   |   |  | -1,522<br>1,397  |
| )                                  |  |   | <del>                                     </del> | -1,706   |
| )                                  |  |   |  |  |
| )                                  |  |   |  |  |
| )                                  |  |   |  |  |
| )                                  |  |   |  |  |
| )                                  |  |   |  | ·  |
| )                                  |  |   | -  |  |
| 0)<br>1)                           | <del> </del>   |   |  |  |
| 2)                                 | <u> </u>   |   |  |  |
| 3)                                 |  |   |  | . <u>.</u>   |

## 914 GINO AND LUCIANA DICLEMENTE

38-3440485

FYE: 12/31/2010

## Federal Statements

# Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

| 006 | Description |
|-----|-------------|
|     | ر<br>ب      |
|     | <b>የ</b>    |

## Statement 2 - Form 990-PF, Part I, Line 18 - Taxes

| Charitable<br>Purpose | 170<br>20<br>317   | 507   |
|-----------------------|--|-------|
| '                     | <u></u>  | ·     |
| Adjusted<br>Net       |  | 0     |
|                       | φ.   | w     |
| Net<br>nvestment      | !  | 0     |
| Inve                  | জ  | w N   |
| Total                 | 170<br>20<br>317   | 507   |
|                       | w  | w     |
| Description           | TAXES - FEDERAL 2009 FORM 990-PF<br>TAXES - MICHIGAN ANNUAL REPORT<br>TAXES - FOREIGN DIVIDEND TAX | TOTAL |

## Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

|                |          |       |          | Net        | Adju | sted | ຮັ       | Charitable |
|----------------|----------|-------|----------|------------|------|------|----------|------------|
| Description    | •        | Total | <u>v</u> | Investment | Net  | et   | Pu       | Purpose    |
|                | ς,       |       | S.       |            | \$   |      | <b>%</b> |            |
| EXPENSES       |          |       |          |            |      |      |          |            |
| OFFICE & MISC. |          | 291   |          |            |      |      |          | 291        |
| TOTAL          | <b>پ</b> | 291   | \$       | 0          | w    | 0    | w.       | 291        |

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# Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

| AMERICAN STRATEGIC PORTF. III AMERICAN STRATEGIC PORTF. AMERICA'S CARMART, INC. APOLLO GROUP INC. AVON PRODUCTS BANCO SANTANDER CENT. BANK OF AMERICA BECTON DICKINSON BOSTON SCIENTIFIC  |   | of<br>2,32<br>2,43<br>2,43<br>2,18<br>8,42<br>3,74<br>3,74                             | Basis of Valuation MARKET MARKET MARKET MARKET MARKET MARKET MARKET MARKET                       | .v. Fa≘. | arket   2, 32   2, 43   2, 18   2, 18   3, 74 |
|---|---|--|--|----------|---|
| CATERDILLAR, INC. CATERPILLAR, INC. CENOVUS ENERGY INC. CHIMERA INVESTMENT CORP. CITIGROUP INC. C M S ENERGY COCA COLA CO. COMPTON PETE CORP. COMPUNARE CORP. COMPLOGIC INC. CORELOGIC INC. CORP. BACKED TRUST SRS F DELL, CORP.                                | 7   | 20,063<br>30,688<br>15,195<br>12,330<br>13,478<br>21,891<br>12,254<br>12,254<br>12,873 | MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET |          | 20,688<br>15,195<br>12,330<br>13,478<br>21,891<br>12,254<br>1,974<br>5,561<br>34,752<br>12,873  |
| DISCOVERY LAB'S INC.  DTE ENERGY HOLDING CO.  EBAY INC.  ENCANA CORP.  EXPEDIA  EXPEDIA  I FIRST AMERICAN CORP  SH FORD MOTOR CO.  H FRONTIER COMMUNICATIONS  GENERAL ELECTRIC  I ISHARES TRST-GLOBAL MATERIALS  I JPMORGAN CHASE & CO.  LINEAR TECHNOLOGY CORP | 629<br>13,077<br>11,766<br>14,456<br>12,865<br>3,530<br>102,381<br>7,950<br>12,812<br>21,790<br>6,467 | 220<br>18,827<br>13,915<br>12,997<br>1,898<br>9,920<br>7,782<br>15,084<br>22,182       | MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET<br>MARKET           |          | 220<br>18,827<br>13,915<br>12,997<br>171,898<br>9,920<br>7,782<br>15,084<br>22,182  |

FYE: 12/31/2010

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)

| Fair Market<br>Value | \$                          | 2      | 4,34            | $\sim$           | 1,83                  | 147                             | 60,                   | , 57                               | , 88                     | 8,29                                | , 73                          | 3,88   | 2                        | ,27            | $^{\circ}$                | $^{\circ}$      | 400                    |                         | 6,7              | 28,441                | 6,1               |                         | \$ 856,009 |
|----------------------|-----------------------------|--------|-----------------|------------------|-----------------------|---------------------------------|-----------------------|------------------------------------|--------------------------|-------------------------------------|-------------------------------|--------|--------------------------|----------------|---------------------------|-----------------|------------------------|-------------------------|------------------|-----------------------|-------------------|-------------------------|------------|
| Basis of Valuation   | MARKET                      | MARKET | MARKET          | MARKET           | MARKET                | MARKET                          | MARKET                | MARKET                             | MARKET                   | MARKET                              | MARKET                        | MARKET | MARKET                   | MARKET         | MARKET                    | MARKET          | MARKET                 | MARKET                  | MARKET           | MARKET                | MARKET            | MARKET                  |            |
| End of<br>Year       |                             | , 65   | 4,34            | , 73             | 1,83                  | 147                             | σ                     | , 57                               | 88                       | 68,293                              | 1,73                          | 888    | , 55                     | ,27            | $^{\circ}$                | ,02             | 0                      |                         | 6,71             | 28,441                | 6,18              |                         | 856,009    |
| Beginning<br>of Year |                             | 7,447  | 9,79            | 3,56             | $\boldsymbol{\omega}$ |                                 |                       |                                    |                          | 64                                  | 2,08                          | 81     | 14                       | 43             | 9,263                     | 81              | 2                      | 1,54                    | $\circ$          | 5,33                  | 27,591            | 7,577                   | \$ 716,863 |
| Description          | 160SH MARSH & MCLENNAN CO'S |        | 314SH MCDONALDS | 1101SH MICROSOFT | 170SH MONSANTO        | 1619SH MOTORS LIQUIDATION CORP. | 324SH NOVARTIS AG ADR | 749SH NUVEEN REAL ESTATE INC. FUND | PHILIP MORRIS INT'L INC. | 3162SH PIMCO GLOBAL STOCKSPLUS INC. | 4857SH PIMCO HIGH INCOME FUND |        | 400SH PROS HOLDINGS INC. | 135SH RAYTHEON | 197SH ROCKWELL AUTOMATION | 161SH SLM CORP. | 50SH STEWART WP&CO LTD | 443SH TEXAS INSTRUMENTS | 310SH 3M COMPANY | 528SH TIDEWATER, INC. | 522SH WELLS FARGO | 402SH WESTERN UNION CO. | TOTAL      |

914 GINO AND LUCIANA DICLEMENTE

38-3440485

## Federal Statements

FYE: 12/31/2010

## Statement 5 - Form 990-PF, Part II, Line 15 - Other Assets

| Description          | Beginr<br>of Ye | ning<br>ear | End of<br>Year | _       | Fair Market<br>Value |
|----------------------|-----------------|-------------|----------------|---------|----------------------|
| DIVIDENDS RECEIVABLE | \$              | Ş           | \$685          | \$      | 685                  |
| TOTAL                | \$              | 0 \$        | \$ 685         | \$<br>_ | 685                  |

## Statement 6 - Form 990-PF, Part III, Line 3 - Other Increases

| Description                         | <u> </u> | Amount  |
|-------------------------------------|----------|---------|
| UNREALIZED INCREASE IN MARKET VALUE | \$       |         |
| OF PUBLICLY TRADED SECURITIES       |          | 147,285 |
| TOTAL                               | \$       | 147,285 |

914 GINO AND LUCIANA DICLEMENTE 38-3440485 FYE: 12/31/2010

## Federal Statements

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| Name and<br>Address   | Title        | Average<br>Hours | Compensation | Benefits | Expenses |
|---|--------------|------------------|--------------|----------|----------|
| GINO DICLEMENTE<br>5135 IRON GATE<br>BLOOMFIELD HILLS MI 48304      | PRES, TREAS, | 5.00             | 0            | 0        | 0        |
| LUCIANA DICLEMENTE<br>5135 IRON GATE<br>BLOOMFIELD HILLS MI 48304   | DIRECTOR     | 1.00             | 0            | 0        | 0        |
| JOHN F. DICLEMENTE<br>1247 BARTON WAY<br>TROY MI 48098              | DIRECTOR     | 1.00             | 0            | 0        | 0        |
| PERRY G. DICLEMENTE<br>13154 D'ARTAGNAN CT.<br>CREVE COEUR MO 63141 | DIRECTOR     | 0.50             | 0            | 0        | 0        |
| STEVEN L. DICLEMENTE<br>5129 HIGHMOUNT<br>TROY MI 48098             | DIRECTOR     | 0.50             | 0            | 0        | 0        |
| GINO M. DICLEMENTE<br>5135 IRON GATE<br>BLOOMFIELD HILLS MI 48304   | DIRECTOR     | 0.50             | 0            | 0        | 0        |

914 GINO AND LUCIANA DICLEMENTE

38-3440485

FYE: 12/31/2010

## Federal Statements

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

| Name   | Address           |                 |   |        |
|--|-------------------|-----------------|---|--------|
| Address                                      | Relationship      | Status          | Purpose                                 | Amount |
|  | 100 MACK          |                 |   | (      |
| DETROIT, MI MI 48244                         | NONE              | CHARITABLE      | DISASTER RELIEF                         | 250    |
| AUTISM SOCIETY OF OAKLAND PO BOX /U20/       | /020/ XO          | ה דמ אפד מאווי. | T K U T T T T T T T T T T T T T T T T T | 000    |
| COUNTRY HILLS MI 4000/                       |                   | CHAKI LABLE     | MEDICAL                                 | 200    |
|  | NONE              | CHARITABLE      | RELIGOUS                                | 850    |
| CROHNS & COLITIS FOUNDAT. 31313 NORTHWESTERN |                   | STE. 2          |   |        |
| 48   |                   | CHARITABLE      | MEDICAL                                 | 2,000  |
| JRCH   | R LAKE CITY       | BLVD            |   | ,      |
| 77298  | _                 | CHAKLIABLE      | KELIGOUS                                | 1,000  |
|  |                   |                 |   |        |
| MI 48  | NONE              | CHARITABLE      | RELIGOUS                                | 400    |
|  | 300 SPARTAN WAY   |                 |   |        |
| 324  | NONE              | CHARITABLE      | EDUCATION                               | 3,500  |
|  | 17330 QUINCY ST.  |                 |   |        |
| -2765  | NONE              | CHARITABLE      | RELIGOUS                                | 13,800 |
| SACRED HEART SEMINARY 2701                   | 2701 CHICAGO BLVD |                 |   |        |
|  | NONE              | CHARITABLE      | RELIGOUS                                | 2,500  |
| ST JOHN RIVER DIST. HOSP 4100 S.             | S. RIVER ROAD     |                 |   |        |
| EAST CHINA MI 48054                          | NONE              | CHARITABLE      | MEDICAL                                 | 200    |
|  | 1006 1ST ST       |                 |   |        |
| BRADENTON FL 34208                           | NONE              | CHARITABLE      | RELIGOUS                                | 2,000  |
| ST. THOMAS MOORE CHURCH 4580                 | ADAMS RD          |                 |   |        |
|  | NONE              | CHARITABLE      | RELIGOUS                                | 1,700  |
| 513  | IRON GATE         |                 |   |        |
| BLOOMFIELD HILLS MI 48304                    | NONE              | CHARITABLE      | RELIGOUS/EDUCATION/POVERTY              | 4,590  |
| TOTAL  |                   |                 |   | 36,390 |
|  |                   |                 |   |        |



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

OMB No 1545-1709

|  | , i   |   | _                           |   |             |            | (            |          |
|--|---|---|-----------------------------|---|-------------|------------|--------------|----------|
| Department of the Treasury nternal Revenue Service             |   | a separate a                                  | pplication for each return. |   |             |            |              |          |
|  |   | omatic 3-Month Extension, complete            |                             | <u> </u>                                      |             |            | <u>i</u>     | ▶ X      |
|  |   |   |                             | plete only Part II (on page 2 of this form    | • )         |            |              | <b>A</b> |
|  |   |   |                             | nonth extension on a previously filed For     |             |            |              |          |
|  | pioto i ditti dilli   | you have already been granted an a            | adiomatic 5-ii              | month extension on a previously filed to      | 111 0000    |            |              |          |
| Electronic f   | i <b>lina (e-file).</b> You   | ı can electronically file Form 8868 if you    | need a 3-mo                 | onth automatic extension of time to file (6   | S months fo | nr.        |              |          |
|  |   | •   |                             | th extension of time You can electronica      |             |            |              |          |
|  |   |   |                             | Il with the exception of Form 8870, Infor     | -           |            |              |          |
|  |   |   |                             | nust be sent to the IRS in paper format (     |             |            |              |          |
|  |   |   |                             | v/efile and click on e-file for Charities & N |             |            |              |          |
| Part i   |   |   |                             | mit original (no copies needed)               |             |            |              |          |
|  | •   | Form 990-T and requesting an automati         |                             |   |             |            |              |          |
| Part I only  | •   |   |                             |   |             |            |              | ▶ □      |
| =  | orations (includi   | ng 1120-C filers), partnerships, REMICs       | s, and trusts               | must use Form 7004 to request an exter        | sion of tim | ie         |              | ب ،      |
|  | tax returns   | , , , , , , , , , , , , , , , , , , ,         | ,                           |   |             |            |              |          |
| Type or Name of exempt organization                            |   |   |                             | Employer identifica                           |             |            | ification nu | ımber    |
| orint  |   |   |                             | TE  |             |            |              |          |
| le by the FOUNDATION   |   |   |                             |   |             | 38-3440485 |              |          |
| due date for   | Number, stre  | eet, and room or suite no If a P O box,       | see instruction             | ons   |             |            |              |          |
| ılıng your<br>eturn See  | 5135 I  | RON GATE                                      |                             |   |             |            |              |          |
| nstructions  | City, town or   | post office, state, and ZIP code For a t      | foreign addre               | ess, see instructions                         |             |            |              |          |
|  | BLOOME  | TIELD HILLS MI                                | 48304                       | -3737   |             |            |              |          |
| Tataa tha Da   |   |   |                             |   |             |            |              | 04       |
| inter the Re   | turn code for the   | return that this application is for (file a s | separate app                | lication for each return)                     |             |            |              | 04       |
| Application  |   |   |                             | Application                                   |             |            |              | Return   |
| Is For   |   |   | Code                        | Is For  |             |            |              | Code     |
| Form 990   |   |   | 01                          | Form 990-T (corporation)                      |             |            |              | 07       |
| Form 990-BL  |   |   | 02                          | Form 1041-A                                   |             |            |              | 08       |
| Form 990-EZ  |   |   | 03                          | Form 4720                                     |             |            |              | 09       |
| Form 990-PF  |   |   |                             | Form 5227                                     |             |            |              | 10       |
| Form 990-T (sec 401(a) or 408(a) trust)                        |   |   | 05                          | Form 6069                                     |             |            |              | 11       |
| Form 990-T (trust other than above)                            |   |   |                             | Form 8870                                     |             |            | 12           |          |
|  |   | GINO DICLEMENTE                               |                             |   | -           |            |              |          |
|  |   | 28105 GREENFIELD                              |                             |   |             |            |              |          |
| <ul> <li>The books</li> </ul>                                  | s are in the care of  | ▶ SOUTHFIELD                                  |                             |   |             | M          | I 4807       | 6        |
| Telepho  | ne No ▶ 24  | 8-569-1430                                    | FAX No                      | ▶ 248-569-0096                                |             |            |              |          |
| <ul> <li>If the org</li> </ul>                                 | janization does r   | ot have an office or place of business in     | the United                  | States, check this box                        |             |            |              | ▶ []     |
| <ul> <li>If this is</li> </ul>                                 | for a Group Retu  | rn, enter the organization's four digit Gr    | oup Exempti                 | on Number (GEN) If                            | this is     |            |              |          |
| or the whole   | group, check th   | is box    If it is for part of                | the group, ch               | neck this box                                 | ch          |            |              |          |
| a list with the  | names and EIN   | s of all members the extension is for         |                             |   |             |            |              |          |
| 1   reque  | est an automatic  | 3-month (6 months for a corporation red       | quired to file              | Form 990-T) extension of time                 |             |            |              |          |
| until  | 08/15/11  | , to file the exempt organization return      | n for the orga              | inization named above. The extension is       |             |            |              |          |
| for the  | organization's re   | eturn for                                     |                             |   |             |            |              |          |
| <b>▶</b> X   | calendar year   | <b>2010</b> or                                |                             |   |             |            |              |          |
| ▶ [  | tax year begini   | ning , and ending                             |                             |   |             |            |              |          |
| 0 (6.45  |   |   | •                           | П П   |             |            |              |          |
|  | •   | in line 1 is for less than 12 months, che     | ck reason                   | Initial return Final return                   |             |            |              |          |
|  | Change in accou   | inting period                                 |                             |   |             |            |              |          |
| 3a If this   | application is for  | Form 990-BL, 990-PF, 990-T, 4720, or          | 6069, enter t               | he tentative tax, less any                    |             |            |              |          |
| nonrefundable credits See instructions                         |   |   |                             | •   | 3a          | \$         |              | 0        |
|  | b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and              |   |                             |   |             |            |              |          |
|  | estimated tax payments made Include any prior year overpayment allowed as a credit  3b                        |   |                             |   | \$          |            | 0            |          |
|  | c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS |   |                             |   |             |            |              |          |
| (Electronic Federal Tax Payment System) See instructions 3c \$ |   |   |                             |   |             |            |              | 0        |
|  |   |   | this Form 85                | 368 see Form 8453-FO and Form 8879.           |             | ·          |              |          |