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## Form 99,0-PF

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

OMB No 1545 0052

2011

Department of the Treasury Internal Revenue Service

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

For calendar year 2011, or tax year beginning 6/08

2011 and ending 12/31

For cale	endar year 2011, or tax year beginning	6/08 , 2011,	and ending 12	731	, 2011	
CTA I	MAIONE PRIMA FOUNDATION INC			Α	Employer identification num 45-2504060	nber
	INDIAN BAYOU NO.			В	Telephone number (see the	instructions)
DEST	IN, FL 32541			Ľ.	850-837-9105	
				С	If exemption application is	pending, check here
<b>G</b> Che	eck all that apply. X Initial return	Initial Return of a forr	ner public charity	D 1	Foreign organizations, chec	k here
	Final return Address change	Amended return		١,	2 Foreign organizations meet	ung the 85% test check
H C		Name change (c)(3) exempt private for	oundation	1 '	here and attach computation	n P
	Section 4947(a)(1) nonexempt charitable tr		rivate foundation	E	If private foundation status	
I Fa	· · · · · · · · · · · · · · · · · · ·	ounting method: X C	ash Accrual	1	under section 507(b)(1)(A)	, check here
• \$	· ' ' ' '   '	Other (specify)  column (d) must be on	cach bacis	F	If the foundation is in a 60- under section 507(b)(1)(B)	month termination
Part				-		
	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investme income	nt	(c) Adjusted net income	(d) Disbursements for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)			1		purposes (cash basis only)
	(see instructions).)	100 000				(cash basis only)
	1 Contributions, gifts grants, etc, received (att sch) 2 Ck if the foundn is not req to att Sch B	100,000.				
	3 Interest on savings and temporary					
	cash investments 4 Dividends and interest from securities	1.		1.	1.	
	5a Gross rents					
	<b>b</b> Net rental income or (loss)					
R E	6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all					
Ę	assets on line 6a 7 Capital gain net income (from Part IV, line 2)					
E N U	8 Net short-term capital gain					
Ĕ	9 Income modifications 10 a Gross sales less					
<u> </u>	returns and allowances	<b>F</b>				
12	b Less Cost of goods sold	REAF				
Ĩ - ¬	c Gross profit/(loss) (att sch)	1/2/2/2	(FD )			
( _ <u>;</u>	11 Other income (attach schedule)	02/2/ MAR 05				<del></del>
رت <sub>(</sub>	12 Total. Add lines 1 through 11		1912 <b>- 181</b> -	1.	1.	
MAR L	13 Compensation of officers, directors, trustees, etc	0.	S			
	14 Other employee salaries and wages 15 Pension plans, employee benefits	- OGUEN				
~~ A	16 a Legal fees (attach schedule)					
(5) E	<b>b</b> Accounting fees (attach sch)					
	c Other prof fees (attach sch)					
M-N-STRAT	17 Interest 18 Taxes (attach schedule)(see instrs)		<del></del>			
Ř Ř A A	19 Depreciation (attach				<del></del>	
	sch) and depletion	···		}		
N Ý G E	20 Occupancy 21 Travel, conferences, and meetings	<del></del>				
A E	22 Printing and publications					
D P E N	23 Other expenses (attach schedule) SEE STATEMENT 1	330.		1		
S E	24 Total operating and administrative	330.			<del> </del>	
S	expenses. Add lines 13 through 23. 25 Contributions, gifts, grants paid PART XV	25,000.	· · · · · · · · · · · · · · · · · · ·			25,000.
	26 Total expenses and disbursements.		<u> </u>			
	Add lines 24 and 25  27 Subtract line 26 from line 12:	25,330.		0.	0.	25,000.
	a Excess of revenue over expenses	<b>_</b>				
	and disbursements	74,671.		1.	<del>(-11111111</del>	-
	b Net investment income (if negative, enter 0)  C Adjusted net income (if negative, enter 0)			<del></del>	1.	
BAA F	or Paperwork Reduction Act Notice, see inst	ructions.	<u> </u>	TEEA	0504L 12/05/11	Form <b>990-PF</b> (2011)

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1 Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)

2 Enter amount from Part I, line 27a

3 Other increases not included in line 2 (itemize)

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

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

6 74, 671.

Add lines 5 and 6

Enter 1% of net investment income (1% of Part I, line 27b)

Enter qualifying distributions from Part XII, line 4

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

Form 990-PF (2011)

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Form 990-PF (2011) GIA MAIONE PRIMA FOUNDATION INC		<u>25040</u>		P	'age <b>4</b>
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	r 4948 — see	instruct	ions)		
1 a Exempt operating foundations described in section 4940(d)(2), check here	7				
Date of ruling or determination letter (attach copy of letter if necessary – see instrs)	\ \	1 1			•
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,	-	1			_0.
check here  ▶and enter 1% of Part I, line 27b	\ \				
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	ل	1 1			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		1 1			
foundations only. Others enter -0-)		2			_0.
3 Add lines 1 and 2		3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others 6	enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			0.
6 Credits/Payments.					v-1000000000
a 2011 estimated tax pmts and 2010 overpayment credited to 2011		1 1			
<b>b</b> Exempt foreign organizations — tax withheld at source 6b		1			
c Tax paid with application for extension of time to file (Form 8868)		1			
d Backup withholding erroneously withheld 6d		1			
7 Total credits and payments Add lines 6a through 6d	,	1 7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	-	9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			
11 Enter the amount of line 10 to be Credited to 2012 estimated tax	nded Þ	<del></del>			
Part VII-A   Statements Regarding Activities		<u> </u>			
				Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation participate or intervene in any political campaign?	n or aid it		1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			16		х
If the answer is 'Yes' to <b>1a</b> or <b>1b,</b> attach a detailed description of the activities and copies of any i	matariala muh	اممطميا			
or distributed by the foundation in connection with the activities.	materiais pub	nisnea			
c Did the foundation file Form 1120-POL for this year?			1 c		х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
(1) On the foundation \$\ 0. (2) On foundation managers	\$		0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure to	ax imposed o	n			
foundation managers \$ 0.					١.,
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 instrure of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the	ment, articles				١.,
	changes		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	- ;;	X .
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?			4b	N	/ <u>A</u>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
If 'Yes,' attach the statement required by General Instruction T.					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
● By language in the governing instrument, or					
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory direct</li> </ul>	ctions that co	nflict			١.,
with the state law remain in the governing instrument?			6	<del></del>	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part	XV		7	X	ļ
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			.		1
NJ			.		
<b>b</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 <i>General Instruction G? If 'No,' attach explanation</i>			8ь	X	1
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4 for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Ye	4942(j)(3) or 4	1942(j)(5)	) g		х
	•		`   <del>-</del>		
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule and addresses. SEE S	listing their na STATEMENT	ames r 3	10	Х	1
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ra	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 instructions)	11,		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		Х
13	, , , , , , , , , , , ,	13	Х	
	Website address ► N/A			
14	The books are in care of ► GIA PRIMA  Telephone no. ► 850-8	<u> 37-9</u>	<u> 105</u>	
4.5	Located at ► 4141 INDIAN BAYOU NO. DESTIN FL ZIP + 4 ► 32541			<del></del>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A	. •	
	and enter the amount of tax-exempt interest received or accrued during the year		V	N/A
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the name of the foreign country ▶			
Pa	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
1	a 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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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 Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	_ N	/A
	Organizations relying on a current notice regarding disaster assistance check here			
,	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1 c		Х_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$ ).			
,	a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?			
	If 'Yes,' list the years ▶ 20 , 20 , 20			
	<b>b</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 all years listed, answer 'No' and attach statement — see instructions.)	2b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	► 20, 20, 20	1		
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
	b If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011)	3b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of			,,
D A	the tax year beginning in 2011?	4b		X (2211)
BA/	<b>1</b>	orm 99	ひ-ピト リ	(2011)

Form 990-PF.(2011) GIA MAIONE PRIMA			45-250	)4060	Page	e E		
Part VII-B   Statements Regarding Activit	<u>ies for Which For</u> r	n 4720 May Be Red	uired (continued)					
5a During the year did the foundation pay or incur	-							
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?								
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes X No								
(3) Provide a grant to an individual for travel, study, or other similar purposes?								
(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  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?  Yes X No								
b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?								
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ 🗌			_		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure respons		emption from the	N/A Yes	No				
If 'Yes,' attach the statement required by Regu	ulations section 53.4945	-5(d).						
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	. Yes X	No				
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirect	ily, on a personal benefi	t contract?	61	2	<u>X</u>		
If 'Yes' to 6b, file Form 8870.			🗀 🙃					
7a At any time during the tax year, was the found				No T				
Part VIII Information About Officers, D				M/A 7t		_		
and Contractors	mectors, musices	, Foundation Mana	igers, migniy raiu	Lilipioye	<i>5</i> 05,			
1 List all officers, directors, trustees, foundation	managers and their co	mpensation (see instru	ctions),			_		
(a) Name and address	(b) Title, and average hours per week devoted to position		(d) Contributions to employee benefit plans and deferred compensation	(e) Expen	nse accour illowances	nt,		
GIA PRIMA	PRESIDENT	0.	0.			0		
4141 INDIAN BAYOU NO.	1.00		·			_		
DESTIN, FL 32541								
ANTHONY J. SYLVESTER	TRUSTEE	0.	0.			0		
PO BOX 1981	1.00							
MORRISTOWN, NJ 07960			<del></del>	<u> </u>				
RICHARD KNIGHT	TRUSTEE	0.	0.	ļ		0		
5100 VILLAGE WALK SUITE 102	0							
COVINGTON, LA 70433				<del></del>		_		
	<u>L</u>	<u></u>				_		
2 Compensation of five highest-paid employees						<u> </u>		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	other a	nse accour Illowances	nt,		
NONE				-				
				<del> </del>				
				<del> </del>				
Total number of other employees paid over \$50,000					90-PF (20	0		
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Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	on Managers, Highly Paid	Employees,
3 Five highest-paid independent contractors for professional services (see instruction	ons). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	]	
		<del></del>
	]	
	]	
Total number of others receiving over \$50,000 for professional services		0
	1	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform	nation such as the number of	
organizations and other beneficiaries served, conferences convened, research papers produced, etc	lation such as the number of	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instruction	าร)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2.	Amount
1		
N/A		
2		
All other program-related investments. See instructions.		-
3		
Total. Add lines 1 through 3		0.
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Par	Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreigr	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	<u>1b</u>	82,546.
	Fair market value of all other assets (see instructions)	1c	<del></del>
	Total (add lines 1a, b, and c)	1d	82,546.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c	ll	
	(attach detailed explanation) 1e 0.	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	82,546.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	1,238.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	81,308.
6	Minimum investment return. Enter 5% of line 5 SHORT YEAR MODIFIED PERCENTAGE 2.8356 %	6	2,306.
Par	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	rating	foundations
	and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	2,306.
2a	Tax on investment income for 2011 from Part VI, line 5		
t	Income tax for 2011. (This does not include the tax from Part VI.)	]	
c	: Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,306.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,306.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,306.
Pai	TXII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes. Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	25,000.
t	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	·
3	Amounts set aside for specific charitable projects that satisfy the.  Suitability test (prior IRS approval required)	3a	
ŧ	Cash distribution test (attach the required schedule)	3Ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	25,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	25,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years.	the four	ndation
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### Part XIII Undistributed Income (see instructions)

	(a) Corpus	<b>(b)</b> Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
Distributable amount for 2011 from Part XI, line 7			:	2 206
2 Undistributed income, if any, as of the end of 2011:	· · · · · · · · · · · · · · · · · · ·			2,306.
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years 20, 20, 20		0.		**************************************
3 Excess distributions carryover, if any, to 2011			· · · · · · · · · · · · · · · · · · ·	
a From 2006				
<b>b</b> From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.		- International Control of the Contr	
4 Qualifying distributions for 2011 from Part				
XII, line 4. ► \$ 25,000.			•	
a Applied to 2010, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)	***************************************	0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2011 distributable amount				2,306.
e Remaining amount distributed out of corpus	22,694.		*	
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
Same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	22,694.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		·····
c Enter the amount of prior years' undistributed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
	<del> </del>			Historia de la compansión de la constitución de la
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2012				0.
7 Amounts treated as distributions out of				1100
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)	0.		······································	=
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a			<del></del>	<del> </del>
10 Analysis of line 9.	22,694.		· · · · · · · · · · · · · · · · · · ·	
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010			İ	
e Excess from 2011 22, 694.				
RAA			·········	F 000 DF (2011)

Form 990-PF (2011) GIA MAIONE PRIMA FOUNDATION INC 45-2504060 F						
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A						
1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling						
<b>b</b> Check box to indicate whether the foundation	on is a private oper	ating foundation des	cribed in section	4942(j)(3) or	4942(j)(5)	
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years			
investment return from Part X for each year listed	(a) 2011	<b>(b)</b> 2010	(c) 2009	( <b>d)</b> 2008	(e) Total	
<b>b</b> 85% of line 2a						
c Qualifying distributions from Part XII, line 4 for each year listed						
d Amounts included in line 2c not used directly for active conduct of exempt activities						
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>						
3 Complete 3a, b, or c for the alternative test relied upon						
a 'Assets' alternative test - enter.	ł					
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c 'Support' alternative test - enter.						
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)						
(3) Largest amount of support from an exempt organization	<u></u>					
(4) Gross investment income	<u> </u>			L		
Part XV   Supplementary Information assets at any time during the	(Complete this ne year – see in	part only if the structions.)	organization h	ad \$5,000 or mo	ore in	
Information Regarding Foundation Managers as List any managers of the foundation who have close of any tax year (but only if they have GIA PRIMA	nave contributed mo	re than 2% of the to han \$5,000). (See s	tal contributions rec ection 507(d)(2).)	ceived by the founda	ation before the	
<b>b</b> List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 10	the stock of a corpo % or greater interes	oration (or an equal t.	y large portion of th	e ownership of	
2 Information Regarding Contribution, Gran	t, Gift, Loan. Schola	rship, etc. Program	s:	······································	<del></del>	
Check here ► X if the foundation only neguests for funds. If the foundation make	nakes contributions	to preselected chari	table organizations	and does not accep nizations under othe	t unsolicited r conditions,	
a The name, address, and telephone number	er of the nerson to w	hom applications sh	nould be addressed			
a the hame, address, and telephone humbe	or the person to h	mom applications st	iodia de dudiesseu.	•		
<b>b</b> The form in which applications should be s	submitted and inform	nation and materials	they should include	e.		
c Any submission deadlines.				<del></del>		
d Any restrictions or limitations on awards, s	such as by geograph	nical areas, charitab	le fields, kinds of in	stitutions, or other f	actors.	

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or business)	substantial contributor					
Name and address (home or business)  a Paid during the year  THE ASCAP FOUNDATION #51-0181769 ONE LINCOLN PLAZA NEW YORK, NY 10023	NONE	501C3	TO ENHANCE AND PROMOTE MUSIC EDUCATION TO STUDENTS.	25,000.		
Total	<u> </u>	L	<u> </u>	25,000.		
b Approved for future payment			► 3a			

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

			<del></del>	·			
Ente	gross	amounts unless otherwise indicated		ed business income		by section 512, 513, or 514	(e)
		•	(a) Business	<b>(b)</b> Amount	(c) Exclu-	<b>(d)</b> Amount	Related or exempt function income
	_		code	Amount	SION	Amount	(See instructions)
1	Progra	am service revenue.			code		
а			<b></b>		4		
t	·				<del>  </del>		
•					1		
C	·						
•				······································	1		
f							
ç	Fees a	and contracts from government agencies					
2	Memb	ership dues and assessments					
3	Interest	on savings and temporary cash investments					1.
4		nds and interest from securities					
5	Net re	ntal income or (loss) from real estate:					
ā	Debt-f	inanced property					
ŀ	Not de	ebt-financed property					
6	Net rent	tal income or (loss) from personal property					
7	Other	investment income					
8	Gain or	(loss) from sales of assets other than inventory					
9	Net in	come or (loss) from special events					
10	Gross	profit or (loss) from sales of inventory					
11	Other	revenue:					
á	<b>`</b>						
ı							
•							
•							
•							
12	Subto	tal. Add columns (b), (d), and (e)	1		1 1		1.
12	Cubic						
		Add line 12, columns (b), (d), and (e)				13	1.
13	Total.		os.)			13	
13 (See	Total. worksh	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation	· · · · · ·	ishment of Exem	ot Purpo		
13 (See	Total. worksh	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See	Total. worksh	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.
13 (See Par	Total. worksh A XVI- se No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation  Relationship of Activities to the	Accompl	<del></del>		ses	1.

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Di	d the o	rganization directly of in section 501(c) of	or indirectly en f the Code (oth	gage in any of the	he following	with any other	er organization		Yes	No
		political organization		iei than section	301(c)(3) 01g	ariizalioris)	or in section 327,		1	
		from the reporting t	foundation to a	noncharitable e	exempt organ	nization of.				
• •	) Cash							1 a (1)		X
(2) Other assets								1 a (2)		X
b Other transactions									1	.,
•	-	of assets to a nonc		, ,				1 b (1) 1 b (2)	<u> </u>	X
•	(2) Purchases of assets from a noncharitable exempt organization								—	X
	•	al of facilities, equipi		assets				1b (3)	<del> </del>	X
•	•	bursement arranger						1b (4)	<b></b> -	X
• •		s or loan guarantees		o or fundraising	caliaitatiana		•	1b (5)		$\frac{\lambda}{X}$
•	•	ormance of services of facilities, equipme				01/005		1 b (6)	<b> </b> -	$\frac{\hat{x}}{x}$
COI	naing (	or racinities, equipme	int, maning hat	s, other assets,	or paid errip	Oyees				
th	e good:	s, other assets, or s	ervices given b	by the reporting	foundation. I	f the foundat	(b) should always show the fair r tion received less than fair marke other assets, or services receive	et value in	e of	
(a) Line		(b) Amount involved		f noncharitable exem			Description of transfers, transactions, an		ngement	<u></u>
N/A		, and and more	, , , , , , , , , , , , , , , , , , ,		, gameution	<u></u>	and and an animal and an animal and an animal	_ viiaring arrai	.gomont	
			<u></u>							
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	_					<del></del>				
			<del> </del>		<del> </del>			<del></del>		
	_			<del></del>		_	<del></del>			
	$\dashv$							<del></del>		
de	escribe	undation directly or in d in section 501(c) o complete the following	f the Code (oth				xempt organizations 27?	Yes	s X	No
	(a)	Name of organization	on	<b>(b)</b> Туре	of organiza	tion	(c) Description of re	lationship		
N/A										
					<del></del>					
								<del></del>		
	Under p	enalties of perjury, I declar	re that I have exam	ined this return, inclu	ding accompany	ing schedules ar	nd statements, and to the best of my knowledge	edge and belief	f, it is tri	ue,
Sign		_:/ \ \ .	4=					May the this retur	IRS disc	cuss
Here	2	SIB-IVLIER	IF JEM	1	2-78	<u>-12-}_</u>	RUSTEE DES.	preparer (see inst	shown tructions	below
	Signa	ture of officer or trustee			Date		tie /	X	Yes	No
		Print/Type preparer's nar		Freparer's	signature	) <i>]//</i>	Date Check X if	PTIN		
Paid		PAUL L. RHIN		, , , , , , , , , , , , , , , , , , ,	(M)	(mo	2//0//2 self employed	P00003	<u> 3591</u>	
Prepa				NE CPA LLO			Firm's EIN ► 27-	<u>0826735</u>		
Use C	nly		0 HADLEY OMS RIVER		-7577			244.00	.01	
BAA		1 1	OMP KIATE	, NJ 08753	-1511	<del></del>	Phone no /32	-244-89 Form 99		(2011)
-										,

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

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

OMB No 1545 0047

2011

nume or the organization		Employer identification number
GIA MAIONE PRIMA FOUND	ATION INC	45-2504060
Organization type (check one).		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organizatio	o <b>n</b>
	4947(a)(1) nonexempt charitable trust <b>not</b>	treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust trea	ted as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covere Note. Only a section 501(c)(7), (8), (	d by the <b>General Rule</b> or a <b>Special Rule</b> . or (10) organization can check boxes for both the General F	Rule and a Special Rule. See instructions.
General Rule		
X For an organization filing Form 9 contributor (Complete Parts I are	990, 990-EZ, or 990-PF that received, during the year, \$5,0ind II.)	00 or more (in money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi), a	tion filing Form 990 or 990-EZ that met the 33-1/3% suppor nd received from any one contributor, during the year, a co n 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complet	ontribution of the greater of (1) \$5,000 or
total contributions of more than	10) organization filing Form 990 or 990-EZ that received fro \$1,000 for use exclusively for religious, charitable, scientific ren or animals. Complete Parts I, II, and III	m any one contributor, during the year, c, literary, or educational purposes, or
contributions for use exclusively	10) organization filing Form 990 or 990-EZ that received fro for religious, charitable, etc, purposes, but these contribution the total contributions that were received during the year	ions did not total to more than \$1,000 for an <i>exclusively</i> religious, charitable, etc.
purpose Do not complete any o	f the parts unless the General Rule applies to this organiza	ition because it received nonexclusively
religious, charitable, etc, contrib	utions of \$5,000 or more during the year	<b>►</b> \$
990-PF) but it must answer 'No' on I	covered by the General Rule and/or the Special Rules doe Part IV, line 2, of its Form 990, or check the box on line H on meet the filing requirements of Schedule B (Form 990,	of its Form 990-EZ or on Part I, line 2, of its
BAA For Paperwork Reduction Act 990EZ, or 990-PF.	t Notice, see the Instructions for Form 990,	Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2011)

Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2011)	Page	1 of 1 of Part 1
	IONE PRIMA FOUNDATION INC		r identification number 504060
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp		304000
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GIA PRIMA 4141 INDIAN BAYOU NO. DESTIN, FL 32541	\$100,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

Person Payroll Noncash

(Complete Part II if there is a noncash contribution.)

of Part II

Name of organization

GIA MAIONE PRIMA FOUNDATION INC

Employer identification number

45-2504060

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
N/A			<del> </del>
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	<del> </del>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	<del> </del>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule E	(Form 990, 990-EZ, or 990-PF) (2011)		Pa	ge 1 to	1 of Part III
Name of organ GIA MA	IONE PRIMA FOUNDATION INC	_		Employer (d 45-250	entification number 4060
Part III	Exclusively religious, charitable, e organizations that total more than	tc, individual contributions, \$1,000 for the year.Comp	ons to section! lete cols (a) through	501(c)(7), (8), on (e) and the follow	or (10) ving line entry
	For organizations completing Part III, enter contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	Enter this information once. Se		<b>►</b> \$_	N/A
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of h	
	N/A				
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relations	hip of transferor t	o transferee
<del>- (a)</del>	(4)	(2)	<del></del>		
(a) No. from <u>Part I</u>	(b) Purpose of gift	(c) Use of gift		(d) Description of h	

		(e) Transfer of gift		
<u> </u>	Transferee's name, add	ress, and ZIP + 4	Relationship of transferor to transferee	
3)	(b)	(c)	(d)	
from	Purpose of gift	Use of gift	Description of how gift is held	

		(e)		
	Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a)	(b)	(c)	(d)	
o. from Part I	Purpose of gift	Use of gift	Description of how gift is held	

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
	<del></del>

2011 FEDERAL STATEMENTS  CLIENT 2485 GIA MAIONE PRIMA FOUNDATION INC		PAGE 1	
		45-2504060	
2/09/12		12.04PM	
STATEMENT 1 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES	<b>1</b>		
AMORTIZATION	(A) (B) NET EXPENSES INVESTMENT ADJI PER BOOKS INCOME NET I  \$ 330.  TOTAL \$ 330. \$ 0. \$	(C) (D) USTED CHARITABLE NCOME PURPOSES  N/A  0. \$ 0.	
STATEMENT 2 FORM 990-PF, PART II, LINE 1: OTHER ASSETS	5		
NET INTANGIBLE ASSETS	TOTAL \$ 9,5	FAIR MARKET VALUE 579. \$ 0.	
STATEMENT 3 FORM 990-PF, PART VII-A, LIN SUBSTANTIAL CONTRIBUTOR	IE 10 RS DURING THE TAX YEAR		
NAME OF SUBSTANTIAL CONT	RIBUTOR ADDRESS OF SUBSTANTIAL C	CONTRIBUTOR	
GIA PRIMA	4141 INDIAN BAYOU NO. DESTIN, 32541		