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Form 990-PF

Department of the Treasury Internal Revenue Service

EXTENDED TO AUGUST 17, 2015 Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

FOR C	alendar year 2014 or tax year deginning		, and ending		
	ne of foundation			A Employer identification	n number
	IA MAIONE PRIMA FOUNDATIO	N INC			
_ C	O ANTHONY J SYLVESTER			45-2504060)
Num	ber and street (or P O box number if mail is not delivered to street a	address)	Room/suite	B Telephone number	
_ 2	10 PARK AVENUE 2ND FLOOR			973-302-97	700
City	or town, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is i	pending, check here
_ F:	LORHAM PARK, NJ 07932				
G C	heck all that apply Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return		•	
	Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test, omputation
H C	heck type of organization X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	atus was terminated
		Other taxable private founda		under section 507(b)(1	
I Fa	ir market value of all assets at end of year J Accounting	ng method X Cash	Accrual	F If the foundation is in a	60-month termination
(fre		her (specify)		under section 507(b)(1	
•		mn (d) must be on cash l	basis.)		
Pa	rt Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received			N/A	
ł	2 Check X if the foundation is not required to attach Sch. B				
i	3 Interest on savings and temporary cash investments	20.	20.		STATEMENT 1
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	62 Net gain or (loss) from sale of assets not on line 10			,,,,-,	
Jue	B Gross sales price for all				
Revenue	7 Capital gain net income (from Part IV, line 2)		0.		1 12,11,144 1. 1.1111 1 - 1 11 1 1
æ	8 Net short-term capital gain				
	9 Income modifications	<u> </u>			
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				- 1 " " " " " " " " " " " " " " " " " "
	c Gross profit or (loss)				
	11 Other income	503.	503.		STATEMENT 2
	12 Total Add lines 1 through 11	523.	523.		
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
es		17,392.	0.		17,392.
ē	b Accounting fees				
쭚	c Other professional fees CENTED				
Ş.	17 Interest				
ati	18 Taxes 19 Depreciation of a 2015				
ist	19 Depreciation and depletion 1 \$ 2015				
를	20 Occupancy				
Adı	21 Travel, conferences-and meetings				
Ę	22 Printing and publications				
Operating and Administrative Expenses	23 Other expenses STMT 4	10,145.	95.		10,050.
뺥	24 Total operating and administrative				
)er	expenses Add lines 13 through 23	27,537.	95.		27,442.
ŏ	25 Contributions, gifts, grants paid	0.			0.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	27,537.	95.	1	27,442.
_	27 Subtract line 26 from line 12				
	Excess of revenue over expenses and disbursements	<27,014.	>		
	b Net investment income (if negative, enter -0-)		428.	· · · · · · · · · · · · · · · · · · ·	- I
	c Adjusted net income (if negative, enter -0-)			N/A	
	1				

GIA MAIONE PRIMA FOUNDATION INC 45-2504060 Form 990-PF (2014) C/O ANTHONY J SYLVESTER Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (b) Book Value (c) Fair Market Value (a) Book Value 91,588. 110,345. 91,588. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less allowance for doubtful accounts 4 Pledges receivable ▶ Less allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ► ORGANIZATIONAL COST) 8,257. 16 Total assets (to be completed by all filers - see the 118,602 91,588. 91,588. instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) **▶** X Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Assets or Fund Balances** 118,602. 91,588. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds Éet 118,602. 91,588. 30 Total net assets or fund balances 118,602. 91,588 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

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)	1	118,602.
2	Enter amount from Part I, line 27a	2	<27,014.
	Other increases not included in line 2 (itemize)	3	0.
_	Add lines 1, 2, and 3	4	91,588.
	Decreases not included in line 2 (itemize)	5	0.
	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	91,588.

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C/O ANTHONY J SYLVESTER

Part IV Capital Gains	and Losses	s for Tax on In	vestment	Income					
(a) List and desc 2-story brick w	cribe the kind(s) arehouse, or cor	of property sold (e g nmon stock, 200 shs	, real estate, MLC Co)		`P	How acquired - Purchase - Donation	(c) Date (mo ,	e acquired day, yr)	(d) Date sold (mo , day, yr)
1a									
<u>b</u> <u>NC</u>	NE								
<u>c</u>			-						· -
<u>d</u>									
<u>e</u>	/f) Deprey	ciation allowed	(n) Cos	t or other basis			(b)	Gain or (loss)	\\
(e) Gross sales price		llowable)		xpense of sale			(e) plu	us (f) minus (<u>(g)</u>
<u>a</u>		· -						 -	
<u>b</u>	 	<u>-</u>		<u> </u>		-		·- <u>-</u>	
<u>c</u>	 								
е	-								<u> </u>
Complete only for assets showi	ng gain in colum	n (h) and owned by t	he foundation	on 12/31/69			(I) Gains (Col (h) gain	minus
(i) F M V as of 12/31/69		usted basis 12/31/69	(k) Ex	cess of col (I)			ol (k), but	not less that s (from col. (n -0-) or
a									
<u></u>									
C						·			***************************************
<u>d</u>									
е									
2 Capital gain net income or (net c	apital loss)	{ If gain, also enter If (loss), enter -0-	in Part I, line i	7 7	}	2			
3 Net short-term capital gain or (lo	ss) as defined in	•					_		
If gain, also enter in Part I, line 8	, column (c)	30000013 1222(3) 411	u (u)		}	3			
Part V Qualification U	Jnder Secti	on 4940(e) for	Reduced	Tax on Net	Inv	estment In	come		<u> </u>
(For optional use by domestic private									
•						,			
If section 4940(d)(2) applies, leave	this part blank								
Was the foundation liable for the sec	ction 4942 tax or	n the distributable am	ount of any ye	ar in the base pei	rıod?				Yes X No
If "Yes," the foundation does not qua									
1 Enter the appropriate amount in (a)	each column to		istructions bet	ore making any e					(d)
Base periód years	una un) Ac	(b) Jjusted qualifying dis	tributions	Net value of no	(c) Incha	ritable-use asset	ts	Distrib	oution ratio vided by col. (c))
Calendar year (or tax year beginn 2013	ing in)	-,	0.			108,58	L	(001 (0) 010	• 000000
2012			4,926.			65,80			.074863
2011			5,000.			81,30			.307473
2010									
2009									
								1	
2 Total of line 1, column (d)							2	ļ	.382336
3 Average distribution ratio for the			on line 2 by 5,	or by the number	of ye	ars			107445
the foundation has been in exist	ence if less than	5 years					3		.127445
4 Enter the net value of noncharita	ble-use assets fo	or 2014 from Part X,	line 5				4		99,452.
									-
5 Multiply line 4 by line 3							5	-	12,675.
6 Enter 1% of net investment inco	me (1% of Part I	, line 27b)					6		4.
7 Add lines 5 and 6							7		12,679.
Add illes 3 alid 0							'	-	
8 Enter qualifying distributions fro			46	lata that ===4		0/ **** ***	8	1	27,442.
If line 8 is equal to or greater that See the Part VI instructions	in line 7, check ti	ne dox in Part VI, line	io, and comp	iete tilat part usin	iga 1	% lax rate			

GIA MAIONE PRIMA FOUNDATION INC

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see	instru	ctio	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	<u> </u>			4.
	of Part I, line 27b					
	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	ļ	-		4.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	. 			4.
	Credits/Payments					
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a					
	Exempt foreign organizations - tax withheld at source	1				
	Tax paid with application for extension of time to file (Form 8868)	1				
	Backup withholding erroneously withheld 6d 6					^
7	Total credits and payments Add lines 6a through 6d	7	 			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	+			1
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	+			4.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	+			
	Enter the amount of line 10 to be Credited to 2015 estimated tax	11				
	rt VII-A Statements Regarding Activities				Yes	Na
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	IN		1	162	X
	any political campaign?	12		1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition			1b		
	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials published	ea or				
	distributed by the foundation in connection with the activities.			1.		х
	Did the foundation file Form 1120-POL for this year?			10		- 1
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\bigsim \text{\$0.} \text{\$(2) On foundation managers} \bigsim \text{\$\$}\$					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-				
t	managers > \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	•	Х
_	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		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	1	N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
	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					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	e law				
	remain in the governing instrument?			6	<u>X</u>	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XI	/		7	X	-,,,
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	NJ					
t	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 calc	endar				
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? 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

GIA MAIONE PRIMA FOUNDATION INC C/O ANTHONY J SYLVESTER 45-2504060 Form 990-PF (2014) Page 5 Part 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 X section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? Х If "Yes," attach statement (see instructions) 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ► ANTHONY J SYLVESTER Telephone no > 973 - 302 - 9700ŊJ Located at ▶ 210 PARK AVENUE 2ND FLOOR, FLORHAM PARK, ZIP+4 ▶07932 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A ▶ 15 and enter the amount of tax-exempt interest received or accrued during the year Yes 16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank. No securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly) Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (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 Yes X No for the benefit or use of a disqualified person)? (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 Yes X No termination of government service, if terminating within 90 days) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations Х 1b section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 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 Х 1c before the first day of the tax year beginning in 2014? 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 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning __ Yes X No before 2014? If "Yes," list the years ▶ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A 2b statement - see instructions) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year?

b if "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

Form 4720, to determine if the foundation had excess business holdings in 2014.)

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

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

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X

3ь

4a

N/A

?	5	0	4	0	6	0	Page 6

Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No	ŀ	
(2) Influence the outcome of any specific public election (see section 4955), of	or to carry on, directly or indire		1		
any voter registration drive?			s X No	į.	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
4945(d)(4)(A)? (see instructions)		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?		Ye	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described i	n Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	iere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?	N	/A Ye	s L No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		ļ	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 s		Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	1		
List all officers, directors, trustees, foundation managers and their	compensation.		***************************************		
Tigo an onicord, an octord, tradicord, realization managers and treat	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) F	xnense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	accou allov	xpense nt, other vances
ANTHONY SYLVESTER	PRESIDENT, TR	EASURER T	RUSTEE		
210 PARK AVENUE 2ND FLOOR	j				
FLORHAM PARK, NJ 07932	10.00	0.	0.		0.
RICHARD KNIGHT	TRUSTEE				
210 PARK AVENUE 2ND FLOOR					
FLORHAM PARK, NJ 07932	10.00_	0.	0.		0.
JINDA CONSOLAZIO	SECRETARY, TR	USTEE			
210 PARK AVENUE 2ND FLOOR					
FLORHAM PARK, NJ 07932	10.00	0.	0.	<u> </u>	0.
	-				
A A A A A A A A A A A A A A A A A A A	luded on line 4). If some	anton UNIONE II		<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE."	(d) Contributions to	(a) F	Ynense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	and deferred	accon	xpense nt, other
NONE	devoted to position		compensation	allov	wances
NONE	1	1		ľ	
				+	
	4				
		 	<u> </u>	+	
	†				
				†	
	1				
	-			†	
	1				
Total number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·				0
- Ctal manifest of other employees paid of the question					

GIA MAIONE PRIMA FOUNDATION INC		
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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
Total number of others receiving over \$50,000 for professional services		> (
Part IX-A Summary of Direct Charitable Activities		·
List the foundation's four largest direct charitable activities during the tax year. Include relevant station number of organizations and other beneficiaries served, conferences convened, research papers pro-	stical information such as the duced, etc	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of	n lines 1 and 2	Amount
1 N/A		

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0.

All other program-related investments. See instructions

Total. Add lines 1 through 3

C/O ANTHONY J SYLVESTER

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities 1a 100,966. b Average of monthly cash balances 1b 10 c Fair market value of all other assets 100,966. 1 d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 2 2 Acquisition indebtedness applicable to line 1 assets 100,966 3 Subtract line 2 from line 1d 1,514 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 99,452.Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 5 4,973. Minimum investment return Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(I)(3) and (I)(5) private operating foundations and certain foreign organizations check here
and do not complete this part) 4,973. Minimum investment return from Part X, line 6 4. 2a Tax on investment income for 2014 from Part VI. line 5 2a b Income tax for 2014 (This does not include the tax from Part VI) 2b 2c c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 4,969 5 Add lines 3 and 4 5 6 6 Deduction from distributable amount (see instructions) 4,969. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 27,442. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 16 b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the 3a a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule) 3ь 27,442. Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 income Enter 1% of Part I, line 27b 27.438. 6 Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,		· · · · · · · · · · · · · · · · · · ·		
line 7		u_1,		4,969.
2 Undistributed income, if any, as of the end of 2014			_	
a Enter amount for 2013 only	11 111 1 111, 111		0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2014			· · · · · · · · · · · · · · · · · · ·	- 11 111111 1111 1111 1
a From 2009				
b From 2010	1			
c From 2011 17,265.	1			
d From 2012 1,636.	1			
e From 2013				
f Total of lines 3a through e	18,901.			
4 Qualifying distributions for 2014 from				
Part XII, line 4 ▶\$ 27, 442.				
a Applied to 2013, but not more than line 2a			0.]
b Applied to undistributed income of prior	, , , , , , , , , , , , , , , , , , ,			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	., ., ., ., ., ., ., ., ., ., ., ., ., .	41117		
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				4,969.
e Remaining amount distributed out of corpus	22,473.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))				
6 Enter the net total of each column as indicated below.	41 274			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	41,374.			
b Prior years' undistributed income. Subtract		_		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2013 Subtract line			0.	
4a from line 2a Taxable amount - see instr			V •	
f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2015		144-		•
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions) 8 Excess distributions carryover from 2009		1. pp 1411111 - 1. 1111 - 1. 1111 - 1. 1111	· · · · · · · · · · · · · · · · · · ·	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Subtract lines 7 and 8 from line 6a	41,374.			
10 Analysis of line 9		Table 11/1 1 Indian		
a Excess from 2010				
b Excess from 2011 17, 265	.]			
c Excess from 2012 1,636				
d Excess from 2013	1			
e Excess from 2014 22, 473				<u> </u>
423581 11-24-14				Form 990-PF (2014)

GIA MAIONE PRIMA FOUNDATION INC C/O ANTHONY J SYLVESTER Form 990-PF (2014) 45-2504060 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 2 a Enter the lesser of the adjusted net Prior 3 years Tax year (a) 2014 (b) 2013 (c) 2012 (d) 2011 (e) Total income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 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 (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🔣 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

GIA MAIONE PRIMA FOUNDATION INC

Form 990-PF (2014) C/O ANTHONY J SYLVESTER

Part XV Supplementary Information (continued)

45-2504060

Page 11

Carried Supplies	511 (00/1til/1000)			
3 Grants and Contributions Paid During the	Year or Approved for Future F	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
NONE				
		- · · · · · · · · · · · · · · · · · · ·		
		!		
			!	
		,		
				· · · · · · · · · · · · · · · · · · ·
			,	
Total			▶ 3a	0.
b Approved for future payment				
NONE				
				
				-
		·		
Total			_ ▶ 3b	0

ter gross amounts unless otherwise indicated	Unfelated	business income		d by section 512, 513, or 514	(e)
-	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
Program service revenue	code	Amount	sion code	Amount	function income
B	[
]					
·	1 1		I I .		
Fees and contracts from government agencies					
Nembership dues and assessments			I I		
nterest on savings and temporary cash					
nvestments			14	20.	
Dividends and interest from securities					
let rental income or (loss) from real estate	1///				· · · · · · · · · · · · · · · · · · ·
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal			 		
property					
Other investment income	- -	· · · · · · · · · · · · · · · · · · ·	 		
Gain or (loss) from sales of assets other	 		 		· ———
han inventory					
let income or (loss) from special events		· · · · · · · · · · · · · · · · · · ·	 		
Gross profit or (loss) from sales of inventory	ļ———		}		
Other revenue					
DOVATOTEC			15	503.	
	(1		
			+		
			1 1		
B			+		-
' 		0.		523.	
Subtotal Add columns (b) (d) and (e)			<u> </u>		5.
Subtotal Add columns (b), (d), and (e)	<u>-</u>				
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculate	ons)				
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations Relationship of Activity	ties to the Acco			····	
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations Relationship of Activity	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activities. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activity e No. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations. Relationship of Activities. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculationart XVI-B Relationship of Activities Revo. Explain below how each activity for which	ties to the Accor	column (e) of Part XVI-A		····	plishment of

Form 990-PF (2014) Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the or	roanization directly or indir	ectly engage in any o	of the followin	g with any other organization	on described in section	on 501(c) of	Yes	s No
		-			7, relating to political organ		` '		
а		from the reporting founda			• •				
	(1) Cash	·	_				1:	(1)	X
	(2) Other	r assets					[(2)	X
b	Other tran	sactions							
	(1) Sales	s of assets to a noncharitat	ole exempt organizat	on			11	(1)	X
	(2) Purci	hases of assets from a nor	ncharitable exempt o	rganization			11	(2)	X
	(3) Renta	al of facilities, equipment, o	or other assets				11	(3)	X
	(4) Reim	bursement arrangements					11	(4)	X
	(5) Loan	s or Ioan guarantees					11	(5)	X
	(6) Perfo	ormance of services or mei	mbership or fundrais	ing solicitatio	ns		11	(6)	X
		of facilities, equipment, mai	-				 -	C	<u> </u>
d							arket value of the goods, othe		
		• • •			ed less than fair market valu	ie in any transaction	or sharing arrangement, show	ın	
<i>(-</i>)		d) the value of the goods, o				1 (4)			
(a)L	ine no	(b) Amount involved	(c) Name of		exempt organization	(0) Description	of transfers, transactions, and shari	g arrangen	nents
				N/A					
									
									
							- .		
					····				
	_								
					· · · · · · · · · · · · · · · · · · ·				
				-					
	<u> </u>								
		-							
2a	Is the fou	ndation directly or indirect	lv affiliated with, or r	elated to, one	or more tax-exempt organi	zations described			
		501(c) of the Code (other	=		· ·			es 🖸	X No
b		omplete the following sche		(-// -			_		
		(a) Name of org			(b) Type of organization	(c) Description of relationship		
		N/A							
							,		
								•	
					g accompanying schedules and taxpayer) is based on all inform		1 May the	RS discuss	s this
	gn 📐	pellet, it is tide, correct, and corr	Tiplete Declaration of pre	parer (other than	r Laxpayer) is based off an inition	- \ 77	shown b	th the preparation (see in	
He	ere 📗	1119			8-1-13	YIISI	all X	res 🗌	_ No
	Sigi	hature of officer or trustee			Date	Title			
		Print/Type preparer's na		Preparer's si	grature .	Date /	Check if PTIN		
_		CHRISTOPHE	R C	- ZZ		7/2/1-	self- employed		_
	aid	PETERMANN			7 -	7 2/1	P000)
	eparer	Firm's name ► O'C	ONNOR DAV	IES/L	LP ´	•	Firm's EIN ► 27-172	3945	
U	se Only								
		Firm's address ► 66			2		4010100		2.0
		I NE	W YORK, N	Y 1002	<u> </u>		Phone no (212)28		
							Form	990-PF	- (2014)

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	IPORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE	(<i>F</i> REVE PER E	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY WELLS FARGO		19.	19.	
TOTAL TO PART I, LINE 3		20.	20.	
FORM 990-PF	OTHER I	NCOME		STATEMENT 2
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
ROYALTIES		503	503	•
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	503	503	•
FORM 990-PF	LEGAI	L FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOMI		
SHERMAN WELLS SYLVESTER & STAMELMAN LLP	17,392	. (· ·	17,392.
TO FM 990-PF, PG 1, LN 16A	17,392	. (0.	17,392.
FORM 990-PF	OTHER I	EXPENSES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOM		
ORGANIZATIONAL COST INSURANCE EXPENSE BANK FEES	8,257 1,793 95		0. 0. 5.	8,257. 1,793. 0.
TO FORM 990-PF, PG 1, LN 23	10,145	9:	<u> </u>	10,050.
		= ==========		

Form **8868** (Rev. January 2014)

Department of the Treasury Internal Revenue Service Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

ightharpoons X If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs.gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or GIA MAIONE PRIMA FOUNDATION INC print 45-2504060 C/O ANTHONY J SYLVESTER File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for filing your 210 PARK AVENUE 2ND FLOOR return See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. FLORHAM PARK, NJ 0 | 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990-T (corporation) Form 990 or Form 990-EZ 01 07 Form 1041-A 08 Form 990-BL Form 4720 (individual) Form 4720 (other than individual) 09 Form 5227 Form 990-PF 04 10 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 8870 Form 990-T (trust other than above) 12 ANTHONY J SYLVESTER The books are in the care of ▶ 210 PARK AVENUE 2ND FLOOR - FLORHAM PARK, NJ 07932 Telephone No. ► 973-302-9700 Fax No. • If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2015 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2014 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 0. nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 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.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

instructions