

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



EXTENDED TO NOVEMBER 15, 2016 Return of Private Foundation

Form 990-PF Department of the Treasury Internal Revenue Service

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	alen	dar year 2015 or tax year beginning		, and ending				
Name of foundation A Employer identification number									
	G	ΙA	MAIONE PRIMA FOUNDATIO						
	C	0\	ANTHONY J SYLVESTER			45-2504060			
	Num	ber a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number			
	2	10	PARK AVENUE 2ND FLOOR			973-302-97	00		
	City	or to	own, state or province, country, and ZIP or foreign p		C If exemption application is p	ending, check here			
			RHAM PARK, NJ 07932						
	G C	heck	all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here		
			Final return	Amended return					
			Address change	Name change		2 Foreign organizations me check here and attach co	eting the 85% test, mputation		
	H C	heck	type of organization X Section 501(c)(3) ex	empt private foundation		 E If private foundation stat	tus was terminated		
		Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda		under section 507(b)(1)			
	I Fa	ır ma	rket 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	om F		her (specify)		under section 507(b)(1)			
	•	\$	50 , 845 . (Part I, colu	mn (d) must be on cash b	oasis.)		· · · <u> </u>		
	Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for chantable purposes		
			necessanly equal the amounts in column (a))	expenses per books	income	income	(cash basis only)		
		1	Contributions, gifts, grants, etc., received	140,000.		N/A			
		2	Check In the foundation is not required to attach Sch. B						
		3	Interest on savings and temporary cash investments	9.	9.	1	STATEMENT 1		
		4	Dividends and interest from securities						
		5a	Gross rents						
<u> </u>		b	Net rental income or (loss)	, H	·	,,,,	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	<u>.</u>	6a	Net gain or (loss) from sale of assets not on line 10						
	5	b	Gross sales price for all assets on line 6a						
Revenue	ě	7	Capital gain net income (from Part IV, line 2)		0.				
	-	8	Net short-term capital gain	-					
		9 Income modifications Gross sales less returns			***************************************				
G.	,	_	and allowances						
Ç)		Less Cost of goods sold		······				
Ź			Gross profit or (loss)	511.	511.		STATEMENT 2		
2		11	Other income	140,520.	520.		DIGITATION E		
SCANNEU CANNEU	\vdash	<u>12</u> 13	Total. Add lines 1 through 11	0.	0.		0.		
		14	Compensation of officers, directors, trustees, etc Other employee salaries and wages				-		
VOV			Pension plans, employee benefits						
<u> </u>	ွန္မ		Legal fees STMT 3	60,089.	0.		60,089.		
00	eus		Accounting fees STMT 4	7,675.	0.	770	7,675.		
2	Š		Other professional fees STMT 5	2,400.	Q.	RECEIVEL	2,400.		
2016	ě	17	Interest		4		70		
	ati	18	Taxes		3	OCT 2.5 2016	701 101		
	ist	19	Depreciation and depletion		ju		(6)		
	<u>ā</u> :	20	Occupancy			MARTIN I	7E		
	Ad	21	Travel, conferences, and meetings	398.	0	CODEN, U	398.		
	Pue	22	Printing and publications						
	ng i	23	Other expenses STMT 6	6,184.	0.		6,184.		
	Operating and Administrative Expense	24	Total operating and administrative	:	_				
	be		expenses. Add lines 13 through 23	76,746.	0.	ļ	76,746. 104,517.		
			Contributions, gifts, grants paid	104,517.			104,517.		
		26	Total expenses and disbursements.	101 000	•		101 262		
			Add lines 24 and 25	181,263.	0.		181,263.		
			Subtract line 26 from line 12	40 740					
			Excess of revenue over expenses and disbursements	-40,743.	520.				
			Net investment income (if negative, enter -0-)		320.	N/A			
		C	Adjusted net income (if negative, enter -0-)	F		41/47	L		

45-2504060

Page 2

Form **990-PF** (2015)

C/O ANTHONY J SYLVESTER

Form 990-PF (2015)

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 (c) Fair Market Value (a) Book Value (b) Book Value 91,588. 50,845. 50,845. 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 denreclation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 50,845. 91,588. 50,845. 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) ightharpoonsFoundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. **Net Assets or Fund Balances** 91,588. 50,845 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 50,845. 91,588. 30 Total net assets or fund balances 91,588 50,845 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 91,588. (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) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF (2015)

523521 11-24-15

C/O ANTHONY J SYLVESTER

45-2504060

Page 3

Form **990-PF** (2015)

2-story brick w	(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.)				` P	How ac - Purc - Don		(c) Date (mo , d	acquired ay, yr)	(d) Date sold (mo , day, yr)	
<u>1a</u>	ATT2				-						
	NE				-						
d d			··· · · - · ·		+						
e									-		
(e) Gross sales price	(f) [Depreciation allowed (or allowable)	1.00	t or other basis xpense of sale				(h) Gain or (loss) (e) plus (f) minus (g)			
<u>a</u>											
<u>b</u>										·	
<u>c</u>	<u> </u>				-		-				
d e	 	·									
Complete only for assets showi	no gain in e	column (h) and owned by t	l the foundation	on 12/31/69			(1)	Gains (C	ol (h) gain	minus	
	, 	j) Adjusted basis		cess of col (I)	\neg	(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or					
(i) FMV as of 12/31/69	,	as of 12/31/69		col (j), if any				Losses	(from col (h))	
a	-	·······					· · · · · · · · · · · · · · · · · · ·	-			
b											
C											
d											
<u>e</u>											
2 Capital gain net income or (net c	apital loss)		r in Part I, line 7 - in Part I, line 1	7 7	}	2					
3 Net short-term capital gain or (lo	ss) as defii	•									
If gain, also enter in Part I, line 8			- (-)) l						
If (loss), enter -0- in Part I, line 8					لل	3					
Part V Qualification U							nent Inc	<u>ome</u>			
(For optional use by domestic privat	e foundation	ons subject to the section 4	1940(a) tax on	net investment ir	ncome	e)					
If section 4940(d)(2) applies, leave t	this part bla	nk									
			accent of any co	or in the base no	riod?					Yes X N	
Was the foundation liable for the sec If "Yes," the foundation does not qua					1100 /					165 [2k] N	
1 Enter the appropriate amount in					entries						
(a) Base period years		(b)			(c)			T	District	(d)	
Base period years Calendar year (or tax year beginn	ına in)	Adjusted qualifying dis	tributions	Net value of no			-use assets			oution ratio ided by col (c))	
2014	,	2	7,438.			9	9,452	•		.27589	
2013			0.				8,581			.00000	
2012			4,926.				5,800			.07486	
2011		2	5,000.	·		8	31,308	•		.30747	
2010		_ 									
								1		65.000	
2 Total of line 1, column (d)	_							2		.65822	
3 Average distribution ratio for the	-		on line 2 by 5,	or by the number	r of ye	ears		1	}	16455	
the foundation has been in existe	ence it less	than 5 years						3		.16455	
4 Enter the net value of noncharita	ble-use ass	sets for 2015 from Part X,	line 5					4		73,091	
								ļ	}		
5 Multiply line 4 by line 3								5		12,028	
										_	
6 Enter 1% of net investment incom	me (1% of	Part I, line 27b)						6_	ļ	5	
								_	}	10 000	
7 Add lines 5 and 6								7	<u> </u>	12,033	
8 Enter qualifying distributions from	m Part XII,	line 4						8		181,263	
If line 8 is equal to or greater tha See the Part VI instructions			1b, and comp	lete that part usii	ng a 1	% tax	rate				

	1990-PF (2015) C/O ANTHONY J SYLVESTER			2504			'age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)	, or 4	948 ·	see ii	nstru	ction	IS)
1ą	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>5.</u>
	of Part I, line 27b						
E	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				<u>0.</u>
	Add lines 1 and 2		3				5.
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				5.
6	Credits/Payments						
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 6a						
b	Exempt foreign organizations - tax withheld at source						
C	Tax paid with application for extension of time to file (Form 8868)						
	Backup withholding erroneously withheld 6d						
7		-	7	Ĺ			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				5.
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 2016 estimated tax ▶ Refund	ed 🕨	11				
	art VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or in	itervene	เท			Yes	No
	any political campaign?				1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the d	efinition)?		1b		X
-	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials p					- 11	
	distributed by the foundation in connection with the activities						
c	Did the foundation file Form 1120-POL for this year?				10		_X_
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
•	(1) On the foundation ► \$ O . (2) On foundation managers ► \$	0.					
ρ	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	on	-				
	managers ▶ \$ 0 •						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		<u> </u>
-	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 incorporate	ration,	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
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	I/A	4b		
	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						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with	the stat	e law				
	remain in the governing instrument?				6	Х	
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 X	/		7	X	
•	, , , , , , , , , , , , , , , , , , , ,						
82	Enter the states to which the foundation reports or with which it is registered (see instructions)						
-	NJ						
ŀ	o 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 cal	endar				
,	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV				9		Х
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses						<u> </u>	X

Form	1990-PF (2015) C/O ANTHONY J SYLVESTER 45-250	4060	1	Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
	The state of the s		Yes	No
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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
12	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
10	Website address ► N/A			
1.6	The books are in care of ► ANTHONY J SYLVESTER Telephone no ► 973-3	02-9	700	
.7	Located at ►210 PARK AVENUE 2ND FLOOR, FLORHAM PARK, NJ ZIP+4 ►0	7932		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
10	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
D:	foreign country art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
1 .	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
4.	a During the year did the foundation (either directly or indirectly)	*****	1	
16	(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)			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes A No X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1		
	(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)?			
	(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	ĺ	X
	Organizations relying on a current notice regarding disaster assistance check here		1	
	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 2015?	10	ĺ	X
9	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	*****		
2	defined in section 4942(j)(3) or 4942(j)(5))			
	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015?			
	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			
	statement - see instructions) N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	•		
	• In the provisions of section 4542(a/L) and soming applicate only of the year and y			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
·	during the year?			
	b if "Yes," did it have excess business holdings in 2015 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 2015.) N/A	36		
A	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1 -	X
	bid the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
_		Form 99	0-PF	(2015)

2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none,	enter "NONE."		
(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	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000			•	0

Form 990-PF (2015) C/O ANTHONY J SYLVESTER	45	5-2 <u>504</u> 0)60 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter	'NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service		(c) Compensation
SHERMAN WELLS SYLVESTER & STAMELMAN LLP	LEGAL AND		
210 PARK AVENUE, FLORHAM PARK, NJ 07932	ADMINISTRATIVE	SERVI	60,089.
	-		
	-		
			0
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 statistic number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the		Expenses
1 N/A			
T A/A			
	· · · · · · · · · · · · · · · · · · ·		
2			
3			
-		_	
			
4	-	\dashv	
		<u> </u>	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line.	and 1 and 0		Amount
1 N/A	lies I aliu 2		Alliount
1_N/A			
 		\neg	
2			
		_	
All other program-related investments. See instructions		_	
3			
		1	

Total. Add lines 1 through 3

C/O ANTHONY J SYLVESTER

45-2504060

Page 8

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, see Instructions.)
1	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	0.
þ	Average of monthly cash balances	1b	74,204.
¢	Fair market value of all other assets	10	
þ	Total (add lines 1a, b, and c)	<u>1d</u>	74,204.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	74,204.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,113.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	73,091.
<u>6</u>	Minimum investment return. Enter 5% of line 5	6	3,655.
P	art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations are foreign organizations check here ▶ ☐ and do not complete this part.)	id certain	1
1	Minimum investment return from Part X, line 6	1	3,655.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	20	5.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	3,650.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,650.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,650.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	181,263.
b	Program-related investments - total from Part IX-B	1b	
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	181,263.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	5.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	181,258.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies 1	for the section

Form **990-PF** (2015)

Form 990-PF (2015)

C/O ANTHONY J SYLVESTER

Part XIII Undistributed Income (se	ee instructions)			
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2014	2014	2015
1 Distributable amount for 2015 from Part XI, line 7				3,650.
2 Undistributed income, if any, as of the end of 2015			_	
a Enter amount for 2014 only			0.	
ь Total for prior years		0.		
3 Excess distributions carryover, if any, to 2015				, , , , , , , , , , , , , , , , , , , ,
a From 2010				
b From 2011 17,265.				
c From 2012 1,636.				
d From 2013				
e From 2014 22,473.				
f Total of lines 3a through e	41,374.			
4 Qualifying distributions for 2015 from				
Part XII, line 4 ▶ \$ 181, 263.				
a Applied to 2014, but not more than line 2a			0.	- 141,,! - Н. т
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		Mary 1 Mary 1
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				3,650.
e Remaining amount distributed out of corpus	177,613.	n		
5 Excess distributions carryover applied to 2015 (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:	218,987.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	210/307.			
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 2014 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2015 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				0.
7 Amounts treated as distributions out of	-			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			· ····
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.		44 1	
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	218,987.	<u> </u>		
10 Analysis of line 9				
a Excess from 2011 17, 265. b Excess from 2012 1, 636.				
b Excess from 2012 1,636.				
c Excess from 2013				
d Excess from 2014 22, 473.				
e Excess from 2015 177, 613.				

GIA MAIONE PRIMA FOUNDATION INC C/O ANTHONY J SYLVESTER 45-2504060 Page 10 Form 990-PF (2015) 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 2015, enter the date of the ruling 4942(J)(5) 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2015 (b) 2014 (c) 2013 (d) 2012 (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 hatail 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

3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		· · · · · · · · · · · · · · · · ·
a Paid during the year				
ONNIE KOLE FOUNDATION	NONE	PC	GENERAL SUPPORT	
P.O. BOX 5519				
SLIDELL, LA 70469				5,00
NEW ORLEANS JAZZ & HERITAGE	NONE	PC	GENERAL SUPPORT	
FOUNDATION INC			1	
1205 N. RAMPART ST				
NEW ORLEANS, LA 70115				75,000
NEW ORLEANS ACADEMY OF FINE ARTS	NONE	PC	GENERAL SUPPORT	
5256 MAGAZINE STREET				
NEW ORLEANS, LA 70115				50
SAVE OUR CATS AND KITTENS INC	NONE	PC	GENERAL SUPPORT	
498 CARMEL DRIVE				2.00
FORT WALTON BEACH, FL 32547				2,00
ANIMAL PROTECTION LEAGUE OF OKALOOSA	NONE	PC	GENERAL SUPPORT	
COUNTY INC				
PO BOX 51 FORT WALTON BEACH: FL 32547				2,00
	NTINUATION SHEE	ET(S)	▶ 3a	104,51
h Approved for future payment				
NONE				
nong				
Total			▶ 3b	

Form 990-PF (2015)

Enter gross amounts unless otherwise indicated	Unrelated	business income		by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b	_				
G	1				
d					
e	1 1				
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	9.	
Dividends and interest from securities					·
Net rental income or (loss) from real estate				· · · · · · · · · · · · · · · · · · ·	1 1 11 - 22 - 2 7 11 111 1
a Debt-financed property					
Not debt-financed property			+-+		
Net rental income or (loss) from personal			+-+		
• •					
property Other investment income	 		+		
			 		·
Gain or (loss) from sales of assets other					
than inventory					 -
Net income or (loss) from special events	 -		 -		
Gross profit or (loss) from sales of inventory			++		
Other revenue a ROYALTIES			15	511.	
			1-1-	211.	
b	1 1		+-+		
£	l i		+		
d	- 		+ +		
Cubbatal Add salvens (b) (d) and (a)	-	0	-	520.	
Subtotal Add columns (b), (d), and (e)	1		• 1		
Total. Add line 12, columns (b), (d), and (e)				13	
e worksheet in line 13 instructions to verify calculations	<u> </u>				
art XVI-B Relationship of Activities					
ne No. Explain below how each activity for which in the foundation's exempt purposes (other the			-A contribut	ed importantly to the accomp	olishment of
	··-·				
					
	· · · · · · · · · · · · · · · · · · ·			_	
					
		· · · · · · · · · · · · · · · · · · ·			

4	5	-2	5	0	4	O	6	n
_	•		_	v	-	u	v	v

Form 990-PF (2	2015) C/O A	NTHONY J SYLVE	ESTER	45-2	2504060	Par	ge 13
Part XVII				nd Relationships With Nor		1 0	<u>10 10 </u>
Li. dir si si si si	Exempt Organ				101.101,100.10		
	rganization directly or indi	rectly engage in any of the follo	wing with any other organization	on described in section 501(c) of		/es	No
	•	ation to a noncharitable exempt		120110113			
(1) Cash		ation to a monomantable exempt	t organization of		1a(1)	1	X
(2) Other					1a(2)		X
b Other tran							
(1) Sales	of assets to a noncharita	ble exempt organization			16(1)	- 1	X
(2) Purc	hases of assets from a no	ncharitable exempt organization	n		1b(2)		X
(3) Renta	al of facilities, equipment,	or other assets			1b(3)		X
(4) Reim	bursement arrangements				1b(4)		X
(5) Loan	s or loan guarantees				1b(5)		X
(6) Perfo	ormance of services or me	embership or fundraising solicit	ations		1b(6)		X
-		iling lists, other assets, or paid	· •		10		X
or service column (d	es given by the reporting f d) the value of the goods,	oundation If the foundation rec other assets, or services receiv	eived less than fair market valu	vays show the fair market value of the g e in any transaction or sharing arranger	•	ts, 	
(a) Line no	(b) Amount involved	 	able exempt organization	(d) Description of transfers, transaction	ns, and sharing arrai	ngeme	nts
	_	N/I	<u> </u>				
			 				
							
							
	·						
						-	
							
		<u> </u>					
ın section	501(c) of the Code (othe	r than section 501(c)(3)) or in s	one or more tax-exempt organi section 527?	zations described	Yes	X] No
<u>u 11 705, C</u>	omplete the following sch (a) Name of org		(b) Type of organization	(c) Description of rel	lationship		
	N/A	,	(-/ ·/F: -g	(-) - 2001/2011 01101			
							
				statements, and to the best of my knowledge nation of which preparer has any knowledge PRESIDENT	May the IRS dis return with the shown below (s X Yes	prepare	er
1 2	hature of officer or trustee	/	Date.	Title	- [
	Print/Type preparer's na		's signature		PTIN		
	CHRISTOPHE	I —		self- employed			
Paid	PETERMANN			119/5	P000974	40	
Preparer		O'CONNOR DAV	IES, LLP	Firm's EIN ► 2	7-172894	5	
Use Only			<u> </u>				
	Firm's address ► 66	5 FIFTH AVENUE	E				
	NE NE	W YORK, NY 100	022	Phone no (2)	12)286-2	260	<u>0</u>
					Form QQA.	DE	/001E\

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient FISHER HOUSE FOUNDATION NONE PC GENERAL SUPPORT 111 ROCKVILLE PIKE, SUITE 420 ROCKVILLE MD 20850 2,000. FRIENDS OF THE DEW DROP NONE PC GENERAL SUPPORT P.O. BOX 2018 MANDEVILLE, LA 70470 5,000. TROMBONE SHORTY FOUNDATION NONE PC GENERAL SUPPORT 650 POYDRAS STREET, SUITE 2245 NEW ORLEANS, LA 70130 12,757. PC GENERAL SUPPORT NEW ORLEANS JAZZ ORCHESTRA NONE 2020 ST CHARLES AVENUE NEW ORLEANS, LA 70130 260. 20,017. Total from continuation sheets

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.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2015

Name of the organization

GIA MAIONE PRIMA FOUNDATION INC

C/O ANTHONY J SYLVESTER

Employer identification number

45-2504060

Organization type (check one)						
Filers of	:	Section:				
Form 990	0 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-PF	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
	nly a section 501(c)	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.				
	For an organization	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules					
	sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.				
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
but it m	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization
GIA MAIONE PRIMA FOUNDATION INC
C/O ANTHONY J SYLVESTER

Employer identification number

45-2504060

Part | Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GIA PRIMA 9/23/2013 TRUST C/O ANTHONY J. SYLVESTER, TRUSTEE 210 PARK AVENUE FLORHAM PARK, NJ 07932	\$140,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$	Person Payroll Omnocash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization GIA MAIONE PRIMA FOUNDATION INC Employer identification number

C/O ANTHONY J SYLVESTER

45-2504060

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II

	Noncash Property (see instructions). Ose duplicate copies of P		<u></u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
-		 \$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		 \$	
a) o. om rt I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) o. om ort l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
o. om rt I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -			
o. om rt l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
	5	\$	990, 990-EZ, or 990-PF) (3

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 4 Name of organization Employer identification number GIA MAIONE PRIMA FOUNDATION INC C/O ANTHONY J SYLVESTER 45-2504060 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations Part III completing Part III, enter the total of exclusively religious, chantable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE	REV	A) ENUE BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM	3
MORGAN STANLEY		9.	· · · · · · · · · · · · · · · · · · ·	9.		
TOTAL TO PART I, LINE 3		9.		9.		
FORM 990-PF	OTHER	INCOME			STATEMENT	2
DESCRIPTION		(A) REVEN PER BO	UE	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
ROYALTIES	_		511.	511	•	
TOTAL TO FORM 990-PF, PART I,	LINE 11 =		511.	511	•	
FORM 990-PF	LEG <i>P</i>	AL FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME			
SHERMAN WELLS SYLVESTER & STAMELMAN LLP	60,089	· ·	0	•	60,08	39.
TO FM 990-PF, PG 1, LN 16A =	60,089). 	0	•	60,00	39.
FORM 990-PF	ACCOUNT	ING FEE	S		STATEMENT	4
	(A) EXPENSES	NET I	B) NVEST-			
DESCRIPTION	PER BOOKS	S MENT	INCOME	NET INCOM	L IONIOD.	
DESCRIPTION WILKIN & GUTTENPLAN PC O'CONNOR DAVIES LLP	PER BOOKS 4,175 3,500	<u> </u>	0 0	•	4,11	75.

FORM 990-PF O	THER PROFESSIONAL FEES		STATEMENT 5	
. DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
WEB DESIGN	2,400.	0.	,	2,400.
TO FORM 990-PF, PG 1, LN 16C	2,400.	0.		2,400.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MEMBERSHIP DUES INSURANCE EXPENSE WEBSITE EXPENSE SUPPLIES AND OFFICE EXPENSES	625. 1,793. 198. 3,568.	0. 0.		625. 1,793. 198. 3,568.
TO FORM 990-PF, PG 1, LN 23	6,184.	0.		6,184.