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Schedule B (Form 990, 990-EZ,

**Schedule of Contributors** 

OMB No 1545-0047

or 990-PF)

Department of the Treasury

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

temal Revenue Service	
ame of the organization	Employer identification number
THE JOHN D. & ELEANORE CARIFA FOUNDATION	
	94-3382710

		94-3382710
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	1
	501(c)(3) taxable private foundation	, <del>-</del>
Note. Only a section 501(c)(7), (instructions  General Rule  X For an organization file	rered by the General Rule or a Special Rule (8), or (10) organization can check boxes for both the General Rule and a Special Rule (10) organization can check boxes for both the General Rule and a Special Rule (10) or gradual Rule (10) or g	JUN 0 4 2012
Special Rules		
sections 509(a)(1) and	organization filing Form 990 or 990-EZ that met the 33 1/3 % support test 170(b)(1)(A)(vi), and received from any one contributor, during the year, a cor (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-E.	ontribution of the
the year, aggregate co	), (8), or (10) organization filing Form 990 or 990-EZ that received from any or ontributions of more than \$1,000 for use exclusively for religious, charitable or the prevention of cruelty to children or animals. Complete Parts I, II, and II	e, scientific, literary, or
the year, contributions aggregate to more tha year for an <i>exclusively</i> applies to this organiza	), (8), or (10) organization filing Form 990 or 990-EZ that received from any or for use exclusively for religious, charitable, etc., purposes, but these contribution \$1,000. If this box is checked, enter here the total contributions that were reviewed, charitable, etc., purpose. Do not complete any of the parts unless attorn because it received nonexclusively religious, charitable, etc., contributions.	outions did not eceived during the the General Rule ns of \$5,000 or more
Caution. An organization that is 990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file Sched answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of ify that it does not meet the filing requirements of Schedule B (Form 990, 990	dule B (Form 990, its Form 990-EZ, or on

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization THE JOHN D. & ELEANORE CARIFA FOUNDATION

Employer identification number

1	guinzanon The Oothy D. & Bleinword Original 100		94-3382710
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	JOHN D CARIFA  3480 3 CREEK DRIVE  JACKSON, WY 83001	\$\$.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<del>-</del>		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)