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OMB No 1545-0052

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. Open to Public Inspection

Fo	r cal	lendar year 2013 or tax year beginning	12	2/01 , 2013 , a	and ending	g	11/30, 2014
-	Name	of foundation				A Employer identif	cation number
_		JOHN D. & ELEANORE CARIFA FO	94-338271	0			
1	Numbe	er and street (or P O box number if mail is not delivered	to street address)		Room/suite	B Telephone numb	er (see instructions)
						() –
_	3480	O 3 CREEK DRIVE					
•	City or	town, state or province, country, and ZIP or foreign pos	ital code				
						C If exemption application pending, check here	ation is
	JACI	KSON, WY 83001					
G	Che	ck all that apply Initial return	Initial return	of a former pu	blic charity	D 1 Foreign organiza	tions, check here . >
		Final return	Amended re	turn		2 Foreign organiza 85% test, check l	
		Address change	Name change			computation •	
H	_	ck type of organization X Section 501(i	——————————————————————————————————————			E If private foundatio	n status was terminated
T		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr			under section 507(b)(1)(A), check here , 🕨 🛄
ı			unting method X C	ash Accr	ual	F If the foundation is	in a 60-month termination
		· · · · · · · · · · · · · · · · · · ·	ther (specify)			under section 507(b)(1)(B), check here . >
	-,		column (d) must be on	cash basis)			(d) Disbursements
Ŀ	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net inves	tment	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in	expenses per books	income	1	income	purposes
_		column (a) (see instructions))				*******	(cash basis only)
	1	Contributions, gifts, grants, etc received (attach schedule) If the foundation is not required to	10,000.				
	2	Check ▶ attach Sch B	63.		63.		AMOU 1
	3	Interest on savings and temporary cash investments			2,850.		ATCH 1
-	4	Dividends and interest from securities	2,850.		., 830.	 	AICH Z
ļ	5 a	Gross rents ,					
ĺ		Net rental income or (loss)	2,845.			·	
흴		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	2,043.				
Revenue		assets on line 6a			2,845.		
8		Capital gain net income (from Part IV, line 2)			,,043.		
	8	Net short-term capital gain					
	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·					
	_	and allowances · · · ·	······································				
i		Less Cost of goods sold .					
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule) ATCH 3	-6,488.		7,556.		
	12	Total Add lines 1 through 11	9,270.		,798.		
_	13	Compensation of officers, directors, trustees, etc	C		· -		
	14	Other employee selectes and wages	· · · · · · · · · · · · · · · · · · ·			······	
ä							
ě	16 a	egal fees (affach schedule)					
X	ь	Pension land amply de le efits Legal fees (attach schedule) Rounting fees (attach schedule ATCH 4 Other professional fees (attach schedule) Interest ATCH 5. Taxes attach County (set associous) TCH 6 Depreciation (attach schedule) and depletion. Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) ATCH 7. Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid	6,400.	3	3,200.		3,200
Š	c	Other professional lees (attach schedule)					
rati	17	Interest ATCH 5	36.		36.		
ist	18	Taxes and Control (set (structions)2 TCH . 6	1,229.		1.		
듩	19	Depreciation (attach schedule) and depletion.					
βq	20	Occupancy					
Ď	21	Travel, conferences, and meetings					
ā	22	Printing and publications					
in	23	Other expenses (attach schedule) ATCH .7.	172.		13.		100
ra	24	Total operating and administrative expenses.					
ď		Add lines 13 through 23	7,837.		3,250.		3,300
	25	Contributions, gifts, grants paid	7,100.			·	7,100
	26	Total expenses and disbursements Add lines 24 and 25	14,937.	 	3,250.		10,400
	27	Subtract line 26 from line 12	_				
	а	Excess of revenue over expenses and disbursements	-5,667.				
	b	Net investment income (if negative, enter -0-)					
		Adjusted net income (if negative, enter -0-).		1			

SCAME AIN O Y CUD

Е	art II	Ralance Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
_	al t II	Datatice Streets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing			
	2	Savings and temporary	cash investments	3,988.	255	255
	3	Accounts receivable ▶				1
		Less allowance for dou	btful accounts ▶			<u> </u>
	4					
		Less allowance for dou	btful accounts ▶			
	5					
	6		officers, directors, trustees, and other			
			tach schedule) (see instructions)			
	7		receivable (attach schedule)			
			btful accounts ▶			
ş	8		se			
ssets	9	Prepaid expenses and d	leferred charges			
As	_		te government obligations (attach schedule)			
	1		e stock (attach schedule)			
			e bonds (attach schedule)			
	11	Investments - land, building	s, >			
		and equipment basis Less accumulated deprecia	ation			
	12		loans			
	13	Investments - other (att:	ach schedule) ATCH 8	553,694.	551,760	. 416,383
	14	Land, buildings, and				
		equipment basis Less accumulated deprecia	ation			
	15	(attach schedule)	>)			-
	16		completed by all filers - see the			T
	''	· ·	page 1, item I)	557,682.	552,015	. 416,638
_	17		accrued expenses	001/0021		120,000
	1					┥
"	18		<i>.</i>			┥
Liabilities	19					
匵	20		ors, trustees, and other disqualified persons			
Ŀ	21		otes payable (attach schedule)			\dashv
	22	Other liabilities (describ	e ▶)			╡
	23	Total limbilities (add line	es 17 through 22)	o		
_	23				·	⊣
	ł		llow SFAS 117, check here . ▶ ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐	1		1
Balances		· ·	-			İ
au	24			-		-
Bal	25					\dashv
ᅙ	27 28 29 30	Permanently restricted				
Ξ	ļ	Foundations that do	not follow SFAS 117, • X]		
5	\		rplete lines 27 through 31.	557 602	552 015	
ts	27	•	cipal, or current funds	557,682.	552,015	-
SSE	28		or land, bidg, and equipment fund			
Ä	29	•	ulated income, endowment, or other funds , .	557 (02	EE2 01 E	
Ž	30		d balances (see instructions)	557,682.	552,015	'-
	31		net assets/fund balances (see	557 602	EE2 01E	
				557,682.	552,015	<u></u>
			anges in Net Assets or Fund E		ust agree with	
1			balances at beginning of year - Part I			557 602
_	end	i-or-year rigure report	ed on prior year's return)	• • • • • • • • • • • • • • • • • • • •	1	557,682
2	Ent	er amount from Part I	, line 27a			-5,667
						E 50 01 F
4	Add	ines 1, 2, and 3			4	552,015
		creases not included i		bea 5) Death select (b)	5	552 015
_6	10t	ai net assets or tund t	palances at end of year (line 4 minus	ine b) - Part II, column (b)), line 30 6	552,015

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Page 3

	describe the kind(s) of property sold ick warehouse, or common stock, 200		(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr)
SEE PART IV SCHED	DULE		ļ <u> </u>		
			 		ļ
	,		 		
· · · · · · · · · · · · · · · · · · ·			├	<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	1	(h) Gain or (lo (e) plus (f) mini	
	(or anowabic)	pido experior di sale	 	(0) pido (1) min	
			 		
					
Complete only for assets:	showing gain in column (h) and own	ed by the foundation on 12/31/69	(1)	Gains (Col (h) g	ain miniis
Ì	(j) Adjusted basis	(k) Excess of col (i)		(k), but not less	
(I) F M V as of 12/31/69	as of 12/31/69	over col (j), if any	1	Losses (from co	oi (h))
Capital gain net income or	(not conital lace)	fgain, also enter in Part I, line 7			
	· · · · · · · · · · · · · · · · · · ·	f (loss), enter -0- in Part I, line 7	2		2,845.
	or (loss) as defined in sections 1				
		tructions) If (loss), enter -0- in	1		
		<u></u>	3		
or optional use by domestic	private foundations subject to the	ne section 4940(a) tax on net invest		ome)	
or optional use by domestic section 4940(d)(2) applies, as the foundation liable for	private foundations subject to the leave this part blank the section 4942 tax on the distriction.	ne section 4940(a) tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section 4940 and tax on net investigation in the section in the	tment inco		Yes X
or optional use by domestic section 4940(d)(2) applies, as the foundation liable for 'Yes," the foundation does	e private foundations subject to the leave this part blank the section 4942 tax on the distribute qualify under section 4940(e)	butable amount of any year in the book not complete this part	tment inco	d? [Yes X
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Form 990-PF (2013)

Form 990-PF(2013)

Form 990-PF (2013)

Part IX-B	Summary of Program-Related Investments (see instructions)	
Describe the tw	vo largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
All other progra	am-related investments. See instructions	
3 NONE		
Total. Add lin	es 1 through 3	
		Form 990-PF(2013)

2:10:11 PM V 13-7.15

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Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	3,350.
	Fair market value of all other assets (see instructions)	1c	426,269.
ď	Total (add lines 1a, b, and c)	1d	429,619.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
-	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		3	429,619.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	-	
		4	6,444.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	423,175.
6	Minimum investment return. Enter 5% of line 5	6	21,159.
Pari	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	21,159.
	Tax on investment income for 2013 from Part VI, line 5 2a		
b	Income tax for 2013 (This does not include the tax from Part VI) 2b	1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	21,159.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	21,159.
6		6	<u>-</u>
7	Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	21,159.
			· · · · · · · · · · · · · · · · · · ·
Par	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	10,400.
b	* * * * * * * * * * * * * * * * * * * *	1b	
2	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	
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	10,400.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)		0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	10,400.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when o	alculating whether	the foundatio
	qualifies for the section 4940(e) reduction of tax in those years	=	

Form 990-PF (2013)

		_			_	_
Form	990	.P	F	(2)	n 1	31

5,724.

10 Analysis of line 9
a Excess from 2009 . . .
b Excess from 2010 . . .
c Excess from 2011 . . .
d Excess from 2012 . . .
e Excess from 2013 . . .

f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be

Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year - see instructions.)

1 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))

JOHN D. CARIFA, ELEANORE CARIFA

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

(3) Largest amount of support from an exempt organization. (4) Gross investment income

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ X 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

N/A

Form 990-PF (2013)

Page 11

ATCH 10 Total Total Description Approved for future payment Total Description Approved for future payment Total Description Recipient Recipient Recipient Arch 10 Recipient	A Boom and	1.5	continued)	Part XV Supplementary Information (
a Paid during the year ATCH 10		uture Payment	oved for F	ng the Year or Appr	3 Grants and Contributions Paid Durin
a Paid during the year ATCH 10 Total	Amount	Purpose of grant or contribution	status of	show any relationship to any foundation manager	Recipient
Total	<u>-</u>		recipient	or substantial contributor	Name and address (nome or business)
Total					a Paid during the year
Total					AMOU 10
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b Approved for future payment	7,100	▶ 3a		<u></u> <u></u>	Total
					b Approved for future payment
		1			
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		1			
		1		1	
				1	
Total	b	▶ 3b			Total

JSA 3E1491 1 000 om 990-PF (2013)

Page 12

iter gross amounts unless otherwise indicated					
	(a)	ated business income (b)	(c)	v section 512, 513, or 514 (d)	(e) Related or exempt function income
Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			14	63.	···········
Dividends and interest from securities			14	2,850.	
Net rental income or (loss) from real estate					
a Debt-financed property					<u> </u>
b Not debt-financed property					
Net rental income or (loss) from personal property .					
Other investment income			14	-7,556.	
Gain or (loss) from sales of assets other than inventor			18	2,845.	
Net income or (loss) from special events			01	1,068.	
Gross profit or (loss) from sales of inventory					
Other revenue a					
b					
с					
d					
e					
e worksheet in line 13 instructions to verify cal	culations)				
art XVI-B Relationship of Activitie Ine No. Explain below how each activ	culations) s to the Acuty ty for whic	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
ee worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitie	culations) s to the Acuty ty for whic	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
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art XVI-B Relationship of Activitie Ine No. Explain below how each activ	culations) s to the Acuty ty for whic	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
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art XVI-B Relationship of Activitie Responsible No. Explain below how each activities.	culations) s to the Acuty ty for whic	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
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art XVI-B Relationship of Activitie Ine No. Explain below how each activ	culations) s to the Acuty ty for whic	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
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e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitie ne No. Explain below how each activ	culations) s to the Acuty ty for whic	complishment of E	xempt Purp	e) of Part XVI-A contrib g funds for such purpose	uted importantly to
e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activitie ne No. Explain below how each activ	culations) s to the Acuty ty for whic	complishment of E	xempt Purp	ooses e) of Part XVI-A contrib	uted importantly to
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art XVI-B Relationship of Activitie une No. Explain below how each activ	culations) s to the Acuty ty for whic	complishment of E	xempt Purp	e) of Part XVI-A contrib g funds for such purpose	uted importantly to
.ine No. Explain below how each activ	culations) s to the Acuty ty for whic	complishment of E	xempt Purp	e) of Part XVI-A contrib g funds for such purpose	uted importantly to

T GIL	AVII	Exempt Organ	•	isicis io and Trans						
1	Did the			ngage in any of the foll	owing with ar	ny other orga	nization described		Yes	No
				ection 501(c)(3) organiz						
		ations?	•	.,, .						
	-		g foundation to a	noncharitable exempt	organization of	f				
((1) Cas	sh						1a(1)		<u> </u>
((2) Oth	er assets						1a(2)		—
b (Other t	ransactions								
				pt organization				1b(1)		
				le exempt organization .				1b(2)		
	(3) Rental of facilities, equipment, or other assets							15(3)		<u> </u>
								1b(4)		— —
								1b(5)		<u> </u>
				o or fundraising solicitation				1b(6)		
				s, other assets, or paid e				1c		L
				" complete the follows						
				es given by the reporting						
		-		ement, show in column						
(a) Lin	ne no	(b) Amount involved	(c) Name of no	ncharitable exempt organizatio	N/A	scription of transi	ers, transactions, and sha	ing ana	ngeme	nts
		N/A			N/A					
										
										
	-									
					+					
										
	- 									
			· 			-				
	<u> </u>									
		· · · · · · · · · · · · · · · · · · ·								
2a	ls the	foundation directly	or indirectly affi	liated with, or related t	o one or mo	re tax-exemp	t organizations			
				ner than section 501 (c)(Y	es 🗌	No
		" complete the follo			"					_
		(a) Name of organizatio		(b) Type of organiza	ation	1	(c) Description of relation	ship		
			_	-						
	Under	r penalties of penury reci	are that I have examin	ed this return, including accompa xpayer) is based on all information of	anying schedules and	d statements, and	to the best of my knowled	ge and I	belief, i	is true,
Sign						I	May the IR	S discus	s this	retum
_		WWVV Y //O	w/	1 4/13/15	עון ב	istee		rebater .		below
Here	Sigi	nature of officer or trustee	•	Date	Title		(see instruction	ns)? <u>X</u>	Yes	No
	<u> </u>					···-	·····			
Paid		Print/Type preparers na		Preparer's signature		Date	Check f	PTIN		
		Elisa Tji	o e	1		49/2		P009	_	<u>27 </u>
-	parer		ELOITTE TAX				Firm's EIN ▶86-1	0657	72_	
Use	Only		33 BROADWAY						.	
		NE	W YORK, NY	<u>'</u>	10	0019-6754	Phone no. 212-4			
							Fe	om 99¹	U-PF	(2013)

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ▶ 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

Employer identification number

THE JOHN D. & ELEANO	DRE CARIFA FOUNDATION	94-3382710
Organization type (check one	<u> </u>	94-3302710
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ation
	501(c)(3) taxable private foundation	
	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
X For an organization	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II	or more (in money or
Special Rules		
under sections 509	c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3 % support $\theta(a)(1)$ and $170(b)(1)(A)(vi)$ and received from any one contributor, during the 5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 11 and 11	he year, a contribution of
during the year, to	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from tal contributions of more than \$1,000 for use exclusively for religious, charit poses, or the prevention of cruelty to children or animals. Complete Parts I, I	able, scientific, literary,
during the year, co not total to more th year for an exclusive	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from entributions for use exclusively for religious, charitable, etc., purposes, but the nan \$1,000 If this box is checked, enter here the total contributions that we rely religious, charitable, etc., purpose Do not complete any of the parts unlication because it received nonexclusively religious, charitable, etc., contributions.	nese contributions did for received during the less the General Rule butions of \$5,000 or
990-EZ, or 990-PF), but it mu	It is not covered by the General Rule and/or the Special Rules does not file sust answer "No" on Part IV, line 2, of its Form 990, or check the box on line to certify that it does not meet the filing requirements of Schedule B (Form 9	H of its Form 990-EZ or on its

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) (2013)

Name of organization THE JOHN D. & ELEANORE CARIFA FOUNDATION

Employer identification number 94-3382710

Part I	Contributors (see instructions) Use duplicate copies of Par	t I if additional space is need	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	JOHN D CARIFA 3480 3 CREEK DRIVE JACKSON, WY 83001	\$10,000.	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 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 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)

Employer identification number

			94-3382710
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is nee	eded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		c r	

Name of organization THE JOHN D. & ELEANORE CARIFA FOUNDATION

Employer identification number

94-3382710

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organization	
that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line en	try.

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions) > \$___ Use duplicate copies of Part III if additional space is needed.

/ml hl-	Use duplicate copies of Part III if addit	ional space is neede	u.	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
				~
- 				~
		(e) Transfe	er of aift	
		(-,	3	
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
raiti				
		(e) Transf	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
				· · · · · · · · · · · · · · · · · · ·
(a) No		<u></u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
			 -	
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transi	ier of ruft	L
		(e) Hallsi	or or gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
			<u> </u>	

SCHEDULE D (Form 1041)

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041. Employer identification number Name of estate or trust 94-3382710 THE JOHN D. & ELEANORE CARIFA FOUNDATION Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (h) Gain or (loss) See instructions for how to figure the amounts to enter on (g) Adjustments to gain or loss from Subtract column (e) (d) Proceeds (e) the lines below from column (d) and Cost Form(s) 8949, Part I, combine the result with (or other basis) This form may be easier to complete if you round off cents (sales price) line 2, column (g) column (g) to whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 872. Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2012 Capital Loss 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on 872. Long-Term Capital Gains and Losses - Assets Held More Than One Year (h) Gain or (loss) See instructions for how to figure the amounts to enter on Adjustments (d) Subtract column (e) (e) the lines below to gain or loss from from column (d) and Proceeds Cost This form may be easier to complete if you round off cents (or other basis) Form(s) 8949, Part II, combine the result with (sales price) column (g) line 2, column (a) to whole dollars 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 26. 26. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 11 12 1,947. 13 13 14 14 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2012 Capital Loss

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2013

15

Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on

1,973.

Schedu	ele D (Form 1041) 2013				Page 2
Part	Summary of Parts I and II Caution: Read the instructions before completing this pa	rt.	(1) Beneficianes' (see instr.)	(2) Estate's or trust's	(3) Total
17	Net short-term gain or (loss)	17			872.
	Net long-term gain or (loss):			-	
		18a			1,973.
b		18b			
	The state of the s	18c			
	•	19			2,845.
Note:	If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 ((or Fo	orm 990-T, Part I, line	4a) If lines 18a and 1	19, column (2), are ne
gains, necess	go to Part V, and do not complete Part IV If line 19, column (3), is a ne	et loss	s, complete Part IV an	d the Capital Loss C	arryover Worksheet, a
Part	IV Capital Loss Limitation				
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Page 1041)				,
a Note:	The loss on line 19, column (3) or b \$3,000		1 line 22 (or Form 00	20 (complete the Capita
Loss C	arryover Worksheet in the instructions to figure your capital loss carryover	paye	1, IIIIe 22 (OF F-OFFIT 9-9	0-1, lille 34), 13 a 1033	s, complete me capita
Part		s			
Form	1041 filers. Complete this part only if both lines 18a and 19 in colu	ımn ((2) are gains, or an a	amount is entered in	Part I or Part II and
there	is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more	e tha	n zero		
	on: Skip this part and complete the Schedule D Tax Worksheet in the ii	nstru	ctions if		
	her line 18b, col (2) or line 18c, col. (2) is more than zero, or				
	th Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
Form	990-T trusts. Complete this part only if both lines 18a and 19 arm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a	re ga	ins, or qualitied divi	dends are included	in income in Part
	er line 18b, col. (2) or line 18c, col. (2) is more than zero	anu c	complete the Schedi	TIE D TAX WOLKSTIE	et in the matidotion
	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3-	4)	21		
	Enter the smaller of line 18a or 19 in column (2)	• /• •			
	but not less than zero				
	Enter the estate's or trust's qualified dividends	•	-		
	from Form 1041, line 2b(2) (or enter the qualified			1 1	
	dividends included in income in Part I of Form 990-T) 23				
	Add lines 22 and 23		-		
	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0 ▶ 25		1 1		
	Subtract line 25 from line 24 If zero or less, enter -0-		26		
	Subtract line 26 from line 21 If zero or less, enter -0-				
	Enter the smaller of the amount on line 21 or \$2,450				
	Enter the smaller of the amount on line 27 or line 28				
	Subtract line 29 from line 28 If zero or less, enter -0- This amount is			▶ 30	
	Enter the smaller of line 21 or line 26		. 31		
	Subtract line 30 from line 26		32		
	Enter the smaller of line 21 or \$11,950				
	Add lines 27 and 30				
	Subtract line 34 from line 33 If zero or less, enter -0-				
	Enter the smaller of line 32 or line 35				
	Multiply line 36 by 15%			▶ 37	
	Enter the amount from line 31				
	Add lines 30 and 36				
	Subtract line 39 from line 38 If zero or less, enter -0				
	Multiply line 40 by 20%			▶ 41	
	Figure the tax on the amount on line 27 Use the 2013 Tax Rate Schedule for I				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		l l		
	Add lines 37, 41, and 42				
	Figure the tax on the amount on line 21. Use the 2013 Tax Rate Schedule for I				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		1 . 1		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 h	here	and on Form 1041,	Schedule	
	G, line 1a (or Form 990-T, line 36)				

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information. (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D. E. or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Long-Term. Transactions involving capital assets you held more than one year are long term For short-term transactions, see page 1

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D. line 8a. you are not required to report these transactions on Form 8949 (see instructions)

You <i>must</i> check Box D, E, <i>or</i> F		-			-	_	
a separate Form 8949, page 2, f		•		_	actions than w	vill fit on this pa	ge for one or
more of the boxes, complete as r	•		•		- 45 - IDO /		
(D) Long-term transactions	•		-		•		
(E) Long-term transactions X (F) Long-term transactions	•		-	was not report	ted to the IRS		
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	Adjustment, if any, to gain or loss if you enter an amount in column (9), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and
(Example 100 sh XÝZ Ćo)	(Mo , day, yr)	disposed (Mo , day, yr)	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
SETTLEMENT WORLDCOM	VARIOUS	02/11/2014	26.				26.
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		:					
2 Totals. Add the amounts in co (subtract negative amounts) include on your Schedule D, li checked), line 9 (if Box E abov (if Box F above is checked) >	Enter each tota ine 8b (if Box I	I here and D above is	26.				26.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

ATTACHMENT 1 PAGE 20

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT	INCOME	62.
REVENUE AND EXPENSES	PER BOOKS	62.
		RS II, LP JND
	DESCRIPTION	HOMECREST PARTERS II, INTEREST ON REFUND

63.

TOTAL

ATTACHMENT 2 PAGE 21

ATTACHMENT 2

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	2,850.	2,850.
REVENUE AND EXPENSES PER BOOKS	2,850.	2,850.
		TOTAL
DESCRIPTION	HOMECREST PARTNERS II, LP	

ATTACHMENT 3

- OTHER INCOME PART I FORM 990PF,

TAX REFUND HOMECREST PARTNERS II, LP DESCRIPTION

NET INVESTMENT INCOME 1,068. REVENUE AND EXPENSES PER BOOKS

-7,556.

-7,556.

-6,488.

TOTALS

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FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	3,200.	3,200.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	3,200.	3,200.
REVENUE AND EXPENSES PER BOOKS	6,400.	6,400.
		TOTALS
DESCRIPTION	PROFESSIONAL EXPENSES	

ATTACHMENT 5

ATTACHMENT 5 PAGE 24

- INTEREST EXPENSE PART I FORM 990PF,

NET INVESTMENT INCOME EXPENSES PER BOOKS REVENUE AND

36. 36.

36.

TOTALS

HOMECREST PARTNERS II, LP

DESCRIPTION

94-3382710

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ATTACHMENT 6 PAGE 25

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME

1,228.

TOTALS

TAXES PAID ESTIMATED TAXES PAID

DESCRIPTION

1,229.

ATTACHMENT 6

ATTACHMENT 7

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION HOMECREST PARTNERS II, LP NYS FILING FEE

TOTALS

AND EXPENSES INVERPER BOOKS $\frac{72}{100}$.

REVENUE

NET INVESTMENT INCOME 13.

CHARITABLE PURPOSES 100.

100.

ATTACHMENT 7 PAGE 26

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION

HOMECREST PARTNERS II, LP

ENDING BOOK VALUE

ENDING FMV

551,760.

416,383.

416,383.

TOTALS

551,760.

ATTACHMENT 8 PAGE 27

THE JOHN D. & ELEANORE CARIFA FOUNDATION

ATTACHMENT 9	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	0	0 0	0 0	0	0 0
	COMPENSATION	0	0	0	0	0
FFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR	DIRECTOR	DIRECTOR	DIRECTOR	GRAND TOTALS
FORM 990PE, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	JOHN D. CARIFA 3480 3 CREEK DRIVE JACKSON, WY 83001	ELEANORE CARIFA 3480 3 CREEK DRIVE JACKSON, WY 83001	JOHN D. CARIFA, JR. 27 SHORE ROAD OLD GREENWICH, CT 06870	WILLIAM CARIFA 40 HOLLAND ROAD FAR HILLS, NJ 07931	

ATTACHMENT 10

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	AMOUNT	1,000	2,500.	1,600	009	200	1,000	
	PURPOSE OF GRANT OR CONTRIBUTION							
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	AND FOUNDATION STATUS OF RECIPIENT							
	RECIPIENT NAME AND ADDRESS	THE TAFT SCHOOL ANNUAL FUND	THE WILLOW SCHOOL	THE RED OAKS SCHOOL	THE AUSABLE CLUB PRESENATION FUND	VALLEY HOSPITAL FOUNDATION	GRAND TETON NATIONAL PARK FOUNDATION	

ATTACHMENT 10 PAGE 29

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94-3382710

THE JOHN D. & ELEANORE CARIFA FOUNDATION 94-3382710
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property		Description					Date	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	P	acquired Gain or	
expenses of sale	nses of sale allowable basis 12/31/69 12/31/69 add basis TOTAL SHORT-TERM GAIN OR LOSS FROM HOMECREST PARTNERS II, LP					P	(loss) 872.	
		TOTAL LONG-TERM GAIN OR LOSS FROM HOMECREST PARTNERS II, LP					1,947.	
26.		SETTLEMENT V				P	VARIOUS	02/11/2014
TOTAL GAIN(L	pss)				· · · · · · · ·		2,845.	

94-3382710