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Form **990-PF** 

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.

OMB No 1545-0052

Department of the Treasury	
Internal Revenue Service	

Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

JEC 5 2014 and ending DEC 31

-	Caic	ildai yeai 2014 di tax yea	negiming DEC	. 3, 2014	, and ending	DEC 31, 2014	
Na	me o	of foundation				A Employer identification	number
_		KARPUS FAM				47-2479174	:
		and street (or P O box number		address)	Room/suite	B Telephone number	-
_		SULLY'S TRA				585-389-16	
		town, state or province, co		ostal code	_	C If exemption application is p	ending, check here
E	TI	TSFORD, NY	14534	- · <u>- · - · - · - · - · · - · · · · · ·</u>			
G	Check	k all that apply:	Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here 🕨 🗀
			Final return	Amended return			
			Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, emputation
H (	Check	k type of organization:	X Section 501(c)(3) ex			E If private foundation sta	tus was terminated
	Se	ection 4947(a)(1) nonexem	ipt charitable trust	Other taxable private founda	ition	under section 507(b)(1)	
1 Fa	air ma	arket value of all assets at (	end of year   <b>J</b> A <u>cco</u> unti	ng method; 🔼 Cash	Accrual	F If the foundation is in a	60-month termination
		Part II, col (c), line 16)		her (specify)		under section 507(b)(1)	
<u></u>	-\$			mn (d) must be on cash l	basis)		
Pá	art I	Analysis of Revenue an	nd Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amoun	its in column (a) )	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grant	ts, etc., received	3,292,209.		N/A	
	2		n is not required to attach Sch. B				
	3	Interest on savings and tempo cash investments	orary				
	4	Dividends and interest fro	om securities	8,807.	8,807.		STATEMENT 1
	5a	Gross rents					
	b	Net rental income or (loss)					
Ф	6a	Net gain or (loss) from sale of		763.			
Ĭ	b	Gross sales price for all assets on line 6a	1,256,143.				
Revenue	7	Capital gain net income (from	Part IV, line 2)		763.		
Œ	8	Net short-term capital gai	п			I THE CE	VED
	9	Income modifications			=		
	10a	Gross sales less returns and allowances				141 MAY 91	2015 1001
	b	Less Cost of goods sold				1431 1	5013 [0]
	C	Gross profit or (loss)					181
	11	Other income				T 000 0=1	
	12	Total. Add lines 1 throug	h 11	3,301,779.	9,570.	2 2 2	<u> </u>
	13	Compensation of officers, dire	•	0.	0.		0
	14	Other employee salaries a	•			<u> </u>	
õ	l	Pension plans, employee		4 000	4 055		
penses		Legal fees	STMT 2	1,855.	1,855.		0
	1	Accounting fees					
ũ	ľ	Other professional fees					
ţķ	17						
ţta	18	Taxes		<u>-</u>			
ij	19	Depreciation and depletio	n				
É		Occupancy					<u> </u>
ΨÞ		Travel, conferences, and	meetings				
a		Printing and publications					
ing	23	Other expenses					<u> </u>
Operating and Administrative	24			1 055	1 055		,
Ö		expenses. Add lines 13 ti	-	1,855.	1,855.		0
		Contributions, gifts, grant		0.	<del></del>		0
	26	-	ursements.	1 055	1 055		^
	97	Add lines 24 and 25	10.	1,855.	1,855.		0
		Subtract line 26 from line	-	3 200 024			
	<sub>l</sub> a	Excess of revenue over expens	ses and disbursements	3,299,924.		ļ	
		Matiana anti					
		Net investment income (if ne Adjusted net income (if ne			7,715.	N/A	

Form **990-PF** (2014)

1

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	0.
2	Enter amount from Part I, line 27a	2	3,299,924.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	3,299,924.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	3,299,924.

8

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

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

	missistification, inc. 47-24				Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee ins	tru	Ctio	ns)
1	a 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   and enter 1%			1	54.
	of Part I, line 27b				
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
3	Add lines 1 and 2			1	54.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	_		1	54.
6					
	a 2014 estimated tax payments and 2013 overpayment credited to 2014				
- 1	b Exempt foreign organizations - tax withheld at source 6b				
(	c Tax paid with application for extension of time to file (Form 8868)				
(	d Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d				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			1	54.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-			
	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11				
Pá	art VII-A Statements Regarding Activities				
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Ţ	Yes	No
	any political campaign?	1	-+		X
ı	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		-		X
	If the answer is "Yes" to 18 or 16, attach a detailed description of the activities and copies of any materials published or		+		
	distributed by the foundation in connection with the activities				
(	Did the foundation file Form 1120-POL for this year?	1	.		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	H	+		
	(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •				
	E Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. > \$ 0.				
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	<u>⊢</u>	+		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
Ī	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3			х
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4	_		X
	n of "Yes," has it filed a tax return on Form 990-T for this year?			-	
	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:	1	- 1		
•	By language in the governing instrument, or	İ			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 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 XV	1 7	_	$\frac{\Lambda}{X}$	
•	bio the foundation have at least \$5,000 in assets at any time during the year in test, Complete Part II, Cor (c), and Part XV	_ <b>⊢</b> ′	+	^	
g.	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE	ŀ			
Ja	TAOTATE	— I		ł	
į,	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
				Ţ.	
o	of each state as required by General Instruction G? If "No," attach explanation	81	4	Х	
J	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar				v
10	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	-		$\frac{x}{x}$
IV	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	<i>)</i>	- 1	Λ

	1990-PF (2014) THE KARPUS FAMILY FOUNDATION, INC 47-247	<u>9174</u>		Page :
	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► ANTHONY MIRRIONE  Telephone no. ► 585-3			
	Located at ► 183 SULLY'S TRAIL, PITTSFORD, NY ZIP+4 ►1	<u>4534</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· 🗀
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	.	Yes	No
	securities, or other financial account in a foreign country?	16		X
	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			
	foreign country			<u> </u>
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			İ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			•
	for the benefit or use of a disqualified person)?			l
	(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.)			
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)? N/A	1b		
	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	1 1		
	before the first day of the tax year beginning in 2014?	1c		X
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	1 1		
	before 2014? Yes X No	1 1		
	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	1 1		
	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.			
	<b>&gt;</b>			
3а	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 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,			
	Form 4720, to determine if the foundation had excess business holdings in 2014.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeonardy before the first day of the tay year beginning in 20142			v

Part VII-B   Statements Regarding Activities for Which		Required (control	47-2479	. / 4	Page 6
5a During the year did the foundation pay or incur any amount to:	TOTIII 4720 Way be I	nequired (contin	T Interior		<del></del>
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4045(a\\2		es X No	- 1	
(2) Influence the outcome of any specific public election (see section 4955);	, ,,		C3 [22] 160		ł
any voter registration drive?	or to ourry on, anoony or mon		es X No		- 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	:?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? (see instructions)	in accorded in scotton	□ •	es X No		j
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational nurnoses, or t				İ
the prevention of cruelty to children or animals?	, or oddounonal purposso, or		es 🗶 No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un	der the excentions described i		00 (22) 110	}	
section 53.4945 or in a current notice regarding disaster assistance (see instri			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check l	•				+
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption i		ıned			
expenditure responsibility for the grant?			es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 494		•			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?		Y	es X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.			<u> </u>		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es 🗶 No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	У		
Paid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their					
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e)	Expense unt, other
(a) Name and address	to position	`enter-0-)	compensation	allo	owances
					_
SEE STATEMENT 6		0.	0.		<u> </u>
· · · · · · · · · · · · · · · · · · ·			ļ	ł	
		1			
	<u> </u>			-	
	-				
Compensation of five highest-paid employees (other than those inc	l cluded on line 1). If none.	enter "NONE."			
	(b) Title, and average		(d) Contributions to	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	'hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	acco	unt, other wances
NONE	dovoted to position		compensation		
			-		
				t	
otal number of other employees paid over \$50,000			<b></b>		0

Form 990-PF (2014) THE KARPUS FAMILY FOUNDATION, IN		- <u>24/91/4 Page 7</u>
Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	tion 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
NONE	,,,,,,	
	1	
	1	
	₹	
	<del></del>	<del></del>
	┥	
	<del> </del>	
	-	
Total number of others receiving over \$50,000 for professional services	<u> </u>	<b>▶</b> 0
Part IX-A Summary of Direct Charitable Activities	<del></del>	
	and references and another	1
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the	Expenses
37/3		
1 <u>N/A</u>		-
		<del> </del>
2		}
		{
^		
3		1
		ł
4		1
		1
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2	I Amount
1 N/A	100 1 4114 2.	7 Milouit
		<b>{</b>
	·	1
2	<del> </del>	
		1
All other program-related investments. See instructions.	···	
· -		
3		
Tatal Add lines 1 through 2	<b>•</b>	0.
Total. Add lines 1 through 3		ı .

F	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·		1a	2,562,008.
	Average of monthly cash balances	16	733,685.
	Fair market value of all other assets	10	733,003.
d		10	3,295,693.
	Reduction claimed for blockage or other factors reported on lines 1a and	<del>  "</del>	
Ť	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,295,693.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	49,435.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,246,258.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	12,008.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	id certain	,
1	Minimum investment return from Part X, line 6	1	12,008.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	154.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,854.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,854.
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	11,854.
P	Qualifying Distributions (see instructions)	<u> </u>	
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	0.
b	Program-related investments - total from Part IX-B	1b	0.
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:		<u></u>
а	Surtability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_ <del></del>
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies fo	r the section

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	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	<u> </u>	<del></del>		
line 7				11,854.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:	- · · · · · · · · · · · · · · · · · · ·			
,,		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
<b>b</b> From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ▶\$ 0 •				
a Applied to 2013, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	.			
(Election required - see instructions)	0.		· · · · · · · · · · · · · · · · · · ·	
d Applied to 2014 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract		ا م		
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				***
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				11,854.
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 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				
a Excess from 2010				
b Excess from 2011			į	
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				
				Form 000 DE (2014)

Form 990-PF (2014) THE KAR	PUS FAMILY	FOUNDATION,	INC	47-247	7 <b>9174</b> Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo		_	▶		
b Check box to indicate whether the found		ig foundation described i		4942(j)(3) or 494	2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed	_				
<b>b</b> 85% of line 2a				ľ	
c Qualifying distributions from Part XII,		-			
line 4 for each year listed					
d Amounts included in line 2c not		<del></del>			
used directly for active conduct of					
exempt activities		1			
e Qualifying distributions made directly		-			<del></del>
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the				<u> </u>	
alternative test relied upon:				1	
a "Assets" alternative test - enter: (1) Value of all assets					
` '				<del> </del> <del>-  </del>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				1	
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	İ			i i	
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public				<del> </del>	
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization				ļ	
(4) Gross investment income  Part XV   Supplementary Info	rmotion (Complet	to this most only	£ 46 - £	had 65 000	
at any time during t			i the loundation	nau \$5,000 or mor	e in assets
1 Information Regarding Foundatio					
a List any managers of the foundation who		han 9% of the total contr	ibutions received by the	foundation before the close	of any tay
year (but only if they have contributed m	ore than \$5,000). (See se	ction 507(d)(2).)	ibutions received by the	ionitration before the close	of ally tax
GEORGE W KARPUS	, ,	, ,			
b List any managers of the foundation who	o own 10% or more of the	stock of a corporation (	or an equally large portu	on of the ownership of a part	nership or
other entity) of which the foundation has	a 10% or greater interest	i.	or an equally large per at	on or the owner only or a part	noromp or
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan.	Scholarship, etc., Pro	ograms:		
Check here ► X if the foundation of	nly makes contributions to	preselected chardable o	roanizations and does r	of accept unsolicited reques	ts for funds. If
the foundation makes gifts, grants, etc. (	see instructions) to indivi	duals or organizations un	ider other conditions, co	emplete items 2a, b, c, and d	
a The name, address, and telephone numb					
, , <del></del>		- Fare and the supplier		··	
b The form in which applications should be	e submitted and informati	on and materials they sho	ould include:	<del> </del>	<u> </u>
<del></del>		- <u></u>			
c Any submission deadlines:					
d Any restrictions or limitations on sweets	augh as hu assessing	orono shawkabla fala 1	and of south to a	Ab Ct	
d Any restrictions or limitations on awards	, such as by geographical	areas, charitable fields, k	kinas of institutions, or (	omer factors:	

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
NONE				
				·
				·
				-
Total			▶ 3a	0
<b>b</b> Approved for future payment				
NONE				
		İ		
Total			<b>▶</b> 3b	0.

Enter gross amounts unless otherwise indicated.	Unrelated	ousiness income	Exclude	d by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_				<u></u>
b	_				<del></del>
c	_		$\bot$		
d	_		$\perp$		
e					
1			$\perp$		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments		_			
4 Dividends and interest from securities					8,807.
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property		_			
6 Net rental income or (loss) from personal					
property					
7 Other investment income		_			
8 Gain or (loss) from sales of assets other				Ī	·- ·
than inventory					763.
9 Net income or (loss) from special events		<u> </u>			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	1				
b					
C					
d					
е					
12 Subtotal. Add columns (b), (d), and (e)		0		0.	9,570.
13 Total. Add line 12, columns (b), (d), and (e)				13	9,570.
(See worksheet in line 13 instructions to verify calculations.)					<u>.</u>
Part XVI-B Relationship of Activities	to the Accom	plishment of I	Exempt I	Purposes	
Line No. Explain below how each activity for which inc the foundation's exempt purposes (other that			-A contribut	ed importantly to the accomp	lishment of
4 INCOME IS USED TO FUND	CHARITAE	BLE CONTRI	BUTIO	NS	
8 INCOME IS USED TO FUND					
				<del></del>	
					<del></del>
	<del></del>				
<del></del>	<u></u>	<del> </del>			

▼	the foundation's exempt purposes (other than by providing funds for such purposes).								
							CONTRIBUTIONS		
8	INCOME	IS	USED	то	FUND	CHARITABLE	CONTRIBUTIONS		
			_				<del>-</del>		
						<u></u>			
							<del>-</del>		
							·		
				_					

Form 990-PF (2014)	THE	KARPUS	FAMILY	FOUNDATION,	INC	47-2479174	Page <b>13</b>
		Regarding anizations		To and Transactio	ns and I	Relationships With Noncharitable	

1 Did the	e organization directly or indi	rectly engage in any	of the following	ig with any other organizati	on described in sect	on 501(c) of		Yes	No
the Co	de (other than section 501(c)	)(3) organizations) o	or in section 52	27, relating to political organ	nizations?				
a Transf	ers from the reporting found	ation to a noncharita	ıble exempt or	ganization of:					1
(1) Ca	ash						1a(1)		X
(2) 0	her assets						1a(2)		X
<b>b</b> Other t	ransactions:								
(1) Sa	les of assets to a noncharita	ible exempt organiza	tion				16(1)		X
	irchases of assets from a no						1b(2)		X
	ental of facilities, equipment,	•	- <b>3</b>				1b(3)		X
	eimbursement arrangements						1b(4)		X
	oans or loan guarantees						1b(5)		X
	erformance of services or me	embership or fundrar	sino solicitatio	ns			1b(6)		X
• •	g of facilities, equipment, ma	•	•				10		X
	nswer to any of the above is				wave chow the fair n	narket value of the goods (		ote	<del></del> -
	ices given by the reporting fo							013,	
	(d) the value of the goods,			od 1035 triali lair market vait	ic in any transaction	or snaring arrangement, s	11000 111		
a)Line no	(b) Amount involved			exempt organization	(d) Decoration	of transfers, transactions, and t	harina aa		
La) Ellio 110	(b)/illibalit illivolvoa	(0) 1141110 01	N/A	- CXCIIIPT Organization	(u) Description	or transfers, transactions, and s	snaring ar	angenie	-
			IV/A						
				_					
		l							
			· ·			<u> </u>			
2a Is the f	oundation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described	<del></del>			
	on 501(c) of the Code (other	-		, -			Yes	X	No
	complete the following sche	· ·				_			
	(a) Name of org			(b) Type of organization		(c) Description of relationsh	nip		
<u> </u>	N/A		<u></u>	.,,,,,			•		—
					<del></del> -				
				<u> </u>					
	<del></del>								—
Un	der penalties of perjury, I declare t	that I have examined thi	s return, ıncludın	g accompanying schedules and	statements, and to the	best of my knowledge			
Sign and	der penalties of perjury, I declare to belief, it is true, correct, and com	nplete Declaration of pro	eparer (other than	taxpayer) is based on all inform	nation of which preparer	has any kenwledge a C retu	the IRS on with the	prepare	er e
Here		Minion		1615.15	URER		wn below	(see inst	r )?
1	ignature of officer or trustee	I V (A/VWV V			. <del></del>	L	X Yes	<u> </u>	J No I
	<del></del>		Droporor'o o	Date	Title	Chook   if I DTIM			
	Print/Type preparer's na	.mg	Preparer's si	ynature /	Date	Check if PTIN			
Paid	BILEDY C	aman ee	13116		111210-	self- employed		277	
_	EILEEN C.			Low	10/1/2		239		
Prepare	1	WDIO & CO	., LLP		•	Firm's EIN ► 16-11	1311	46	
Use Onl	·	4 400							
	Firm's address ► 17								
	_ PI'	TTSFORD,	NY 145	<u>34</u>		Phone no. (585)			
·						Fo	rm <b>990</b>	- <b>PF</b> (	2014)

#### 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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

Name of the organization

**Employer identification number** 

	THE KARPUS FAMILY FOUNDATION, INC	47-2479174
Organization type (chec	ck one).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt chantable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> I(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	al Rule. See instructions
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to any one contributor. Complete Parts I and II. See instructions for determining a contributor.	
Special Rules		
sections 509(a)( any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% su (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 outor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the a EZ, line 1 Complete Parts I and II.	, 16a, or 16b, and that received from
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received abutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or of cruelty to children or animals Complete Parts I, II, and III	-
year, contribution is checked, ente purpose. Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ons exclusively for religious, charitable, etc., purposes, but no such contributions total er here the total contributions that were received during the year for an exclusively religion to the parts unless the <b>General Rule</b> applies to this organization becausele, etc., contributions totaling \$5,000 or more during the year	led more than \$1,000 If this box igious, charitable, etc.,
but it <b>must</b> answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Scheon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on eet 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) (2014)

Name of organization

Employer identification number

# THE KARPUS FAMILY FOUNDATION, INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed	-
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$ <u>1,001,855</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$ <u>17,688.</u>	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$50,000.	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$290,485.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
423452 11-05	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$ 136,973.	Person Payroli Noncash X (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

## THE KARPUS FAMILY FOUNDATION, INC

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	nal space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
7	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$ 76,552.	Person Payroll Noncash X (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
8 8	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$ <u>673,240.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
9	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$ <u>461,761.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
10	GEORGE KARPUS  4244 BRYNWOOD DRIVE  NAPLES, FL 34119	\$ 383,654.	Person Payroll Noncash X (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				
22450 11 0		\$	Person Payroll Noncash (Complete Part II for noncash contributions)				

**Employer identification number** 

## THE KARPUS FAMILY FOUNDATION, INC

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	addıtı	onal space is needed	
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	300 SHARES MERCK AND CO. STOCK			
		\$.	17,688.	12/23/14
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
3	8 SHARES BLACKROCK INSURED AUCTION RT PRFD STOCK			
		\$.	200,000.	12/23/14
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
4	2 SHARES EASTON VANCE AUCTION RT PRF			
		\$_	50,000.	12/23/14
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
5	22,927 SHARES EATON VANCE MUTUAL FUND			
		\$_	290,485.	12/23/14
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
6	9,940 SHARES ADAMS EXPRESS CO			
		\$_	136,973.	12/23/14
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
7	2,800 SHARES BOULDER TOTAL RETURN FD			
		\$_	76,552.	12/23/14
423453 11-05	5-14		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2014)

**Employer identification number** 

## THE KARPUS FAMILY FOUNDATION, INC

Part II N	oncash Property (see instructions) Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8 3,	,245 SHARES SPDR S&P 500 FUND		
		\$ 673,240.	12/23/14
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9 2,	427 SHARES VANGUARD SP 500		
		\$\$	12/23/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
10 E	ETF3,090 SHARES VANGUARD MID CAP ETF		
		\$383,654.	12/23/14
(a) No. From	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—   <u> </u>		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_   _		\$	
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
.53 11-05-14		Sobodule B /Form 0	90 990-F7 or 990-PF) (2

Name of org	ganization	·	Employer identification number
THE K	ARPUS FAMILY FOUNDATION	. INC	47-2479174
Part III	Exclusively religious, charitable, etc., contine year from any one contributor. Complete	ributions to organizations describe columns (a) through (e) and the follo	od in section 501(c)(7), (8), or (10) that total more than \$1,000 for owing line entry. For organizations
	completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, chantable, etc., contributions of \$1,000 (	or less for the year (Enter this info once)
(a) No. from			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Ì			
		<del></del>	
-			
:		(e) Transfer of gi	.ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_	(e) Transfer of gi	ft
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
Ī			The East County of a discount of a discount of the discount of
			<del></del>
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I		<u>-</u>	
Ī		(e) Transfer of git	ft
	T		<b>.</b>
<b> </b>	Transferee's name, address, ar	10 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
from Part I	(5). c. poss o. g	(5) 000 01 girt	(d) Description of now girt is need
-		(e) Transfer of git	tt
		•	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee

_	(a) List and 2-story b	d describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	5540 SHS ADAMS	EXPRESS				12/23/14	12/23/14
b	300 SHS MERCK	AND CO			D	12/23/14	
	3245 SHS SPDR	S&P 500		-	D	12/23/14	
	2800 SHS VANGU				D	12/23/14	
	4 BLACKROCK IN		<del></del>		D	12/23/14	
f		ER TOTAL RETURN	FD		<del>  D</del>	12/23/14	
_		THE POST OF THE PO				12/23/11	12/20/14
_ <u>g</u> h						_	<del></del>
_	-		···		<u> </u>		
<u>-</u> :					-		
<u> </u>					<del></del>		
_ <u>k</u>			-	_	<del> </del>		
	<del> </del>		· · · · · · · · · · · · · · · · · · ·			-	
_m	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>				
<u>n</u>		_ <del></del>					<del></del>
0					<u> </u>	<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			Gain or (loss) lus (f) minus (g)	
a	76,218.		76,341.				<123.>
b	17,140.		17,688.			-	< <b>548.</b> >
С	673,832.		673,240.				592.
d	348,135.		347,648.		****		487.
е	100,000.		100,000.				0.
f	40,818.		40,463.				355.
g							
h							
1	<u> </u>		-				
ī							
k							
T							
m			-				
n						<u> </u>	
0		-					
Ť	Complete only for assets showing	ig gain in column (h) and owned by t	he foundation on 12/31/69		(I) Los	ses (from col. (h))	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		Gains (excess o	f col. (h) gain over ot less than "-0-")	col. (k),
a	γ- <u>-</u> -						<123.>
b						-	<5 <u>48.</u> >
С							592.
d					<del></del>	_	487.
е	-					<del>-</del>	0.
f					-		355.
g			-				
h				-			
ı							
j							
k			<del> </del>			<u>_</u>	
1							
m							
n			<del></del>				
<u>''</u>							
<u> </u>							
2	Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter "-0	ın Part I, line 7 " ın Part I, line 7	2			763.
	If gain, also enter in Part I, line 8,		d (6):				
	If (loss), enter "-0-" ın Part I, line 8	<u> </u>	J	_ 3		N/A	

FORM 990-PF	DIVIDEND	S AND	INTER	EST	FROM	SECUR	ITIES	Sī	TATEMENT	1
GROSS AMOUNT		(	APITAL GAINS VIDEND		(A REVE PER B	NUE	NET I	B) NVEST- INCOME	(C) ADJUST NET INC	
DIVIDENDS	8,807	•		0.	8	,807.		8,807.	-	
TO PART I, LINE 4	8,807	•		0.	8	,807.		8,807.		
FORM 990-PF			LEGAL	FE	ES			SI	ATEMENT	2
DESCRIPTION		( A EXPEN PER E	ISES	NE'	(B) I INVE NT INC		(C ADJU NET I	STED	(D) CHARITA PURPOS	
LEGAL FEES		1	L,855.		1,	855.				0.
TO FM 990-PF, PG 1,	LN 16A	1	855.		1,	855.				0.
FORM 990-PF	U.S. AND ST	PATE/C	CITY GO		RNMENT	OBLI	GATION		'ATEMENT	3 
DESCRIPTION			GOV'	r (	T'VOE	BOOI	K VALU	E	VALUE	
OTHER INVESTMENTS					X -		290,4	85.	294,1	53.
TOTAL U.S. GOVERNMENTOTAL STATE AND MUN			IT OBL	rga'i	TONS	<del></del>	290,4		294,1	
TOTAL TO FORM 990-P					-		290,48		294,1	
FORM 990-PF		COR	PORATI	E Si	rock		···	ST	ATEMENT	
DESCRIPTION						воог	K VALUI		IR MARKE' VALUE	Г
CORPORATE STOCK					_	1	,269,0	33.	1,260,5	40.
TOTAL TO FORM 990-P	F, PART II,	LINE	10B		_	1	,269,08	33.	1,260,5	40.
					=					

FORM 990-PF	CORPORATE BONDS		STAT	EMENT 5
DESCRIPTION		BOOK VALUE		MARKET ALUE
CORPORATE BONDS		1,006,66	9. 1	,007,315.
TOTAL TO FORM 990-PF, PART II	PAL TO FORM 990-PF, PART II, LINE 10C 1,006,669.			
	LIST OF OFFICERS, D AND FOUNDATION MANA		STAT	EMENT 6
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
GEORGE W KARPUS 4244 BRYNWOOD DRIVE NAPLES, FL 34119	PRESIDENT, DIR	ECTOR 0.	0.	0.
KATHLEEN P KARPUS 21 WOODBURY PLACE ROCHESTER, NY 14618	VICE PRESIDENT 0.00	, DIRECTOR 0.	0.	0.
ANTHONY MIRRIONE 183 SULLY'S TRAIL PITTSFORD, NY 14534	SECRETARY/TREA 0.00	SURER, DIRECTO	OR	0.
KATIE POPHAM 164 COURTSHIRE LANE PENFIELD, NY 14526	DIRECTOR 0.00	0.	0.	0.
RODD RIESENBERGER 784 SOMERDALE DRIVE WEBSTER, NY 14580	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	GE 6, PART VIII	0.	0.	0.

10b ) Corporate Stock

, ,			
Shares	Description	Cost Basis	FMV
0.000	•	04 400 04	
	Singapore	31,490 94	30,992 00
·	Adams	60,632 00	60,192 00
2,800	Asia Blackrock Global	31,065 72	31,584 00
,	Blackrock Resources	33,778 21	32,825 00
•	Boulder Total Return	32,425.25	31,557 50
· · · · · · · · · · · · · · · · · · ·	Cohen	36,088 80 21,584 22	36,630 00 21,759 15
•	Cornstone	40,683 60	41,067 00
•	Gabelli	33,647 68	33,399 04
	Ishares	32,565 47	32,611 80
·	Japan Smaller	31,442 85	31,395 00
	Liberty All	44,470 44	43,953 00
	Nuveen Global	33,207 20	33,826 00
·	Source Capital	32,942 62	32,848 60
	Templeton Emgering	33,444 62	33,924 00
	Vanguard Info	32,137 80	31,344 00
	Vanguard Emerging	45,728 60	46,023 00
	Vanguard Pacific	42,586 96	42.083 80
	Vanguard Europe	80,376 00	78,615 00
	Vanguard S P	461,761 02	457,246 80
	Vanguard Mid Cap	36,006 40	35,832 40
	Vanguard Small Cap	41,016 15	40,831 00
	tanguara omen oup		,
		1,269,082 55	1,260,540 09
10c ) Corporate Bonds			
	Alhance	131,617 50	130,725 00
	Blackrock Income	70,609 51	70,208 00
	Blackrock Core	82,600 10	81,840 00
4,900	Federated	63,807 80	65,268 00
4,600	Fort Dearborn	64,883 46	65,044 00
2,816	Morgan Stanley	49,957 53	50,490 88
	Nexpoint	41,310 50	41,551 00
169	Transamerica	3,442 22	3,417 18
23,041	Vaguard Total	250,000 00	250,460 83
8,700	waclay	98,440 50	98,310 00
4	Blackrock Ins Muni	100,000 00	100,000 00
2	Eaton Vance FLT	50,000 00	50,000 00
		1,006,669 12	1,007,314 89
10a ) Tax-Exempt Bonds			
22,927	Eaton Vance Ins	290,485 09	294,153 41
Temporary Cash Investments		733,685 04	733,685 04
		3,299,921 80	3.295.693 43

3,299,921 80 3,295,693 43