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Form **990-PF**

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation

**Note.** The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

**2011**

For calendar year 2011, or tax year beginning 01-01-2011 , and ending 12-31-2011

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

Name of foundation  
THE LEEVER FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)  
900 SOUTH PARK PLACE

Room/suite

City or town, state, and ZIP code  
HENDERSONVILLE, NC 28791

A Employer identification number  
22-3115036

B Telephone number (see page 10 of the instructions)  
(828) 393-8512

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐






H Check type of organization ☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)  
\$ 9,756,869

J Accounting method ☒ Cash ☐ Accrual  
☐ Other (specify) \_\_\_\_\_  
(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	244,414			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities. . . . .	223,713	223,713		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	237,154			
	b Gross sales price for all assets on line 6a _____ 984,050				
	7 Capital gain net income (from Part IV, line 2) . . . .		237,154		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	705,281	460,867		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule). . . . .	 3,991	1,996		1,995
	b Accounting fees (attach schedule). . . . .	 5,000	3,800		1,200
	c Other professional fees (attach schedule) . . . . .	 66,616	18,571		48,045
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see page 14 of the instructions)	 18,044	18,044		0
	19 Depreciation (attach schedule) and depletion . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule). . . . .	 3,361	1,844		1,517
	24 <b>Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	97,012	44,255		52,757
	25 Contributions, gifts, grants paid . . . . .	255,675			255,675
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	352,687	44,255		308,432
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	352,594			
	b <b>Net investment income</b> (if negative, enter -0-)		416,612		
	c <b>Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	60,804	114,175	114,175
	2	Savings and temporary cash investments . . . . .			
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____	237,697		
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule). . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	8,771,399	9,308,319	9,642,694
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	15	Other assets (describe ▶ _____)			
	16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	9,069,900	9,422,494	9,756,869
	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
Net Assets or Fund Balances	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
		Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds . . . . .	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	9,069,900	9,422,494	
	30	Total net assets or fund balances (see page 17 of the instructions) . . . . .	9,069,900	9,422,494	
Net Assets or Fund Balances	31	Total liabilities and net assets/fund balances (see page 17 of the instructions) . . . . .	9,069,900	9,422,494	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1	9,069,900
2	Enter amount from Part I, line 27a . . . . .	2	352,594
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	9,422,494
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	9,422,494

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (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	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	237,154
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8 . . . . .		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2010	397,148	9,465,172	0 041959
2009	430,427	7,821,111	0 055034
2008	573,803	11,092,694	0 051728
2007	688,792	11,005,357	0 062587
2006	618,575	7,201,745	0 085892

2	Total of line 1, column (d). . . . .	2	0 297200
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . .	3	0 059440
4	Enter the net value of noncharitable-use assets for 2011 from Part X, line 5. . . . .	4	9,852,904
5	Multiply line 4 by line 3. . . . .	5	585,657
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	4,166
7	Add lines 5 and 6. . . . .	7	589,823
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	308,432

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 See the Part VI instructions on page 18

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	8,332
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-)		2	0
3		Add lines 1 and 2. . . . .		3	8,332
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- . . . . .		5	8,332
6		Credits/Payments			
a		2011 estimated tax payments and 2010 overpayment credited to 2011	6a	5,700	
b		Exempt foreign organizations—tax withheld at source . . . . .	6b		
c		Tax paid with application for extension of time to file (Form 8868)	6c		
d		Backup withholding erroneously withheld . . . . .	6d		
7		Total credits and payments Add lines 6a through 6d. . . . .		7	5,700
8		Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached		8	35
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .		9	2,667
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	
11		Enter the amount of line 10 to be Credited to 2012 estimated tax <input type="checkbox"/>	Refunded <input type="checkbox"/>	11	

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		Yes	No
		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? . . . . .			No
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities.	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T.	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	Yes	
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	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> CT			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions).	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	13	Yes	
14	The books are in care of <b>CONNECTICUT COMMUNITY FOUNDATION</b> Telephone no <b>(203) 753-1315</b> Located at <b>43 FIELD STREET WATERBURY CT</b> ZIP +4 <b>067021906</b>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country				

Part 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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 ). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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 page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c		No
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 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? If "Yes," list the years 20____, 20____, 20____, 20____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions ).	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 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2011 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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.</i> )	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 jeopardy before the first day of the tax year beginning in 2011?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1 ), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	5b	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870.</i>		6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. <div></div>		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 THE FOUNDATION AWARDS SCHOLARSHIP GRANTS TO CHILDREN OF MACDERMID'S EMPLOYEES MACDERMID, INC IS A PUBLICLY TRADE COMPANY LISTED ON THE NEW YORK STOCK EXCHANGE THE ADMINISTRATION OF THE SCHOLARSHIP PROGRAM IS HANDLED ENTIRELY BY THE CONNECTICUT COMMUNITY FOUNDATION, INC , BASED IN WATERBURY, CONNECTICUT THE LEEVER FOUNDATION PAYS THE CONNECTICUT COMMUNITY FOUNDATION AN ADMINISTRATIVE FEE FOR THIS SERVICE FOR 2010, APPROXIMATELY SIXTEEN GRANTS WERE MADE	78,200
2 THE FOUNDATION SUPPORTS PROGRAMS AND ORGANIZATIONS IN THE GREATER WATERBURY, CONNECTICUT AREA THAT CREATE OPPORTUNITIES FOR PEOPLE, ESPECIALLY CHILDREN, TO BETTER THEIR LIVES PHYSICALLY, EMOTIONALLY, EDUCATIONALLY AND SPIRITUALLY, ENHANCE HEALTHCARE, AND PROMOTE THE ARTS IN ALL FORMS IN ORDER TO BROADEN SOCIETY'S APPRECIATION FOR AND UNDERSTANDING OF LIFE	177,475
3	
4	

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See page 24 of the instructions	
3	
Total. Add lines 1 through 3. <div></div>	0



Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	9,915,458
b	Average of monthly cash balances. . . . .	1b	87,490
c	Fair market value of all other assets (see page 24 of the instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	10,002,948
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	10,002,948
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions). . . . .	4	150,044
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	9,852,904
6	Minimum investment return. Enter 5% of line 5. . . . .	6	492,645

Part XI

Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	492,645
2a	Tax on investment income for 2011 from Part VI, line 5. . . . .	2a	8,332
b	Income tax for 2011 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	8,332
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	484,313
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	0
5	Add lines 3 and 4. . . . .	5	484,313
6	Deduction from distributable amount (see page 25 of the instructions). . . . .	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	484,313

Part XII

Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	308,432
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		
a	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	308,432
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 page 26 of the instructions). . . . .	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	308,432
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see page 26 of the instructions)

		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1		Distributable amount for 2011 from Part XI, line 7			
2		Undistributed income, if any, as of the end of 2011			
a		Enter amount for 2010 only. . . . . 0			
b		Total for prior years 20____, 20____, 20____ 0			
3		Excess distributions carryover, if any, to 2011			
a		From 2006. . . . . 262,972			
b		From 2007. . . . . 319,996			
c		From 2008. . . . . 22,627			
d		From 2009. . . . . 43,586			
e		From 2010. . . . .			
f		Total of lines 3a through e. . . . . 649,181			
4		Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 308,432			
a		Applied to 2010, but not more than line 2a 0			
b		Applied to undistributed income of prior years (Election required—see page 26 of the instructions) 0			
c		Treated as distributions out of corpus (Election required—see page 26 of the instructions). . . 0			
d		Applied to 2011 distributable amount. . . . . 308,432			
e		Remaining amount distributed out of corpus 0			
5		Excess distributions carryover applied to 2011 175,881 175,881			
		(If an amount appears in column (d), the same amount must be shown in column (a).)			
6		Enter the net total of each column as indicated below:			
a		Corpus Add lines 3f, 4c, and 4e Subtract line 5 473,300			
b		Prior years' undistributed income Subtract line 4b from line 2b. . . . . 0			
c		Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . 0			
d		Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions . . . 0			
e		Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions . . . . . 0			
f		Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011. . . . . 0			
7		Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions). . . . . 0			
8		Excess distributions carryover from 2006 not applied on line 5 or line 7 (see page 27 of the instructions). . . . . 87,091			
9		Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a . . . . . 386,209			
10		Analysis of line 9			
a		Excess from 2007. . . . . 319,996			
b		Excess from 2008. . . . . 22,627			
c		Excess from 2009. . . . . 43,586			
d		Excess from 2010. . . . .			
e		Excess from 2011. . . . .			

Part XIVPrivate Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling.

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2011	(b) 2010	(c) 2009	(d) 2008	
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed.					
d	Amounts included in line 2c not used directly for active conduct of exempt activities.					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					

Part XVSupplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the 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) )

RUTH ANN LEEVER

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

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

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a

The name, address, and telephone number of the person to whom applications should be addressed

CAROL O'DONNELL  
THE DUNCANNON GROUP 45 NEWBRIDGE  
CIRCLE  
CHESHIRE, CT 06410  
(203) 927-5997

b

The form in which applications should be submitted and information and materials they should include

APPLICANT MUST FIRST SUBMIT A LETTER OF INQUIRY, PROGRAM OFFICER WILL REVIEW THE REQUEST TO DETERMINE WHETHER THE GRANT REQUEST MEETS THE FOUNDATION'S GUIDELINES. IF IT DOES, THEN A FULL APPLICATION MAY BE SUBMITTED.

c

Any submission deadlines

TWO ROUNDS FOR 2012. LETTER OF INQUIRIES BY JAN 13 AND SEPT 14, APPLICATIONS BY FEB 17 AND OCT 19.

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

APPLICANTS MUST BE PUBLIC INSTITUTIONS OR TAX EXEMPT ORGANIZATIONS UNDER SECTIONS 501(C)(3) OR 501(C)(4) OF THE INTERNAL REVENUE CODE. POLITICAL, LOBBYING OR RELIGIOUS ACTIVITIES ARE INELIGIBLE. RELIGIOUS AFFILIATED ORGANIZATIONS MAY PROPOSE NONSECTARIAN PROJECTS.

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	255,675
b Approved for future payment				
Total . . . . .			3b	0

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments					
<b>4</b> Dividends and interest from securities. . . . .			14	223,713	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory			18	237,154	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory. . .					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .		0		460,867	0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>		460,867

[illegible]

## Part XVII

**1**

(a)

**2.**

1

4.

Schedule B

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

Department of the Treasury  
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of organization THE LEEVER FOUNDATION	Employer identification number 22-3115036
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Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<div><input type="checkbox"/> 501(c)( ) (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div>
Form 990-PF	<div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule—

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An Organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE LEEVER FOUNDATION	Employer identification number 22-3115036
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Part I

Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	HAROLD LEEVER CLUT 32597 C/O THOMAS LEEVER TRUSTEE 173 ASA G  PERKINSVILLE, VT 05151	\$ 244,414	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>  (Complete Part II if there is a noncash contribution )



Name of organization THE LEEVER FOUNDATION	Employer identification number 22-3115036
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Part II

Noncash 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
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	<div></div> <div></div> <div></div> <div></div>	\$ <div></div>	<div></div>

Name of organization THE LEEVER FOUNDATION	Employer identification number 22-3115036
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Part III

**Exclusively** religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry )

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	
—	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	<div></div>	<div></div>	<div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div>	<div></div>	
	<div></div>	<div></div>	

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 22-3115036  
**Name:** THE LEEVER FOUNDATION

**Form 990PF - Special Condition Description:**

<b>Special Condition Description</b>
--------------------------------------

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

<b>(a)</b> List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
ARTIO INTL EQUITY FUND-SCHWAB #6269	P	2010-12-29	2011-05-13
ARTIO INTL EQUITY FUND-SCHWAB #1347	P	2010-12-29	2011-05-13
HARDING LOEVNER-SCHWAB #1347	P	2010-12-17	2011-12-05
ARTIO INTL EQUITY FUND-SCHWAB #3774	P	2010-12-29	2011-05-13
HARDING LOEVNER-SCHWAB #3774	P	2010-12-17	2011-12-05
METROPLITAN WEST TOTAL-SCHWAB #4076	P		2011-12-30
L/T THRU SCHWAB 4076	P		2011-12-31
L/T THRU SCHWAB 3774	P		2011-12-31
L/T THRU SCHWAB 1347	P		2011-12-31
S/T THRUE EINBEITA PARTNERS LP	P		2011-12-31
LT THRU EINBEITA PARTNERS LP	P		2011-12-31
ST SCHWAB 9743	P	2011-05-31	2011-12-14
LT SCHWAB 9743	P		2011-12-14
ST THRU POWERSHARES DB COMMODITY K-1	P		
LT THRU POWERSHARES DB COMMODITY K-1	P		
LT THRU SCHWAB #6269	P	2009-02-04	2011-05-13
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
1,952		1,924	28
940		926	14
196		222	-26
11,077		10,946	131
1,385		1,571	-186
14,081		14,168	-87
512,721		459,016	53,705
145,220		112,177	33,043
70,554		64,756	5,798
		5,394	-5,394
140,847			140,847
6,954		8,980	-2,026
69,996		59,089	10,907
		166	-166
106			106
5,542		7,561	-2,019
2,479			2,479

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (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	
			28
			14
			-26
			131
			-186
			-87
			53,705
			33,043
			5,798
			-5,394
			140,847
			-2,026
			10,907
			-166
			106
			-2,019
			2,479

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation


(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
RUTH ANN LEEVER	PRESIDENT 1 00	0	0	0
245 FREIGHT STREET WATERBURY,CT 06702				
DANIEL LEEVER	VICE PRESIDENT 1 00	0	0	0
245 FREIGHT STREET WATERBURY,CT 06702				
THOMAS LEEVER	TREASURER 1 00	0	0	0
245 FREIGHT STREET WATERBURY,CT 06702				
ANDREW LEEVER	SECRETARY 1 00	0	0	0
245 FREIGHT STREET WATERBURY,CT 06702				
DAVID SFARA	ASSISTANT SECRETARY 1 00	0	0	0
245 FREIGHT STREET WATERBURY,CT 06702				
LORI HART	DIRECTOR 1 00	0	0	0
245 FREIGHT STREET WATERBURY,CT 06702				
SUZANNE HART	DIRECTOR 1 00	0	0	0
245 FREIGHT STREET WATERBURY,CT 06702				
M CATHERINE SMITH	DIRECTOR 1 00	0	0	0
245 FREIGHT STREET WATERBURY,CT 06702				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN RED CROSS64 HOLMES AVENUE WATERBURY,CT 06710	NONE	EXEMPT	GENERAL FUND	3,000
BEREA COLLEGECP0 2182 LINCOLN ROOM 211 BEREА,KY 40404	NONE	EXEMPT	SCHOLARSHIP FUND	2,500
BETHLEHEM PUBLIC LIBRARY32 MAIN STREET SOUTH BETHLEHEM,CT 06751	NONE	EXEMPT	GENERAL FUND	2,500
BOY SCOUTS OF AMERICA (CONNECTICUT RIVERS COUNCIL)60 DARLIN STREET PO BOX 280098 EAST HARTFORD,CT 06128	NONE	EXEMPT	GENERAL FUND	8,625
CONNECTICUT JUNIOR REPUBLIC 550 GOSHEN RD PO BOX 161 LITCHFIELD,CT 06759	NONE	EXEMPT	GENERAL FUND	8,000
EASTER SEALS REHABILITATION CENTER22 TOMPKINS STREET WATERBURY,CT 06708	NONE	EXEMPT	GENERAL FUND	5,000
FAMILY SERVICES OF GREATER WATERBURY34 MURRAY STREET WATERBURY,CT 06710	NONE	EXEMPT	GENERAL FUND	4,000
FIRST CHURCH OF BETHLEHEM21 MAIN STREET SOUTH BETHLEHEM,CT 06710	NONE	EXEMPT	GENERAL FUND	2,000
FLANDERS NATURE CENTER & LAND TRUST5 CHURCH HILL ROAD WOODBURY,CT 06798	NONE	EXEMPT	GENERAL FUND	1,500
GRANVILLE ACADEMY OF WATERBURYPO BOX 2891 WATERBURY,CT 06723	NONE	EXEMPT	GENERAL FUND	10,000
HAROLD LEEVER REGIONAL CANCER CENTER1075 CHASE PARKWAY WATERBURY,CT 06708	NONE	EXEMPT	GENERAL FUND	5,000
HISPANIC COALITION OF GREATER WATERBURY INC135 E LIBERTY STREET 5 WATERBURY,CT 067061301	NONE	EXEMPT	GENERAL FUND	10,000
INSTITUTE FOR AMERICAN INDIAN STUDIES38 CURTIS ROAD PO BOX 1260 WASHINGTON DEPOT,CT 06793	NONE	EXEMPT	GENERAL FUND	2,500
MATTATUCK MUSEUM144 WEST MAIN STREET WATERBURY,CT 06702	NONE	EXEMPT	GENERAL FUND	4,000
MEALS AND WHEELS OF GREATER SPRINGFIELD139 MAIN STREET SPRINGFIELD,VT 05156	NONE	EXEMPT	GENERAL FUND	2,000
PINEY WOODS SCHOOL5096 HIGHWAY 49 SOUTH PINEY WOODS,MS 39148	NONE	EXEMPT	GENERAL FUND	5,750
POLICE ACTIVITY LEAGUE OF WATERBURY64 DIVISION STREET WATERBURY,CT 06704	NONE	EXEMPT	GENERAL FUND	4,500
RIVER VALLEY TECHNICAL SCHOOL DISTRICT307 SOUTH STREET SPRINGFIELD,VT 05156	NONE	EXEMPT	GENERAL FUND	17,000
SALVATION ARMY74 CENTRAL AVENUE WATERBURY,CT 067021207	NONE	EXEMPT	GENERAL FUND	5,000
SHAKESPERIENCE PRODUCTIONS INCPO BOX 361 NAUGATUCK,CT 06770	NONE	EXEMPT	GENERAL FUND	5,000
ST MARY'S HOSPITAL56 FRANKLIN STREET WATERBURY,CT 06702	NONE	EXEMPT	GENERAL FUND	7,500
ST VINCENT DE PAUL FOUNDATION34 WILLOW STREET WATERBURY,CT 06710	NONE	EXEMPT	GENERAL FUND	6,000
THREE RIVER VALLEY REGIONAL BUSINESS307 SOUTH STREET SPRINGFIELD,VT 05156	NONE	EXEMPT	GENERAL FUND	2,500
THE NEW ART CENTER16 WASHINGTON PARK NEWTONVILLE,MA 02460	NONE	EXEMPT	GENERAL FUND	100
UNITED WAY OF GREATER WATERBURY60 NORTH MAIN STPO BOX 2688 WATERBURY,CT 06723	NONE	EXEMPT	GENERAL FUND	24,100
VNA NORTHWEST607 BANTAM ROAD BANTAM,CT 067501635	NONE	EXEMPT	GENERAL FUND	2,775
WATERBURY HOSPITAL HEALTH CENTER64 ROBBINS STREET WATERBURY,CT 06708	NONE	EXEMPT	GENERAL FUND	7,500
WATERBURY SYMPHONY ORCHESTRAPO BOX 1762 WATERBURY,CT 06721	NONE	EXEMPT	GENERAL FUND	17,479
WATERBURY YOUTH SERVICE SYSTEM83 PROSPECT STREET WATERBURY,CT 06702	NONE	EXEMPT	GENERAL FUND	22,646
WELLMORE BEHAVIORAL HEALTH 141 EAST MAIN STREET WATERBURY,CT 06702	NONE	EXEMPT	GENERAL FUND	15,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
<b>a</b> Paid during the year				
WELLPATH INC70 PINE STREET WATERBURY,CT 06710	NONE	EXEMPT	GENERAL FUND	6,000
CATHOLIC CHARITIES INC838-841 ASYLUM AVENUE HARTFORD,CT 06105	NONE	EXEMPT	GENERAL FUND	10,000
CT PRE-ENGINEERING PROGRAM 211 SOUTH MAIN STREET MIDDLETOWN,CT 06457	NONE	EXEMPT	SCHOLARSHIPS	15,000
FRIENDS OF ECUSTA TRAIL542 N OAK STREET HENDERSONVILLE,NC 28739	NONE	EXEMPT	GENERAL FUND	5,000
GIRLS INC OF SW CT35 PARK PLACE WATERBURY,CT 06702	NONE	EXEMPT	GENERAL FUND	5,000
WESTWOOD LAND TRUST INCPO BOX 2616 WESTWOOD,MA 02090	NONE	EXEMPT	GENERAL FUND	1,000
CERES99 CHAUNCY STREET 6TH FLOOR BOSTON,MA 02111	NONE	EXEMPT	GENERAL FUND	100
DANA FARBER CANCER INSTITUTE 10 BROOKLINE PLACE WEST 6TH FLOOR BROOKLIN,MA 02445	NONE	EXEMPT	GENERAL FUND	100
<b>Total . . . . .</b>  <b>3a</b>				255,675

**TY 2011 Accounting Fees Schedule**

**Name:** THE LEEVER FOUNDATION

**EIN:** 22-3115036

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BLUM SHAPIRO	5,000	3,800		1,200

**TY 2011 Investments - Other Schedule****Name:** THE LEEVER FOUNDATION**EIN:** 22-3115036

<b>Category / Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
EINBEITA PARTNERS-RAL ADVISED FUNDS	AT COST	389,333	428,373
EINBEITA PARTNERS-TL ADVISED FUNDS	AT COST	229,409	252,405
EINBEITA PARTNERS-DISCLAIMED FUNDS	AT COST	174,489	192,012
EINBEITA PARTNERS-MAIN ACCOUNT	AT COST	620,016	682,181
SCHWAB 5447-4076/WINDHAVEN INV MGT	AT COST	913,903	997,722
SCHWAB 7799-3774/GENERAL ACCT	AT COST	4,118,283	4,174,587
SCHWAB 5856-6269/TL ADVISED FUNDS	AT COST	900,770	929,980
SCHWAB 4699-4076/RAL ADVISED FUNDS	AT COST	1,508,295	1,545,938
SCHWAB 4770-1347/DISCLAIMED FUNDS	AT COST	412,539	398,214
POWERSHARES DB COMMODITY INDEX TRACKING FUND	AT COST	41,282	41,282

**TY 2011 Legal Fees Schedule**

**Name:** THE LEEVER FOUNDATION

**EIN:** 22-3115036

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CARMODY & TORRANCE	3,991	1,996		1,995

## TY 2011 Other Expenses Schedule

**Name:** THE LEEVER FOUNDATION

**EIN:** 22-3115036

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSES	3,034	1,517		1,517
THRU POWERSHARES DB SECTION	327	327		0

**TY 2011 Other Professional Fees Schedule****Name:** THE LEEVER FOUNDATION**EIN:** 22-3115036

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
EINBETA PARTNERS MGT & PROF FEES	17,796	17,796		0
CONNECTICUT COMMUNITY FOUNDATION	48,545	500		48,045
POWERSHARES DB COMMODITY INDEX TRACKING FUND	275	275		0

**TY 2011 Taxes Schedule****Name:** THE LEEVER FOUNDATION**EIN:** 22-3115036

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	8,187	8,187		0
2011 FEDERAL ESTIMATES	5,700	5,700		0
2010 FEDERAL PAYMENT	4,157	4,157		0