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Form **990-PF**

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
0010
フロコン
2012
Open to public Inspection

Department of the Treasury internal Revenue Service

For calendar year 2012 or tax year beginning MAY	1, 2012	, and ending	APR 30, 2013	<u> </u>
Name of foundation			A Employer identification	number
J. B. LEVERT FOUNDATION			23-7450682	2
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
P. O. BOX 518			(504) 828-	2950
City or town, state, and ZIP code		!	C If exemption application is p	pending, check here
METAIRIE, LA 70004				
G Check all that apply Initial return	_	rmer public charity	D 1 Foreign organization	s, check here
Final return	Amended return		Foreign organizations me check here and attach ce	eeting the 85% test,
H Check type of organization Section 501(c)(3) ex	Name change kempt private foundation			
Section 4947(a)(1) nonexempt charitable trust		tion	E If private foundation sta under section 507(b)(1	
Fair market value of all assets at end of year J Accounting		X Accrual	F If the foundation is in a	,
	ther (specify)		under section 507(b)(1	
▶\$ 678,201. (Part I, colu	mn (d) must be on cash b	pasis)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check X if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	6,603.	6,603.		STATEMENT 1
5a Gross rents				
b Net rental income or (loss)	4,546.			
b Ret gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 8a 94,518.	4,540.			
b Gross sales price for all 94,518. 7 Capital gain net income (from Part IV line 2)		4,546.		
8 Net short-term capital gain		4,540.		
9 Income modifications				
Gross saies less returns 10a and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income	11 110	11 110		
12 1012 7100 11100 1 11100 111	11,149.	11,149.		
	0.	0.		0.
14 Other employee salaries and wages 15 Pension plans, employee benefits				
16a Legal fees		· · · · · · · · · · · · · · · · · · ·		
Account lees				
C Other professional fees				
Z & 17 @erlest TI Fill				
C Other professional fees 12 os 12 merest T STMT 2 STMT 2 19 regressional depretion 20 occupancy or 2	25.	0.		0.
5 E 19 tem eciation and deptetion		<u> </u>		
DE 20 Vicinpancy 20				
21 Travel, conferences, and meetings				
22 Printing and Bublications STMT 3	4,694.	4,194.		0.
24 Total operating a Godministrative	4,004.	<u> </u>		
16a Legal lees 1 Account of lees 1 C Other professional lees 1 Marest 19 Temperation and depend on company of the conferences and meetings 21 Temperation and depend on company of the conferences and meetings 22 Printing and publications 23 Other expenses 24 Total operating and deministrative expenses Add lines 13 through 23	4,719.	4,194.		0.
25 Contributions, gifts, grants paid	40,000.			40,000.
26 Total expenses and disbursements		· · · · · · · · · · · · · · · · · · ·		
Add lines 24 and 25	44,719.	4,194.		40,000.
27 Subtract line 26 from line 12				
Excess of revenue over expenses and disbursements	<33,570.			
b Net investment income (if negative enter -0-)		6,955.	37/3	
C Adjusted net income (if negative enter -0-)	1		N/A	<u> </u>

For	n: 99	0-PF(2012) J. B. LEVERT FOUNDATION			7450682 Page 2
_	art	Polonoo Choose Attached schedules and amounts in the description	Beginning of year	End of	
<u> </u>	<u> </u>	Balance Sheets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	299,747.		<u>259,249.</u>
		Savings and temporary cash investments	1,335.	2,794.	<u>2,794.</u>
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
ets	-	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
		Investments - U.S and state government obligations			
		Investments - corporate stock			
] -	Investments - corporate bonds			
	11	Investments-land buildings and equipment basis			
		Less accumulated depreciation			
	1	Investments - mortgage loans	202 041	416 150	416 150
	13	Investments - other STMT 4	382,841.	416,158.	416,158.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation	<u> </u>		
	15	Other assets (describe			
	16	Total assets (to be completed by all filers)	683,923.	678,201.	_678,201.
_		Accounts payable and accrued expenses	003,723.	<u> </u>	
	18	Grants payable	· · · · · · · · · · · · · · · · · · ·		
s	ı	Deferred revenue			
Liabilities	ì	Loans from officers directors, trustees, and other disqualified persons		· · · · · · · · · · · · · · · · · · ·	
abil	I	Mortgages and other notes payable			
تَ	i	Other liabilities (describe >			
		,			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31			
ő	24	Unrestricted			
lan	25	Temporarily restricted			
Fund Balances	26	Permanently restricted			
P		Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31			
ts or	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
ţ	29	Retained earnings, accumulated income, endowment, or other funds	683,923.	678,201.	
Š	30	Total net assets or fund balances	683,923.	678,201.	
			602 022	670 001	
_	31	Total liabilities and net assets/fund balances	683,923.	678,201.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	il net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	683,923.
2		er amount from Part I, line 27a		2	<33,570.
3		er increases not included in line 2 (itemize) UNREALIZED	GAIN ON INVEST		27,848.
4		lines 1, 2, and 3		4	678,201.
		reases not included in line 2 (itemize)			0.
<u>6</u>	Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	<u>678,201.</u>
					Form 990-PF (2012)

Part IV Capital Gains	and Losses for Tax	on Investment	Income					
	ibe the kind(s) of property s rehouse; or common stock,			(b) H- P - D -	ow acquired Purchase Donation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a SETTLEMENT FROM	M BANK OF AM	ERICA FAIR	FUND		P			
b SETTLEMENT FROM	M MICRON TECH	H			P			
c PUBLICLY TRADE					P			
d PUBLICLY TRADE	D SECURITIES			↓	P			
e PUBLICLY TRADE	D SECURITIES				P			
(e) Gross sales price	(f) Depreciation allows (or allowable)		st or other basis xpense of sale				Sain or (loss is (f) minus	(g)
_a 15.								<u> 15.</u>
b 13.						 		13.
c 38,986.			37,72					1,266.
d 53,715.			52,25	52.				1,463.
e 1,789.								<u> 1,789.</u>
Complete only for assets showin							Col. (h) gain	
(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	/···/ ··	cess of col. (I) col. (J), If any				not less that (from col. ((h))
8								<u> </u>
_b	· · · · · · · · · · · · · · · · · · ·							13.
<u>c</u>								1,266.
_d								1,463.
<u>e</u>	· · · · · · · · · · · · · · · · · · ·							1,789.
2 Capital gain net income or (net ca		lso enter in Part I, line enter -0- in Part I, line		} [2			4,546.
3 Net short-term capital gain or (los								
If gain, also enter in Part I, line 8,		ea(o) and (o).		J				
If (loss), enter -0- in Part I, line 8					3		N/A	
Part V Qualification U	nder Section 4940	(e) for Reduced	Tax on Net	t Inve	estment Ir	ncome	•	
(For optional use by domestic private if section 4940(d)(2) applies, leave to		section 4940(a) tax on	i net investment il	ncome.)			
Was the foundation liable for the sec				Liods				Yes X No
1 Enter the appropriate amount in				entries			····	
(a)	each column for each year,		lore making any t			- 1	·	(d)
Base period years Calendar year (or tax year beginni	ng in) Adjusted quali	(b) fying distributions	Net value of no	(c) onchari			Distrit (col. (b) div	(d) button ratio vided by col (c))
2011		25,975.			391,33			.066376
2010		<u> 18,500.</u>			381,65			.048473
2009		20,480.			362,33			.056523
2008		<u>27,000.</u>			350,44			.077045
2007		26,000.			535,26	4.		.048574
2 Total of line 1, column (d)						2	_	.296991
3 Average distribution ratio for the the foundation has been in existe		the total on line 2 by 5,	or by the number	r of yea	rs	3		.059398
4 Enter the net value of noncharital	ole-use assets for 2012 from	n Part X. line 5				4		660,733.
		,				_		39,246.
5 Multiply line 4 by line 3						5	 	
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6	 	70.
7 Add lines 5 and 6						7		39,316.
8 Enter qualifying distributions from						8_	<u> </u>	40,000.
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, check the box in Pa	rt VI, line 1b, and com	plete that part usi	ng a 1%	6 tax rate.			
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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see ii	nstru	ctior	ns)
1a	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)		1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1				<u>70.</u>
	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-)	2	<u> </u>			<u>0.</u>
3	Add lines 1 and 2	3	ļ <u> </u>			<u>70.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<u> </u>			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				<u>70.</u>
6	Credits/Payments:					
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a					
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	7	-			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	<u>9</u>				70.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u>10</u>				
	Enter the amount of line 10 to be: Credited to 2013 estimated tax	<u> 11</u>	1			
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interventional.	ene in			Yes	
	any political campaign?			1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publi	shed or		i		
	distributed by the foundation in connection with the activities					
	Did the foundation file Form 1120-POL for this year?			1c		_X_
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	·/	<u>.</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0.					37
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
_	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	11, 01				х
4-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3 4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	N.	I/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	1	1/2	5		x
5	If "Yes," attach the statement required by General Instruction T			<u> </u>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
Ü	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 s 	tate 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?			7	X	
•	If "Yes," complete Part II, col. (c), and Part XV			-		
8:	Enter the states to which the foundation reports or with which it is registered (see instructions)					
56	LA					
ł	of 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	Х	
9	10.10 (VO) = 10.10	alendar				
-	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X

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Pa	irt 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 p	rivileges?			
	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 ▶ LISA REAVES Telephone no.	>504-82	8-29	950	
	Located at ▶ PO BOX 518, METAIRIE, LA	ZIP+4 ▶70	004		
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	15	N,	/A	
16	At any time during calendar year 2012, 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 Form TD F 90-22 1. If "Yes," enter the name of the foreign				
	country		ļ	Ì	
Pa	art 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
18	During the year did the foundation (either directly or indirectly):			\neg	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	s X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			İ	
	a disqualified person?	s 🗓 No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	s X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	s 🗓 No		İ	
	(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)?	s 🗓 No			
	(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				
		s X No			
ı	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			1	
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			j	
	before the first day of the tax year beginning in 2012?		1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			İ	
	defined in section 4942(j)(3) or 4942(j)(5))				
	a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginnin		1		
		s X No		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		ا م		
	statement - see instructions)	N/A	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
•	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		1		
3		s X No			
	during the year? b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons aff			ļ	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to d				
	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				
		, N/A	0	ļ	
,	Form 4720, to determine if the foundation had excess business holdings in 2012)	TA \ W	3b		X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purposi	that	4a		_ <u>v</u>
	had not been removed from leopardy before the first day of the tax year beginning in 2012?	, illat	4b	ŀ	x
	nad not been removed it of the period the met day of the tax year beginning in 2012.	For	m 990	- PF /	
		r0i	33U	- i · i · (,	2012)

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to					T
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y6	es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir	ectly,			
any voter registration drive?	• • •	Y6	es X No	- 1	1
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?		X Y	es 🔲 No	- 1	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or				
the prevention of cruelty to children or animals?	o. 00000		es X No	1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the excentions described				i
section 53 4945 or in a current notice regarding disaster assistance (see instru	•	in riogalations	1 .	b X	}
Organizations relying on a current notice regarding disaster assistance check h	•		- ▶rm F	71	+
		unad			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the lax because it mainta		es X No	- 1	
expenditure responsibility for the grant?	- 64-0	re	S LAJ NO	-	
If "Yes," attach the statement required by Regulations section 53 4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	oay premiums on	г 			
a personal benefil contract?		Ye	es X No	.	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		[b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es 🔀 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu-				b	
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	anagers, Highly	/		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their		1.00	(d) Cookilly decrees 1		
(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	accour	xpense nt, other
(a) Name and address	to position	enter -0-)	compensation	allow	/ances
SEE STATEMENT 5		0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) E:	xpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	accour	nt, other vances
NONE	devoted to promon	1	dompensadon		
NONE					
	 -	 			
					
	}				
		 	 		
			[
				_	
		<u> </u>	L		
Total number of other employees paid over \$50,000	· · · · · · ·		<u> </u>		0
			Form	990-P	F (2012)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	,		
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	ce	(c) Comp	ensation
NONE	•		-
	_		
	<u></u> .		
Total number of others receiving over \$50,000 for professional services		>	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 <u>N/A</u>			
2			
3			
4			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
1 N/A		Allivult	
2			
All other program-related investments. See instructions			
3			
			
Total, Add lines 1 through 3	<u> </u>	Form 990-P	0. F (2012)
			- (2012)

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
а	Average monthly fair market value of securities	1a	387,857.
	Average of monthly cash balances	1b	387,857. 282,938.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	670,795.
	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	670,795.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,062.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	660,733.
6	Minimum investment return Enter 5% of line 5	6	33,037.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	33,037.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	70.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	32,967.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	32,967.
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	32,967.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	40,000.
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	40,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	70.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	39,930.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for	the section

Page 9

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c Any submission deadlines:						
c Any submission deadlines:			ould include:	on and materials they st	submitted and informa	b The form in which applications should be
<u> </u>				,		2 110 10111 111 11101 255 11101 25
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors.			<u></u>			c Any submission deadlines:
		other factors.	inds of institutions, or	l areas, charitable fields,	, such as by geographic	d Any restrictions or limitations on awards
223801 12-05-12	Form 990-PF					223601 12-05-12
10 090204 755639 10593 2012.05030 J. B. LEVERT FOUNDATION	10593					

3 Grants and Contributions Paid During the Ye		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
a Paid during the year				 <u></u>
A CHILD'S WISH		501 (C)(3)	CHARITABLE	
608 CLEARVIEW PARKWAY		501 (6)(3)	CHARTABUS	
METAIRIE LA 70001				400
ACADIAN MEMORIAL FOUNDATION		501 (C)(3)	CHARITABLE	
121 S. NEW MARKET STREET		(0,(0,		
ST, MARTINVILLE, LA 70582				200
AMERICAN RED CROSS	:	501 (C)(3)	CHARITABLE	
1233 CANAL BOULEVARD				
THIBODAUX, LA 70301				200
ASSUMPTION ACTIVITY CENTER		501 (C)(3)	CHARITABLE	
P. O. DRAWER 1040		İ		
NAPOLEONVILLE, LA 70390				200
BAYOU COUNCIL ON ALCOHOLISM AND DRUG		501 (C)(3)	CHARITABLE	
ABUSE				
P. O. BOX 1425				
THOBODAUX LA 70302 Total SEE CON	TINUATION SHE	- የጥ (S)	▶ 3a	200 40 000
b Approved for future payment			J	40,000
NONE				
NONE				
Total	<u> </u>	1		

Part XVI-A	Analysis of Income-Producing A	ctivities
Part AVI-A	Analysis of income-rioudding A	CHAINES

	Linrelated	business income	Excluded by	section 512, 513, or 514	(-)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue	code		code	741104111	101101101110
ā	-				
b	-		 		
<u> </u>			 		
d					
e					
	-		 		
g Fees and contracts from government agencies			 		·
2 Membership dues and assessments	<u> </u>		 		
3 Interest on savings and temporary cash					
investments	-		7.4	6 602	
4 Dividends and interest from securities			14	6,603.	
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					
than inventory			18	4,546.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_ _				
b			-		
c	_				
d	_				
e	_		ļļ		
12 Subtotal. Add columns (b), (d), and (e)		0.		11,149.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	11,149.
(See worksheet in line 13 instructions to verify calculations.)	 			
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	xempt Pu	ırposes	
					· · · · · · · · · · · · · · · · · · ·
Line No Explain below how each activity for which in			A contributed	importantly to the accom-	plishment of
the foundation's exempt purposes (other th	an by providing fun	ds for such purposes)			
					·· ——
	·				
	 		·		

, art XVII	Exempt Organ		To and Transactions			
1 Did the c	_		following with any other organization	on described in section 501(c) of	Ye	s No
			ction 527, relating to political organ			
		ation to a noncharitable exe		nzanono.		
(1) Cas		THOIT TO A HOHOHAMADIC CAO	mpt or gameation of.		1a(1)	x
(1) Cas (2) Oth					1a(2)	X
, ,	insactions					
	es of assets to a noncharita	hle exempt organization			16(1)	x_
		ncharitable exempt organiza	ation		1b(2)	X
` '	tal of facilities, equipment,	, ,			1b(3)	X
	nbursement arrangements				1b(4)	X
• •	ns or loan guarantees				1b(5)	X
٠,,		embership or fundraising so	olicitations		1b(6)	X
` '		ailing lists, other assets, or p			1c	X
d If the an	swer to any of the above is	"Yes," complete the following	ng schedule. Column (b) should al	ways show the fair market value of the good	s, other assets,	
or service	es given by the reporting f	oundation. If the foundation	received less than fair market valu	ue in any transaction or sharing arrangement	t, show in	
column	<u>`_`</u>	other assets, or services re				
a) Line no	(b) Amount involved	<u> </u>	naritable exempt organization	(d) Description of transfers, transactions, a	nd sharing arrange	ments
		, , ,	I/A	 		-
			·			
						
				 		
						
				<u> </u>		
					 :	
	·					
	······					
- 1 1		11 - 11				
			to, one or more tax-exempt organ	izations described	Yes [X No
		er than section 501(c)(3)) o	i iii Section 321 '			23.
b ii res,	complete the following sch (a) Name of or		(b) Type of organization	(c) Description of relation	nship	
	N/A	94112411011	(4)			
	24/21					
					May the IRS discu	
Sign \		~	19	Noecietari	return with the pre	
Here	Parmela D	Japre.	<u>d-10-14</u>	OFFICER	X Yes	No
<u> S</u>	ignature of officer or truste		Date parer's signature	Title Check If PTI		
	Print/Type preparer's r		A LA	self- employed	14	
Paid	AMY E. WAI	LTERS, CPA,		10161111	0107838	≀ વ
Prepare		PORTE, APAC	1	Firm's EIN ► 72-		
Use Onl			V			-
	Firm's address ▶ 1:	11 VETERANS I	MEMORIAL BLVD.,	SUITE 600		
		ETAIRIE, LA			4)835-5	
					Form 990-P	F (2012)

223622 12-05-12

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient BAYOULAND FAMILIES HELPING FAMILIES 501 (C)(3) CHARITABLE P. O. BOX 1345 THIBODAUX LA 70302 50, 501 (C)(3) CHARITABLE BOY SCOUTS OF AMERICA 401 PLATER DRIVE 100. THIBODAUX LA 70301 CATAHOULA VOL FIRE DEPT 501 (C)(3) CHARITABLE CATAHOULA LAKE LEVEE ROAD 400. ST. MARTINVILLE, LA 70582 501 (C)(3) CHEZ HOPE CHARITABLE P. O. BOX 5464 200. THIBODAUX LA 70302 501 (C)(3) COMMUNITY FUND FOR THE ARTS CHARITABLE 427 LAUREL STREET 500, BATON ROUGE, LA 70801 501 (C)(3) CHARITABLE COTEAU HOLMES VOL. FIRE DEPT 1860 COTEAU HOLMES HWY ST. MARTINVILLE, LA 70582 400. 501 (C)(3) COVINGTON FOOD BANK CHARITABLE 105 HIGHLAND PARK ROAD COVINGTON, LA 70433-7128 350. 501 (C)(3) E.D. WHITE CATHOLIC HIGH SCHOOL CHARITABLE 555 CARDINAL DRIVE 600. THIBODAUX, LA 70301 EVANGELINE VOL FIRE DEPT 501 (C)(3) CHARITABLE P.O. BOX 82 400. EVANGELINE, LA 70582 501 (C)(3) FAITH BIBLE CHURCH OF COVINGTON CHARITABLE 1148 N. COLULMBIA STREET COVINGTON, LA 70433 300. Total from continuation sheets 38 800.

Part XV. Supplementary Information	EVERT FOUNDATION		25 / 3	50682
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (name of address)	or substantial contributor	recipient		
FAMILY SERVICE OF GNO		501 (C)(3)	CHARITABLE	
STI CANAL STREET, SUITE 201				6.
EW ORLEANS, LA 70119				65
REATER NEW ORLEANS FOUNDATION		501 (C)(3)	CHARITABLE	
.055 ST. CHARLES AVENUE, SUITE 100		501 (6/(3/	CHARTIABLE	
WEW ORLEANS LA 70130				10
EW ORLEANS, LA 70130				
RENIER INDUSTRIES		501 (C)(3)	CHARITABLE	
P. O. BOX 269				
PHIBODAUX, LA 70302				30
HOSPICE OF ST. TAMMANY		501 (C)(3)	CHARITABLE	
1202 S. TYLER				<u> </u>
COVINGTON, LA 70433				30
THEFT CON PRINTER CARLON INC		501 (C)(3)	CHARITABLE	
JEFFERSON BEAUTIFICATION, INC. P.O. BOX 10658		501 (0)(3)	CHARTIABLE	
JEFFERSON LA 70181-0658				5(
SELLECTOR, DR 70101-0030				
JEFFERSON PERFORMING ARTS SOCIETY		501 (C)(3)	CHARITABLE	
1118 CLEARVIEW PARKWAY				
METAIRIE, LA 70001		 		50
LAFOURCHE HERITAGE SOCIETY		501 (C)(3)	CHARITABLE	
P. O. BOX 913				
THIBODAUX, LA 70302				30
LAUREL VALLEY FOUNDATION		501 (C)(3)	CHARITABLE	
P. O. BOX 1847				
FHIBODAUX LA 70302				20
LSU RURAL LIFE MUSEUM		501 (C)(3)	CHARITABLE	
P. O. BOX 80498				
BATON ROUGE, LA 70898				1,00
WACHOLT N. GOUGOT		F01 (G)(2)	CHARLES	1
MAGNOLIA SCHOOL		501 (C)(3)	CHARITABLE	
LOO CENTRAL AVENUE				1
JEFFERSON LA 70121 Total from continuation sheets	1	l	<u> </u>	3(

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	
		T01 (0)(2)	OVAD TWA DI E	
NEW START CENTER		501 (C)(3)	CHARITABLE	
P. O. BOX 504 ST. MARTINVILLE LA 70582				3
I, IMITINIAL, IN 18502				
NICHOLLS COLLEGE FOUNDATION		501 (C)(3)	CHARITABLE	
P. O. BOX 2066				1
THIBODAUX, LA 70310				26
NICHOLLS STATE ATHLETIC DEPT		501 (C)(3)	CHARITABLE	
P. O. BOX 2032				
THIBODAUX, LA 70310				31
NOTRE DAME IMPROVEMENT FUND		501 (C)(3)	CHARITABLE	
P. O. BOX 677				3
ST, MARTINVILLE, LA 70582				31
NICHOLLS STATE UNIVERSITY		501 (C)(3)	CHARITABLE	
906 E 1ST STREET				
THIBODAUX, LA 70310				15,0
PARKS VOLUNTEER FIRE DEPT		501 (C)(3)	CHARITABLE	
P. O. BOX 2729				
PARKS, LA 70582				4
		501 (0)(2)		
PENNINGTON BIOMEDICAL		501 (C)(3)	CHARITABLE	
6400 PERKINS ROAD BATON ROUGE, LA 70808-9980				1,0
PROJECT LAZARUS		501 (C)(3)	CHARITABLE	
P. O. BOX 3906				
NEW ORLEANS, LA 70177-3906				6
SAFE HARBOR		501 (C)(3)	CHARITABLE	
P. O. BOX 1179				
MANDEVILLE, LA 70470				3
ST. CHARLES 4-H		501 (C)(3)	CHARITABLE	
P. O. BOX 1766		[(0)(3)	DIRECT LAND	
LULING LA 70070				1
Total from continuation sheets				

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	
ST. CHARLES HUMANE SOCIETY		501 (C)(3)	CHARITABLE	
13875 FRERE STREET				1
LULING, LA 70070	<u> </u>			
ST. CHARLES MUSEUM AND HISTORICAL		501 (C)(3)	CHARITABLE	ì
ASSOCIATION, INC.				
P.O. BOC 10				
GOOD HOPE, LA 70079				1
ST. CHARLES PAR. SCHOOL BOARD		501 (C)(3)	CHARITABLE	
285 EDWARD DUFRESNE PARKWAY LULING, LA 70070				2
BOUTING, DA 10070				
ST. CHARLES SOC. CONCERNS COMMITTEE		501 (C)(3)	CHARITABLE	
P. O. BOX 988				
BOUTTE LA 70039		<u></u>		7
ST. ELIZABETH CHURCH		501 (C)(3)	CHARITABLE	
1006 ST. ELIZABETH STREET				
ST, MARTINVILLE LA 70582				3
ST, GENEVIEVE ELEMENTARY SCHOOL		501 (C)(3)	CHARITABLE	Ì
807 BARBIER AVENUE				
THIBODAUX, LA 70301		<u> </u>		5
ST. JOHN VOLUNTEER FIRE DEPT		501 (C)(3)	CHARITABLE	
2072 ST. MARY STREET THIBODAUX LA 70301		}		3
1112DODAOA, DA 10301				
				1
ST. JOSEPH ELEMENTARY SCHOOL		501 (C)(3)	CHARITABLE	
501 CARDINAL DRIVE				
THIBODAUX, LA 70301				5
ST, MARTIN DE TOURS JR.& SR. YOUTH		501 (C)(3)	CHARITABLE	
GROUPS				
133 S. MAIN STREET]
ST, MARTINVILLE, LA 70582				3
ST. MARTIN DE TOURS TRUST FUND		501 (C)(3)	CHARITABLE	
P. O. BOX 10				
ST, MARTINVILLE, LA 70582				4
Total from continuation sheets		<u> </u>		

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
T. MARTIN PARISH SHERIFF DEPT. DRUG	,	501 (C)(3)	CHARITABLE	
000 ST. MARTIN STREET				
ST, MARTINVILLE, LA 70582		<u> </u>		4
ST. MARTINVILLE ASSO. FOR RETARDED		501 (C)(3)	CHARITABLE	
CHILDREN				
P. O. BOX 128				
ST, MARTINVILLE, LA 70582-0128				40
ST. PAUL'S SCHOOL		501 (C)(3)	CHARITABLE	
917 S. JAHNCKE AVENUE				2!
COVINGTON, LA 70433	·			2.
ST, RITA CATHOLIC CHURCH		501 (C)(3)	CHARITABLE	
1006 ST. RITA HWY ST. MARTINVILLE, LA 70582				40
		F01 (0)(3)	OVA D T MA DY D	
ST. TAMMANY ART ASSOCIATION 129 N. NEW HAMPSHIRE		501 (C)(3)	CHARITABLE	
COVINGTON, LA 70433				1!
		F01 (0)(3)	OVER TWO DE D	
ST. TAMMANY ASSO FOR RETARDED CITIZENS, INC.		501 (C)(3)	CHARITABLE	
1541 ST. ANN PLACE				
SLIDELL, LA 70460		-		2'
ST. TAMMANY DEPUTIES ASSOCIATION		501 (C)(3)	CHARITABLE	
P. O. BOX 1120				
COVINGTON, LA 70434				2!
STAIR		501 (C)(3)	CHARITABLE	
1545 STATE STREET NEW ORLEANS, LA 70118				6
NEW ONDEARD, DA 70110				
		F01 (5)(5)		
THIBODAUX VOL FIRE DEPT P. O. BOX 1421		501 (C)(3)	CHARITABLE	
THIBODAUX, LA 70302				3
TRINITY CATHOLIC		501 (C)(3)	CHARITABLE	
201 GARY STREET				
ST. MARTINVILLE, LA 70582		<u> </u>		4

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor UNITED WAY OF ST. CHARLES 501 (C)(3) CHARITABLE P. O. BOX 157 1,000. LULING, LA 70070 501 (C)(3) CHARITABLE VETERAN'S MEMORIAL FUND P.O. BOX 78 300, ST, MARTINVILLE, LA 70583 501 (C)(3) CHARITABLE VOLUNTEERS FOR JUVENILE JUSTICE P. O. BOX 586 300. THIBODAUX LA 70302 501 (C)(3) CHARITABLE WRBH FM RADIO 3606 MAGAZINE STREET 300. NEW ORLEANS, LA 70115 YOUTH SERVICE BUREAU OF ST. TAMMANY 501 (C)(3) CHARTTABLE 430 N. NEW HAMPSHIRE 100. COVINGTON LA 70433 501 (C)(3) CHARITABLE NICOLE THERIOT SCHOLARSHIP FUND 762 N. MAIN STREET 100. ST, MARTINVILLE, LA 70582 PRIDE OF ST. TAMMANY PARISH, INC. 501 (C)(3) CHARITABLE P. O. BOX 336 225, COVINGTON, LA 70434 501 (C)(3) CHARITABLE GRACE HOUSE 1401 DELACHAISE ST 650, NEW ORLEANS, LA 70115 501 (C)(3) CHARITABLE BOY SCOUTS OF AMERICA - TCH DISTRICT P.O. BOX 1146 100. METAIRIE LA 70004 501 (C)(3) CHARITABLE CHILD ADVOCACY SERVICE (CASA) 816 PAUL MAILLARD ROAD 100. LULING LA 70070 Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient THE ARC OF ST. CHARLES 501 (C)(3) CHARITABLE P.O. BOX 455 BOUTTE, LA 70039 100, 501 (C)(3) ST. MARTIN HUMANE SOCIETY CHARITABLE P.O. BOX 64 150, BREAUX BRIDGE LA 70517 501 (C)(3) CHARITABLE BAYOU COUNTRY CHILDREN'S MUSEUM P.O. BOX 1093 300. THIBODAUX, LA 70302 501 (C)(3) CHARITABLE CATHOLIC CHARITIES - THIBODAUX 1220 AYCOCK STREET HOUMA LA 70360 200. 501 (C)(3) CHARITABLE CATHOLIC CHARITIES - NEW ORLEANS 100 HOWARD AVE., STE 700 649, NEW ORLEANS, LA 70113 SECOND HARVEST FOOD BANK 501 (C)(3) CHARITABLE 700 EDWARDS AVENUE NEW ORLEANS, LA 70123 650, 501 (C)(3) CHARITABLE ST. JOHN CEMETARY ASSOCIATION 718 JACKSON STREET THIBODAUX LA 70301 500, 501 (C)(3) CHARITABLE HOSPICE OF ACADIANA 2600 JOHNSON STREET, SUITE 200 200. LAFAYETTE, LA 70503 Total from continuation sheets

FORM 990-PF DIVIDENT	S AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT	.)
MORGAN STANLEY [575-116082-00 MORGAN STANLEY [575-121360-00			5,835. 768.		0.	5,8 7	35. 68.
TOTAL TO FM 990-PF, PART I, I	n 4		6,603.		0.	6,6	03.
FORM 990-PF		TAX	ES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
U.S. TREASURY		25.		0.			0.
TO FORM 990-PF, PG 1, LN 18		25.		0.			0.
FORM 990-PF	0	THER E	XPENSES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
OTHER EXPENSES NONQUALIFYING DISTRIBUTION TO ERIK ANDOLSEK CHARITABLE		4,194.	4	,194.			0.
FUND TO FORM 990-PF, PG 1, LN 23		500.	4	0. ,194.			0.
10 10Id. 330 11, 10 1, ER 23			-				
FORM 990-PF	ОТН	ER INV	ESTMENTS	 		STATEMENT	4
DESCRIPTION			LUATION ETHOD	во	OK VALUE	FAIR MARKE VALUE	T
SMITH BARNEY - MUTUAL FUNDS			COST 416,158		116 150	416,158.	
SMITH BARNEY - MUTUAL FUNDS			COST		410,130.	410,1	

STATEMENT

FORM 990-PF

NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
JANE C. LEGIER P.O. BOX 518 METAIRIE, LA 700040518	DIRECTOR 1.00	0.	0.	0.
GABRIELLE LAMAR BROWN P.O. BOX 518 METAIRIE, LA 700040518	DIRECTOR 1.00	0.	0.	0.
PAMELA S. TAPIE P.O. BOX 518 METAIRIE, LA 700040518	SECRETARY 1.00	0.	0.	0.
ELIZABETH R. SCHOTT P.O. BOX 518 METAIRIE, LA 700040518	DIRECTOR 1.00	0.	0.	0.
ANNE LEE LEVERT P.O. BOX 518 METAIRIE, LA 700040518	PRESIDENT 1.00	0.	0.	0.
KATHERINE S. EMERY P.O. BOX 518 METAIRIE, LA 700040518	DIRECTOR 1.00	0.	0.	0.
ELIZABETH C DOBER P.O. BOX 518 METAIRIE, LA 700040518	DIRECTOR 1.00	0.	0.	0.
EDWARD C. LEVERT P.O. BOX 518 METAIRIE, LA 700040518	DIRECTOR 1.00	0.	0.	0.
WINSTON LEVERT GOULAS P.O. BOX 518 METAIRIE, LA 700040518	DIRECTOR 1.00	0.	0.	0.
STEPHANIE MARIE LEVERT P.O. BOX 518 METAIRIE, LA 700040518	DIRECTOR 1.00	0.	0.	0 .
TOTALS INCLUDED ON 990-PF, PA	AGE 6, PART VIII	0.	0.	0 .

PART VIII - LIST OF OFFICERS, DIRECTORS

TRUSTEES AND FOUNDATION MANAGERS

Form **8868** (Rev January 2013)

Department of the Treasury Internal Revenue Service

Scoo Acco F.2.3 Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

• If you Do not c Electron required of time to Personal visit www Part 1	are filing for an Automatic 3-Month Extension, complete refiling for an Additional (Not Automatic) 3-Month Extension for an Additional (Not Automatic) 3-Month Extension for an Additional (Not Automatic) 3-Month Extension for file Form 8868 if you can electronically file Form 8868 if you to file Form 990-T), or an additional (not automatic) 3-month file any of the forms listed in Part I or Part II with the extension of the file Form 990-T and requesting an automatic 3-Month Extension of Timestation required to file Form 990-T and requesting an automatic 3-Month Extension and automatic 3-Month Extensi	tension, of an automate you need a nth extension of ception of per formates ception of	complete only Part II (on page 2 of atic 3-month extension on a previous a 3-month automatic extension of tiresion of time. You can electronically form 8870, Information Return for (see instructions). For more details a	sly filed Forme to file (file Form 8) Transfers on the elemeded).	orm 8868. 6 months for a con 868 to request an Associated With C	extension ertain
	y corporations (including 1120-C filers), partnerships, REM ome tax returns.	IICs, and t	rusts must use Form 7004 to reques	st an exter	 nsion of time	>
Type or print	Name of exempt organization or other filer, see instru J. B. LEVERT FOUNDATION	ictions.		Employe	r identification num	• •
File by the due date for filing your return See instructions	N 1			Social se	ecurity number (SS	
Enter the	METAIRIE, LA 70004 Return code for the return that this application is for (file	e a separa	te application for each return)			04
Applicat	on	Return Code	Application Is For			Return Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
		02	Form 1041-A		·	08
Form 990		03	Form 4720		·	09
	20 (individual)	-			<u></u>	
Form 990		04	Form 5227			10
	O-T (sec 401(a) or 408(a) trust)	05	Form 6069			
Form 990	T (trust other than above) LISA REAVES	06	Form 8870			12
Telep	ooks are in the care of ► <u>PO BOX 518 - M</u> none No ► <u>504-828-2950</u>		FAX No 🕨			
	organization does not have an office or place of busines		•••	lf ab fa		ماد فالماد
	is for a Group Return, enter the organization's four digit	-				
box >	If it is for part of the group, check this box				ers the extension	is for
1 Fre	equest an automatic 3-month (6 months for a corporation DECEMBER 15, 2013 , to file the exemp	•	•		The automore	
	or the organization's return for	n organiza	mon return for the organization ham	eu above	THE EXTERISION	
15 1	calendar year or					
		, an	d ending APR 30, 2013			
2 If t	he tax year entered in line 1 is for less than 12 months, c Change in accounting period	check reas	on. Initial return	Final retur	n	
	his application is for Form 990 BL, 990-PF, 990-T, 4720, prefundable credits. See instructions	or 6069, e	inter the tentative tax, less any	3a	s	0.
	his application is for Form 990 PF, 990-T, 4720, or 6069,	enter anv	refundable credits and		T	
	imated tax payments made. Include any prior year overs	•		3ь	s	0.
	lance due, Subtract line 3b from line 3a. Include your pa			- ""	* -	<u>*•</u>
	using EFTPS (Electronic Federal Tax Payment System)			3с	s	0.
	If you are going to make an electronic fund withdrawal				EO for payment in	
	or Privacy Act and Paperwork Reduction Act Notice,				Form 8868 (F	

Form 8868 (Rev. 1-2013)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ext	tension, o	complete only Part II and check this	box		X
Note. Only complete Part II if you have already been granted an a				8868	
If you are filing for an Automatic 3-Month Extension, complet					
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies needed).	
		Enter filer's	identifyır	ng number, see in	structions
Type or Name of exempt organization or other filer, see instruc	ctions			r identification num	
print		,			
File by the J. B. LEVERT FOUNDATION					
due date for Number, street, and room or suite no. If a P.O. box, se	Social se	curity number (SS	N)		
filing your return See P. O. BOX 518					
Instructions City, town or post office, state, and ZIP code For a fo	reign add	fress, see instructions			
METAIRIE, LA 70004					
Enter the Return code for the return that this application is for (file	a separa	te application for each return)	•		0 9
	,	· · · · · · · · · · · · · · · · · · ·			
Application	Return	Application			Return
ls For	Code	Is For			Code
Form 990 or Form 990-EZ	01				
Form 990-BL	02	Form 1041-A			08
Form 4720 (Individual)	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a prev	iously file	ed Form 8868.	
LISA REAVES	ים א אחם	TE TA 70004			
• The books are in the care of PO BOX 518 - ME	TAIK.	IE, LA /0004 FAX No ▶			
Telephone No ► 504-828-2950	46				
If the organization does not have an office or place of business If the organization does not have an office or place of business			f this is fo	the whole area	chask thus
 If this is for a Group Return, enter the organization's four digit of box If it is for part of the group, check this box 	,	ach a list with the names and EINs of			
box I fit is for part of the group, check this box I request an additional 3-month extension of time until		H 15, 2014	all memb	ers the extension i	5 101
5 For calendar year, or other tax year beginning			ממג ה	30 2013	
6 If the tax year entered in line 5 is for less than 12 months, c			Final r		
Change in accounting period	nçok reas	inda retain	, ,,,,,	etam	
7 State in detail why you need the extension					
ALL INFORMATION NECESSARY TO I	PREPA	RE A COMPLETE AND	ACCUR	ATE TAX R	ETURN
HAS NOT YET BEEN RECEIVED.					
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
nonrefundable credits. See instructions			8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated			
tax payments made include any prior year overpayment all	lowed as	a credit and any amount paid	L		
previously with Form 8868			8b	\$	0.
c Balance due, Subtract line 8b from line 8a Include your pa	yment wr	th this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System) See instru	uctions		8c	\$	0.
Signature and Verificat	ion mu	st be completed for Part II o	nly.		
Under penalties of perjury, I declare that I have examined this form, includ		panying schedules and statements, and to	the best o	of my knowledge and	belief,
it is true, correct, and complete, and that I am authorized to prepare this fo	X			21,12	1211
Signature > Varnels > Caper Title >	sel	retary	Date	1/18/2	ury
`		1		Form 8868 (F	Rev 1-2013)