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Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury

SCANNED MAY

Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service 10/03 . 2014, and ending 12/31, 2014 For calendar year 2014 or tax year beginning A Employer identification number Name of foundation CRAIG & CARRIE LEVERING CHARITABLE FOUNDATION 47-1999350 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (214) 616-9815 9320 ROCKBROOK DRIVE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here • • DALLAS, TX 75220 G Check all that apply X Initial return Initial return of a former public charity D 1 Foreign organizations, check here . Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method X Cash Fair market value of all assets at Accrual If the foundation is in a 60-month termination end of year (from Part II, col (c), line Other (specify) under section 507(b)(1)(B), check here . > 1,926,787. (Part I, column (d) must be on cash basis) *16)* ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and total of amounts in columns (b), (c), and (d) (b) Net investment (c) Adjusted net for charitable expenses per may not necessarily equal the amounts in ıncome income purposes books column (a) (see instructions)) (cash basis only) 2,000,000 Contributions, gifts, grants, etc., received (attach schedule) if the foundation is not required to Check > attach Sch B 121 121. ATCH 1 3 Interest on savings and temporary cash investments. Dividends and interest from securities . . b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 80 Capital gain net income (from Part IV, line 2) . O <u> 1 2 2015</u> Income modifications . 10 a Gross sales less returns and allowances Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 2,000,121. 121 12 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc . . 13 Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 2,038. 16a Legal fees (attach schedule) ATCH 2 b Accounting fees (attach schedule) **Administrative** c Other professional fees (attach schedule). . . 17 Taxes (attach schedule) (see instructions). . . 19 Depreciation (attach schedule) and depletion. 20 21 Travel, conferences, and meetings 22 Printing and publications 23 46. 46. Other expenses (attach schedule) ATCH .3. 24 Total operating and administrative expenses. 2,084. 46. Add lines 13 through 23. 71,250. 71,250. Contributions, gifts, grants paid 25 73,334. 46. 71,250. 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 1,926,787. a Excess of revenue over expenses and disbursements . . 75. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). .

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Form **990-PF** (2014)

PAGE

Form 990-PF (2014)

6

1,926,787.

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . .

Page 3

Pa	rt IV Capital Gains	and Losses for Tax on Inv	estment Income			
		(e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold	
	2-story b	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)		
<u>1a</u>						
b						
C						
d						
<u>e</u>			· · · · · · · · · · · · · · · · · · ·			<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
а				_		
<u>b</u>				_	_	
<u></u> C						
<u>d</u>						
<u>e</u>	0 :: 1:1 1 1					
	Complete only for assets	showing gain in column (h) and own			Gains (Col (h) g	
((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	col	(k), but not less t Losses (from co	
<u>a</u>						
<u>b</u>						
<u> </u>						
d	····					
е		<u> </u>				
2	Capital gain net income		f gain, also enter in Part I, line 7			
_	. •	_ ` ' ' ' \	f (loss), enter -0- in Part I, line 7	2		
3		ain or (loss) as defined in sections		1 1		
			structions) If (loss), enter -0- in $\}$			
		Under Costion 4040/-\ for Do		3		
			educed Tax on Net Investment In the section 4940(a) tax on net investi			
Wa		Tours and part blank	butable amount of any year in the b			Yes No
1					<u></u>	
<u> </u>	(a)		ar, see the instructions before makin	ig any enti !	ries (d)	
Cal	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	į	Distribution ra	
	2013			<u> </u>	(col (b) divided by	<u>coi (c))</u>
	2012					
	2011					
	2010					
	2009					
					-	
2	Total of line 1, column (c	1)		2		
			de the total on line 2 by 5, or by the	-		
•			ss than 5 years	3		
4	Enter the net value of no	ncharitable-use assets for 2014 fi	rom Part X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	If line 8 is equal to or g Part VI instructions	reater than line 7, check the box	ın Part VI, line 1b, and complete	8 that part	using a 1% tax	rate See the

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 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"

Form 990-PF (2014)

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Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

4a 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 purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? Form 990-PF (2014)

X

X

Form 990-PF (2014)

Total number of other employees paid over \$50,000......

and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE" (a) Name and address of each person paid more from \$50,000 (b) Type of services (c) Compensation NONE Fortility A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the lax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 NONE Part IX-B Summary of Program-Related investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3 NONE All other program-related investments See instructions 3 NONE	Form 990-PF (2014)	Page 7
(e) Name and address of each person paid more than \$50,000 NONE Total number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the lax year Include relevant statistical information such as the number of generators and other beneficiaries served, conferences convened, research papers produced, etc. 1 NONE 2	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	yees,
Total number of others receiving over \$50,000 for professional services	3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONI	<u>.</u> ."
Fotal number of others receiving over \$50,000 for professional services. Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activites during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences conversed, research papers produced, etc. 1 NONE 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NONE All other program-related investments See instructions 3 NONE		
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organizations and other beneficianes served, conferences convened, research papers produced, etc 1	Part IX-A Summary of Direct Charitable Activities	
2 3 4 Part IX-B Summary of Program-Related investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount Amount All other program-related investments See instructions 3 NONE		Expenses
2 3 4 Part IX-B Summary of Program-Related investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount Amount All other program-related investments See instructions 3 NONE	1 NONE	
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1 NONE 2 All other program-related investments See instructions 3 NONE		· · · · · · · · · · · · · · · · · · ·
All other program-related investments See instructions 3 NONE	WALE	Amount
All other program-related investments See instructions 3 NONE	1 NONE	
All other program-related investments See instructions 3 NONE		
All other program-related investments See instructions 3 NONE		-
3 NONE	4	
3 NONE		
3 NONE	All other program-related investments. See instructions	-
Total. Add lines 1 through 3	<u> </u>	
Total, Add lines 1 through 3	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
	Total. Add lines 1 through 3	<u> </u>

Form **990-PF**(2014)

Form 9	90-PF (2014)		Page 8
Pari	Minimum Investment Return (All domestic foundations must complete this part. Foreisee instructions)	gn foun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	1,308,926.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,308,926.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,308,926.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	19,634.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,289,292.
6	Minimum investment return. Enter 5% of line 5	6	15,895.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here and do not complete this part)	dations	 ,
1	Minimum investment return from Part X, line 6	1	15,895.
2а	Tax on investment income for 2014 from Part VI, line 5 2a 2		
b	Income tax for 2014 (This does not include the tax from Part VI)	1	
c	Add lines 2a and 2b	2c	2.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	15,893.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	15,893.
6	Deduction from distributable amount (see instructions).		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII.		
•	line 1	7	15,893.
Par	Qualifying Distributions (see instructions)	<u> </u>	
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	71,250.
b	Program-related investments - total from Part IX-B	1b	
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	71,250.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	 -	71,230.
5	Enter 1% of Part I, line 27b (see instructions)	5	n
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	71,250.
U	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when co		
	qualifies for the section 4940(e) reduction of tax in those years	aiculatii	ig whether the roundation

Form 990-PF (2014)

_	n 990-PF (2014)				Page 9
Pá	rt XIII Undistributed Income (see instruc	tions)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7				15,893.
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only				
b	Total for pnor years 20_12 ,20_11 ,20_10				
3	Excess distributions carryover, if any, to 2014		<u>.</u>		
а	From 2009				
b	From 2010				
C	From 2011				
	From 2012				
	From 2013				
f	Total of lines 3a through e			<u></u>	
4	,,				
	line 4 ▶ \$ 71,250.				
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)			_	
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2014 distributable amount				15,893.
	Remaining amount distributed out of corpus	55,357.			
5	Excess distributions carryover applied to 2014				
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	55,357.			
b	Prior years' undistributed income Subtract line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b Taxable				
е	amount - see instructions Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions				
f	Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	<u></u>			
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.	,, ,,,			
	Subtract lines 7 and 8 from line 6a	55,357.			
	Analysis of line 9				
а	Excess from 2010			İ	
b	Excess from 2011	İ			
C		İ			
d	Excess from 2013				
е	Excess from 2014 55,357.				

N/A

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

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

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

c Any submission deadlines

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

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Form 990-PF (2014)

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Form 990-PF (2014) Part XV Supplementary Information ((continued)			Page 1
3 Grants and Contributions Paid Duri	ing the Year or Appl	roved for F	Future Payment	
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
Amour 6				
ATCH 6				
				
Total	·····		<u></u> ▶ 3a	71,250
• Approved for future payment				
Total			▶ 3ь	

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Form **990-PF** (2014)

	A Analysis of Income-Produ	ucing Activ	/ities			
nter gross	amounts unless otherwise indicated		ated business income	Excluded by	section 512, 513, or 514	(e)
Ū	service revenue	(a) Business code	(b) Amount	(c)	(d) Amount	Related or exempt function income (See instructions)
-						, and a second of
. —						
c						
d						
e						
f					-	
-	and contracts from government agencies	-		-		-
	ship dues and assessments			14	121.	
	s and interest from securities					-
	al income or (loss) from real estate		····			
a Debt-	financed property					
	lebt-financed property					
	I income or (loss) from personal property .					
Other in	vestment income			1		
•	oss) from sales of assets other than inventory	/ <u> </u>				
	me or (loss) from special events			-		
•	rofit or (loss) from sales of inventory					<u> </u>
_	venue a					
e						
Subtotal	Add columns (b), (d), and (e)				121.	
art XVI-	B Relationship of Activities		complishment of E	xempt Purp	oses	
ne No. ▼	Explain below how each activi accomplishment of the foundati	-			•	
	Explain below how each activi	-			•	
	Explain below how each activi	-			•	
	Explain below how each activi	-			•	
	Explain below how each activi	-			•	
	Explain below how each activi	-			•	
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	Explain below how each activi	-			•	
	Explain below how each activi	-			•	

Part	<u></u>		Regarding Tran	nsfers To and				ps With Non			ge 13
ır	secti	organization direction 501(c) of the Creations?			-					Yes	No
	a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash										
			_						1a(1)		х
									1a(2)		Х
		ransactions.	4.10								v
(i) Sai	es of assets to a n	oncharitable exem	pt organization					1b(1)		X
(·	2) Pui 3) Rer	chases of assets f ntal of facilities, equ	iunment or other a	ne exempi organiza necete	ation,				15(2)		X
(4	4) Rei	mbursement arrang	aements						1b(4)		Х
) (!	, 5) Loa	ins or loan guarante	ees			 			1b(5)		Х
(1	6) Per	formance of servic	es or membership	o or fundraising so	licitations .				1b(6)		Х
c S	haring	g of facilities, equip	ment, mailing lists	s, other assets, or	paid employ	ees			1c		Х
d If	the a	answer to any of t	the above is "Yes	," complete the f	ollowing so	hedule C	olumn (b) shou	ld always show	the !	fair m	ıarke
		of the goods, other in any transaction o									
(a) Line		(b) Amount involved		ncharitable exempt org			ription of transfers, t				
(4) 2(- 110	N/A	(c) Name of no	Terramable exempt dig	anization	N/A	iption of transfers, t	iansactions, and sna	ing arre	ingenie	1113
		· · · · · · · · · · · · · · · · · · ·	1			-					
-			-								
		 <u></u>	_								
	-		_								
											
		-:		 							
										-	
	_										
											
				·							
d	escrib	foundation directly ed in section 501(o " complete the foll	c) of the Code (oth	er than section 50	01(c)(3)) or	ın section				es X] No
	100,	(a) Name of organizati		(b) Type of o			(c) De	escription of relations	ship		
					_ 			· · ·			
		 .									
	Linder	penalties of perjugy, I dec	clare that lehave examine	d the setum including	accompanying co	hadulas and s	tatements, and to the	hast of my knowled	o and I	achef it	40. 10.4
		t, and complete Declaration						best of my knowledg	je aliu i	Jener, II	is true
Sign		MM	m	15/61		2:	reuter	May the IR			
Here	Sign	ature of officer or trustee	e	Date		Title		with the pr (see instruction		Yes	below No
		,	ľ			_		1222	,		
Paid	-	Print/Type preparer's r		Preparer's signature	MINER IM	<u>l</u>	Date	Check X If	PTIN		
		WILLIAM F MIRANDA		WILLIAM F MIRAN	DA JR, CPA	·	04/30/201			2280	4
Prepa	arer	Firm's name W	ILLIAM MIRAN	DA, CPA			Firm	n's EIN ▶ 20-3	3862	82	

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Form **990-PF** (2014)

972-235-7005

Phone no

Use Only Firm's address ▶ 100 N. CENTRAL EXPY, SUITE 912 RICHARDSON, TX

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

2014

Department of the Treasury Internal Revenue Service ► Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number CRAIG & CARRIE LEVERING CHARITABLE FOUNDATION 47-1999350 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 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 on line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization CRAIG & CARRIE LEVERING CHARITABLE FOUNDATION

Employer identification number 47-1999350

			47-1999350
art I	Contributors (see instructions). Use duplicate copies of P	art I if additional space is nee	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
- 1 -	CRAIG & CARRIE LEVERING 9320 ROCKBROOK DRIVE DALLAS, TX 75220	\$2,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
- 		. \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
- 		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$. \$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization CRAIG & CARRIE LEVERING CHARITABLE FOUNDATION

Employer identification number

47-1999350 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Date received Description of noncash property given Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Schedule B	Form 990	990-E7	or 990-DE	(2014)
ocneguie B ((Form 990,	99U-EZ,	or 990-PF;	(2014)

Page 4

Name of or	rganization CRAIG & CARRIE LEVERIN	G CHARITABLE FO	OUNDATION	Employer identification number 47-1999350			
Part III	Exclusively religious, charitable, etc that total more than \$1,000 for the y following line entry. For organizations contributions of \$1,000 or less for the Use duplicate copies of Part III if addit	year from any one o s completing Part III, e year. (Enter this in	contributor. Compenter the total of ϵ formation once. Se	lete columns (a) through (e) and the exclusively religious, charitable, etc.			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
_							
		(e) Transf	er of gift				
	Transferee's name, address, at	nd ZIP + 4	Relation	nship of transferor to transferee			
(a) No		-					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Rela		Relation	onship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
		+					
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relati			nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
		(e) Transf	er of gift				
	Transferee's name, address, at	nd ZIP + 4	Relation	nship of transferor to transferee			
			•••	Schodulo B (Form 900, 990 F7, or 990 PF) (2014)			

<u> 4</u> 24

ATTACHMENT 1

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

	REVENUE	
	AND	NET
	EXPENSES	INVESTMENT
DESCRIPTION	PER BOOKS	INCOME

121.

121.

TOTAL

NORTH DALLAS BANK & TRUST

ATTACHMENT 1 PAGE 18

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ATTACHMENT

- LEGAL FEES PART I FORM 990PF,

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT INCOME

ADJUSTED NET INCOME

TOTALS

ANDREWS & BARTH

DESCRIPTION

CHARITABLE PURPOSES

2,038.

2,038.

ATTACHMENT 2 PAGE 19

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ATTACHMENT 3

- OTHER EXPENSES PART I FORM 990PF,

DESCRIPTION HARLAND CLARKE CHECK ORDER

AND EXPENSES PER BOOKS

REVENUE

INVESTMENT INCOME NET

46.

46.

46.

TOTALS

ATTACHMENT 3 PAGE 20

V 14-4.5F 6:13:03 PM 1462IY 719L 4/30/2015 FORM 990PF, PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 4

NAME AND ADDRESS

CRAIG & CARRIE LEVERING 9320 ROCKBROOK DRIVE DALLAS, TX 75220

ATTACHMENT 4 PAGE 21 ATTACHMENT 5

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NS EXPENSE ACCT AND OTHER ANS ALLOWANCES	0	0	0	0	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS					
COMPENSATION	0	0	0	0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR	DIRECTOR	DIRECTOR	DIRECTOR	GRAND TOTALS
NAME AND ADDRESS	CRAIG R. LEVERING 9320 ROCKBROOK DRIVE DALLAS, TX 75220	CARRIE A. LEVERING 9320 ROCKBROOK DRIVE DALLAS, TX 75220	CHRISTEN LEVERING REDLICH 9320 ROCKBROOK DRIVE DALLAS, TX 75220	COURTNEY R. LEVERING 9320 ROCKBROOK DRIVE DALLAS, TX 75220	

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

71,250. TOTAL CONTRIBUTIONS PAID HEALTHCARE; COMMUNITY OUTREACH EDUCATION; COMMUNITY OUTREACH MISSIONARY STAFF SUPPORT

UNRELATED

FAMILY LEGACY MISSIONS INTERNATIONAL

5005 W ROYAL LANE SUITE 252

IRVING, TX 75063

2

250.

500.

EDUCATION

UNRELATED

THE HOCKADAY SCHOOL

11600 WELCH ROAD DALLAS, TX 75229

DALLAS, TX 75205

2943 SMU BLVD

PC

UNRELATED

TEXAS SCOTTISH RITE HOSPITAL

222 WELBORN STREET

DALLAS, TX 75219

ğ

50,000

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

ST MARK'S SCHOOL OF TEXAS

10600 PRESTON ROAD

DALLAS, TX 75230

UNRELATED

P.C

UNRELATED

GEORGE W BUSH PRESIDENTIAL CENTER

2

EDUCATION

ATTACHMENT 6

20,000

500.

PAGE 23 ATTACHMENT 6