



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Private Foundation**  
**or Section 4947(a)(1) Trust Treated as Private Foundation**  
 ▶ Do not enter social security numbers on this form as it may be made public.  
 ▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052  
**2016**  
**Open to Public Inspection**

**For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016**

Name of foundation CASSIDY FOUNDATION		A Employer identification number 64-6035417	
Number and street (or P O box number if mail is not delivered to street address) P O BOX 40		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code MARKS, MS 38646		B Telephone number (see instructions)	
G Check all that apply: <input type="checkbox"/> Initial return, <input type="checkbox"/> Initial return of a former public charity, <input type="checkbox"/> Final return, <input type="checkbox"/> Amended return, <input type="checkbox"/> Address change, <input type="checkbox"/> Name change		C If exemption application is pending, check here <input type="checkbox"/> D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation, <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust, <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 327,787		J Accounting method: <input type="checkbox"/> Cash, <input checked="" type="checkbox"/> Accrual, <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities	14,436	14,436	14,436	
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	1,173			
	<b>b</b> Gross sales price for all assets on line 6a 30,500				
	<b>7</b> Capital gain net income (from Part IV, line 2)		1,173		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	15,609	15,609	14,436		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc				
	<b>14</b> Other employee salaries and wages	3,000		3,000	
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)				
	<b>c</b> Other professional fees (attach schedule)				
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	554	30	554	
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	1,746	871	1,746	
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	5,300	901	5,300	0
	<b>25</b> Contributions, gifts, grants paid	30,000			30,000
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	35,300	901	5,300	30,000	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	-19,691				
<b>b Net investment income</b> (if negative, enter -0-)		14,708			
<b>c Adjusted net income</b> (if negative, enter -0-)			9,136		

<b>Part II Balance Sheets</b> 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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	20,055	16,175	16,175
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	277,146	261,335	311,612
	<b>14</b> Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	297,201	277,510	327,787	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .			
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund	424,354	424,354	
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	-127,153	-146,844		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	297,201	277,510		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	297,201	277,510		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>			
<b>1</b> 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)		<b>1</b>	297,201
<b>2</b> Enter amount from Part I, line 27a . . . . .		<b>2</b>	-19,691
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____		<b>3</b>	
<b>4</b> Add lines 1, 2, and 3 . . . . .		<b>4</b>	277,510
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____		<b>5</b>	
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .		<b>6</b>	277,510

**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)
<b>1 a</b> LONGLEAF PARTNERS FUND	P	2012-11-08	2016-07-21
<b>b</b> LONGLEAF PARTNERS SMALL CAP	P	2005-11-09	2016-07-21
<b>c</b> AMERICAN FUNDS INCOME FUND OF AMER	P	2006-12-26	2016-12-21
<b>d</b>			
<b>e</b>			

  

(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)
<b>a</b> 10,000		10,815	-815
<b>b</b> 10,000		8,777	1,223
<b>c</b> 10,500		9,735	765
<b>d</b>			
<b>e</b>			

  

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	
<b>a</b>			-815
<b>b</b>			1,223
<b>c</b>			765
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	2	1,173
<b>3</b> 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 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 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))
2015	29,750	345,732	0 086049
2014	52,750	385,336	0 136894
2013	67,500	391,472	0 172426
2012	92,470	413,201	0 223789
2011	64,750	465,872	0 138987

  

<b>2</b> Total of line 1, column (d)	2	0 758145
<b>3</b> 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 151629
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	309,772
<b>5</b> Multiply line 4 by line 3	5	46,970
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	147
<b>7</b> Add lines 5 and 6	7	47,117
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	30,000

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and total tax due/overpayment. Total tax due is 150, with 150 refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No' responses. Questions cover political activities, unrelated business income, and substantial contributors.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-13 regarding controlled entities, donor advised funds, and public inspection requirements.

14 The books are in care of CLARK GRAEBER Telephone no (662) 326-2481

Located at W MAIN ST MARKS MS ZIP+4 38646

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

16 At any time during calendar year 2016, 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? Includes instructions for FinCEN Form 114.

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.

Main table for Part VII-B with columns for questions and Yes/No responses. Rows include 1a (disqualified person acts), 2 (taxes on failure to distribute income), 3a (business enterprise interest), and 4a/b (jeopardy investments).

**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))?  Yes  No

**(2)** Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

**(3)** Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

**(4)** Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).  Yes  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?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No  
 Organizations relying on a current notice regarding disaster assistance check here.

**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?  Yes  No  
 If "Yes," attach the statement required by Regulations section 53.4945–5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No  
 If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

**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 instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) 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 instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> 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 tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
<b>1</b> FUNDS GRANTS TO QUITMAN COUNTY EDUCATIONAL FOUNDATION	12,000
<b>2</b> FUNDS SECONDARY EDUCATIONAL SCHOLARSHIPS TO RESIDENTS OF QUITMAN COUNTY	18,000
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	296,077
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	18,115
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	297
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	314,489
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	314,489
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	4,717
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	309,772
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	15,489

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	15,489
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	294
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	294
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	15,195
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	15,195
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	15,195

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	30,000
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	30,000
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	30,000

**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 instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				15,195
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .				
<b>b</b> Total for prior years 20___, 20___, 20___				
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .	41,788			
<b>b</b> From 2012. . . . .	72,037			
<b>c</b> From 2013. . . . .	48,388			
<b>d</b> From 2014. . . . .	34,252			
<b>e</b> From 2015. . . . .	12,819			
<b>f</b> Total of lines 3a through e. . . . .	209,284			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ _____ 30,000				
<b>a</b> Applied to 2015, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2016 distributable amount. . . . .				15,195
<b>e</b> Remaining amount distributed out of corpus	14,805			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	224,089			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .				0
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .	41,788			
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .	182,301			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .	72,037			
<b>b</b> Excess from 2013. . . . .	48,388			
<b>c</b> Excess from 2014. . . . .	34,252			
<b>d</b> Excess from 2015. . . . .	12,819			
<b>e</b> Excess from 2016. . . . .	14,805			

**Part XIV Private Operating Foundations** (see 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 2016, 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)

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2016</b>	<b>(b) 2015</b>	<b>(c) 2014</b>	<b>(d) 2013</b>	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**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

---

**2 Information 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 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  
CHRIS HAWKINS  
244 EAST MAIN  
MARKS, MS 38646  
(662) 326-6921

**b** The form in which applications should be submitted and information and materials they should include  
SEE ATTACHED COPY OF APPLICATION

**c** Any submission deadlines  
NONE

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
MUST ATTEND QUITMAN COUNTY SCHOOL FOR 10TH,11TH, & 12TH GRADE

**Part XV** **Supplementary Information** (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i> SEE ATTACHED SCHEDULE QUITMAN COUNTY Marks, MS 38646	NONE	I	EDUCATIONAL	18,000
<b>Total</b> . . . . . ▶ <b>3a</b>				18,000
<b>b</b> <i>Approved for future payment</i> QUITMAN COUNTY EDUCATIONAL FOUNDATI PO BOX 70 Marks, MS 38646	NONE	NC	EDUCATIONAL	12,000
<b>Total</b> . . . . . ▶ <b>3b</b>				12,000





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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JAMES BURGESS 601 ELM MARKS, MS 38646	SECRETARY 0 00	0	0	0
LARRY O LEWIS 200 N THIRD ST MARKS, MS 38646	TRUSTEE 0 00	0	0	0
CLARK GRAEBER W MAIN ST MARKS, MS 38646	TRUSTEE 1 00	0	0	0
GOLY R HENRY 501 WALNUT MARKS, MS 38646	TRUSTEE 0 00	0	0	0
THOMAS CLAYTON 202 BERKLEY DRIVE MARKS, MS 38646	TRUSTEE 0 00	0	0	0
BILL GRAEBER W MAIN ST Marks, MS 38646	TRUSTEE 0 00	0	0	0

**efile GRAPHIC print - DO NOT PROCESS**

**As Filed Data -**

**DLN: 93491138004017**

# **TY 2016 Explanation of Non-Filing with Attorney General Statement**

**Name:** CASSIDY FOUNDATION

**EIN:** 64-6035417

**Statement:** NOT REQUIRED IN MISSISSIPPI

**TY 2016 Investments - Other Schedule****Name:** CASSIDY FOUNDATION**EIN:** 64-6035417

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
USB FINANCIAL SERVICES		252,286	282,962
FIRST VALLEY NATIONAL		399	20,000
LOTS		8,500	8,500
FEDERAL ESTIMATED TAX		150	150

**TY 2016 Other Expenses Schedule****Name:** CASSIDY FOUNDATION**EIN:** 64-6035417**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL & PROFESSIONAL	875	0	875	0
INVESTMENT FEES	871	871	871	0

**TY 2016 Taxes Schedule****Name:** CASSIDY FOUNDATION**EIN:** 64-6035417

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
PAYROLL TAXES	230	0	230	0
FEDERAL INCOME TAX	294	0	294	0
FOREIGN TAX	30	30	30	0

THE CASSIDY FOUNDATION  
P O BOX 352  
MARKS, MISSISSIPPI 38646  
64-6035417  
2016 FORM 990-PF

PAGE 11 PART XV LINE 3 GRANTS AND CONTRIBUTIONS

	<u>AMOUNT</u>
PATRICK ASIS - NORTHWEST COMMUNITY COLLEGE	250 00
DAVID ATWOOD - NORTHWEST COMMUNITY COLLEGE	250 00
ARLIE STRIDER - MISSISSIPPI STATE UNIVERSITY	250 00
ANNA SLOAN CLAYTON - MISSISSIPPI STATE UNIVERSITY	500 00
EMMA DILLEY - UNIVERSITY OF MISSISSIPPI	250 00
KENNON TURNER - MISSISSIPPI STATE UNIVERSITY	250 00
CLAIBORNE WHITE - UNIVERSITY OF MISSISSIPPI	250 00
MATTHEW BROOKS - NORTHWEST COMMUNITY COLLEGE	250 00
SARAH CRAIG - NORTHWEST COMMUNITY COLLEGE	250 00
CLAY HARBOUR-NORTHWEST COMMUNITY COLLEGE	250 00
CODY HARBOUR-COAHOMA COMMUNITY COLLEGE	250 00
ROBERT BREWER - NORTHWEST COMMUNITY COLLEGE	500 00
RENZ DELUBIO - NORTHWEST COMMUNITY COLLEGE	250 00
HUNTER WILLIAMS - NORTHWEST COMMUNITY COLLEGE	250 00
IAN WINDHAM - GRINNEL COLLEGE	500 00
QUITMAN COUNTY EDUCATIONAL FOUNDATION	7,000 00
WILLIAM WEAVER - MISSISSIPPI STATE UNIVERSITY	250 00
HARRISON FOWLER - NORTHWEST COMMUNITY COLLEGE	250 00
ROBERT BREWER - NORTHWEST COMMUNITY COLLEGE	500 00
JACOB HEFFNER - BLUE MOUNTAIN COLLEGE	250 00
LAURA KATE FORTNER - DELTA STATE UNIVERSITY	250 00
MADISON MCBRIDE - NORTHWEST COMMUNITY COLLEGE	250 00
KENNON TURNER - MISSISSIPPI STATE UNIVERSITY	250 00
ELIZABETH FORESMAN - UNIVERSITY OF MS MEDICAL CENTER	500 00
MIRANDA CUFF - SOUTHERN ARKANSAS UNIVERSITY	500 00
TRISTAN WHALEN - EAST MS COMMUNITY COLLEGE	250 00
RIVERS MITCHELL - NORTHWEST COMMUNITY COLLEGE	250 00
ASHLEY KELLER - DELTA STATE UNIVERSITY	250 00
MARY GRACEN REED - TEXAS CHRISTIAN UNIVERSITY	250 00
MARY HARRIS - DELTA STATE UNIVERSITY	500 00
EMMA HAYNES - UNIVERSITY OF MISSISSIPPI	500 00
CLAIBORNE WHITE - UNIVERSITY OF MISSISSIPPI	250 00
MATT STOVALL - MISSISSIPPI STATE UNIVERSITY	250 00
ARLIE STRIDER - MISSISSIPPI STATE UNIVERSITY	500 00
ELIZABETH FORESMAN - MISSISSIPPI STATE UNIVERSITY	500 00
BRANDI DOSS - UNIVERSITY OF MISSISSIPPI	500 00
ARLILLIAN QUINN - MISSISSIPPI STATE UNIVERSITY	250 00
BRANDI DOSS - UNIVERSITY OF MISSISSIPPI	500 00
SIDNEY SYKES - NORTHWEST COMMUNITY COLLEGE	250 00
BARRY SIMMERMAN - MISSISSIPPI STATE UNIVERSITY	500 00
JACK SULLIVAN - HOLMES COMMUNITY COLLEGE	250 00
ANNA SLOAN CLAYTON - MISSISSIPPI STATE UNIVERSITY	500 00
CHANDLER WILLIAMS - EAST COMMUNITY COLLEGE	250 00
MIRANDA CUFF - SOUTHERN ARKANSAS UNIVERSITY	500 00
RANE RAYBURN - DELTA STATE UNIVERSITY	500 00
KAITLYN WRIGHT - COAHOMA CUMMUNITY COLLEGE	250 00
MARY SPENCER ALDRIDGE - UNIVERSITY OF MISSISSIPPI	250.00
SYDNEY SYKES - NORTHWEST COMMUNITY COLLEGE	250 00
EMILY GROSSI - DELTA STATE UNIVERSITY	250 00
MARY HARRIS - DELTA STATE UNIVERSITY	500 00
EMILY GROSSI - DELTA STATE UNIVERSITY	250 00
SABRINA SMITH - DELTA STATE UNIVERSITY	500 00
TRISTAN WHALEN - MS UNIVERSITY FOR WOMEN	250 00
LAURA KATE FORTNER - DELTA STATE UNIVERSITY	250 00
VELMA WEBB - UNIVERSITY OF SOUTHERN MS	250 00
QUITMAN COUNTY EDUCATIONAL FOUNDATION	5,000 00

TOTALS

30,000 00