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EXTENDED TO NOVEMBER 15, 2
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.

					i this form as it may be ma instructions is at www.irs		Open to Public Inspection
				2016	, and ending	DEC 30, 2016	
Nai	ne of	foundation				A Employer identification	number
		CASEY FAMILY FOUNDATION				81-4080931	
		nd street (or P O box number if mail is not delivered to street WATERFORD PLACE	address)		Room/suite	B Telephone number 919-998-24	85
-		own, state or province, country, and ZIP or foreign p ${f PEL\ HILL}$, ${f NC}$ 27517	ostal code			C If exemption application is p	ending check here
H (heck	Initial return Final return Address change type of organization: Ction 4947(a)(1) nonexempt charitable trust Final return Address change Type of organization: Address change Address change J Account	An Na	nended return me change e foundation le private found X Cash	ation Accrual	D 1 Foreign organizations 2 Foreign organizations me check here and attach co E If private foundation sta under section 507(b)(1) F If the foundation is in a under section 507(b)(1)	tus was terminated (A), check here
	\$	771,247. (Part I, colu			basis)	under section 507(b)(1)	(D), CHOOK HEIC
	rt I		(a) Re	venue and es per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	7	78,853.		N/A	(dash basis only)
	2	Check to if the loundation is not required to attach Sch B interest on savings and temporary cash investments		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		III/A	
	4	Dividends and interest from securities		372.	372.		STATEMENT 1
	5a	Gross rents					
	b	Net rental income or (loss)					
<u>o</u> (6a	Net garn or (loss) from sale of assets not on line 10 Gross sales price for all		0.		<u> </u>	
Revenue	b	assets on line 6a					<u> </u>
ž.	7	Capital gain net income (from Part IV, line 2)			0.	,	
	8	Net short-term capital gain	<u> </u>				
3	9	Income modifications Gross sales less returns					
	10a		-				
	Į.	Less Cost of goods sold	-				
•	11	Gross profit or (loss) Other income	-	-			
•	12	Total Add lines 1 through 11	7	79,225.	372.		
	13	Compensation of officers, directors, trustees, etc	 	0.	0.		0.
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits				<u> </u>	
es	16a	Legal fees STMT 2:		7,000.	7,000.		0.
Expenses	b	Accounting fees		7,7000	7,000		
X	C	Other professional fees	-				
Ve.	17	Interest 51 1151 m / 9811 10					
ati	18	Taxes					
ist	19	Depreciation and depletion.		<u> </u>			
ΞĖ	20	Occupancy Occupancy					
PΑ	21	Travel, conferences, and meetings					
pu	22	Printing and publications					
g S	23	Other expenses					
Operating and Administrative	24	Total operating and administrative					
be		expenses. Add lines 13 through 23		7,000.	7,000		0.
0	25	Contributions, gifts, grants paid		<u> 20,000.</u>			20,000.
	26	Total expenses and disbursements.					
	<u> </u>	Add lines 24 and 25		<u>27,000.</u>	7,000.	·	20,000.
	27	Subtract line 26 from line 12:					
		Excess of revenue over expenses and disbursements	7	<u>52,225.</u>			
	1	Net investment income (if negative, enter -0-)			0.		
	1 C	Adjusted net income (if negative enter -0-)	Ī		1	N/A	1

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	0.
2	Enter amount from Part I, line 27a	2	752,225.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add ines 1, 2, and 3	4	752,225.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	752,225.

Part IV Capital Gains	and Losses for Tax on I	nvestment	Income					
(a) attachment and the kind (b) of property sold (cog), tall (cog)						quired (d) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr.)
1a 10000SH. QUINT	ILES IMS HOLDING	3S					2/21/16	12/21/16
b								
<u>C</u>								
<u>d</u>								
<u>e</u>	(0 Danasakan allawa)	1 (1)0-1		<u> </u>			(1) 0(1	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss (e) plus (f) minus	(g)
a 778,853.			778,85	3.			- · 	0.
<u>b</u>								
<u>c</u>					_			
e		 						
	ng gain in column (h) and owned by	the foundation	on 12/31/69			(I) (Sains (Col. (h) gain	minus
	(j) Adjusted basis		cess of col. (i)			còl. (I	k), but not less tha	n -0-) or
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any	ŀ			Losses (from col.	(n))
a								0.
b								
<u>c</u>								
<u>d</u>		ļ						
<u>e</u>		<u> </u>	••		-			<u> </u>
2 Capital gain net income or (net ca	apital loss) { If gain, also enti If (loss), enter -	er ın Part I, line 0- ın Part I, line	7 7	}	2			0.
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) a	and (6):						
If gain, also enter in Part I, line 8,				 			 /	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Section 4940(e) fo	r Paducac	l Tay on Not	· leave	3 octo	ont Inco	N/A	<u> </u>
(For optional use by domestic private If section 4940(d)(2) applies, leave to Was the foundation liable for the sect If "Yes," the foundation does not quarter.	his part blank. tion 4942 tax on the distributable a	mount of any y	ear in the base pe		···/			N/A Yes No
1 Enter the appropriate amount in	each column for each year; see the	instructions be	fore making any e	entries				
(a) Base period years Calendar year (or tax year beginn	(b) Adjusted qualifying d	istributions	Net value of no	(c) oncha		use assets		(d) bution ratio vided by col. (c))
2015								
2014								
2013								
2012			-					
2011							 	
2 Total of line 1, column (d)							2	
3 Average distribution ratio for the	5-year base period - divide the total	I on line 2 by 5.	or by the number	r of ve	ars			
the foundation has been in existe	· ·		5. 5, the name of	0. ,0	u. o		3	
	,							
4 Enter the net value of noncharita	ble-use assets for 2016 from Part X	K, line 5					4	
5 Multiply line 4 by line 3							5	
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)						6	<u></u>
7 Add lines 5 and 6							7	
8 Enter qualifying distributions from	m Part XII, line 4						8	
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, check the box in Part VI, lir	ne 1b, and com	plete that part usii	ng a 1	% tax	rate.		

THE CASEY FAMILY FOUNDATION

81-4080931

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	990-PF (2016) THE CASEY FAMILY FOUNDATION	0(-1	40	40/h) 4040(a)			<u> 1080</u>			age 4
	rt VI Excise Tax Based on Investment Income (Section 494				or 49	48 -	see i	nstru	CTIO	is)
1a	Exempt operating foundations described in section 4940(d)(2), check here and e	nter "N/	/A" o	on line 1.						
	Date of ruling or determination letter: (attach copy of letter if nea					1				_
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ☐ and enter 1% ☐									0.
	of Part I, line 27b									
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Pai	rt I, I	ine 12, col. (b). 📗		ł				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers e	nter	-0-)	L	2				0.
3	Add lines 1 and 2				L	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C)thers e	enter	-0-)	L	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					5				0.
6	Credits/Payments:									
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a								
b	Exempt foreign organizations - tax withheld at source	6b								
C	Tax paid with application for extension of time to file (Form 8868)	_6c	\perp							
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 atta	ched				8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					9				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					10				
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax			Refunde	d ▶	11				
Pa	rt VII-A Statements Regarding Activities							,		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation	or di	id it participate or inte	ervene ir	ì			Yes	
	any political campaign?							1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (se	e in	structions for the def	inition)?			1b		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	nd co	pies	of any matenals p	ublishe	d or		1) '	
	distπbuted by the foundation in connection with the activities									
C	Did the foundation file Form 1120-POL for this year?							10		<u>X</u>
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e year.								
	(1) On the foundation. > \$ (2) On foundation managers	s. > \$	₿		0.			Ì		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend	iture ta	ıx ım	posed on foundation	l					
	managers. ► \$0.									
2	Has the foundation engaged in any activities that have not previously been reported to the I	RS?						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	ınstrun	nent	, articles of incorpora	ition, or					
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es						3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?						4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?					N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	7						5	_	X
	If "Yes," attach the statement required by General Instruction T									
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither:								
	By language in the governing instrument, or								ŀ	
	• By state legislation that effectively amends the governing instrument so that no mandato	ry direc	ction	s that conflict with th	e state l	aw				
	remain in the governing instrument?							6	X_	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," coa	mplete	Pa	rt II, col (c), and P	art XV			7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) 🕨								
	NC									
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the $\dot{\nu}$	Attorne	y Ge	neral (or designate)						
	of each state as required by General Instruction G? If "No," attach explanation							8b	X_	
9	Is the foundation claiming status as a private operating foundation within the meaning of \boldsymbol{s}	ection 4	4942	2(j)(3) or 4942(j)(5) f	or calen	dar				
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"	comple	ete	Part XIV				9	L	X
10	Did any persons become substantial contributors during the tay year? if Type T attach a sebed	1 1 -4:-	- 414		ST	ידישי	5	10	Y	

Form 990-PF (2016) THE CASEY FAMILY FOUNDAT			<u>81-40809:</u>	31 Page 6
Part VII-B Statements Regarding Activities for Which I Sa During the year did the foundation pay or incur any amount to. (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) influence the outcome of any specific public election (see section 4955); or any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit section 53.4945 or in a current notice regarding disaster assistance (see instructions) organizations relying on a current notice regarding disaster assistance check if the answer is "Yes" to question 5a(4), does the foundation claim exemption fexpenditure responsibility for the grant?	n 4945(e))? or to carry on, directly or indirectly or educational purposes, or form the exceptions described indictions)? Here in the tax because it maintal	ectly, Ye Petty, Ye Ye Ye Ye Ye Or Regulations	s X No s X No s X No s X No	31 Page 6
 If "Yes," attach the statement required by Regulations section 53.494. 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a part "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax so bif "Yes," did the foundation receive any proceeds or have any net income attributed tax so the foundation receive any proceeds or have any net income attributed tax so the foundation receive any proceeds or have any net income attributed tax so the foundation receive any proceeds or have any net income attributed tax so the foundation forms attributed tax so the foundatio	5-5(d). pay premiums on personal benefit contract? shelter transaction? utable to the transaction?	Ye	s X No	Sb X
Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their	componentian			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
PAUL F. CASEY 115 WATERFORD PLACE CHAPEL HILL, NC 27517	TRUSTEE 5.00	0.	0.	0.
SARAH B. CASEY 115 WATERFORD PLACE CHAPEL HILL, NC 27517	TRUSTEE 5.00	0.	0.	0.
O Company of five highest made and any law of the short has in	aluded on the 4) Marie	anter HAIGAIT II		
2 Compensation of five highest-paid employees (other than those income (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000	1			0

Part VIII Information About Officers, Directors, Trustees, Foundaries Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none,		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of service	(b) compondation
NONE		
The transfer of others recovered every \$50,000 for exceptions and our way		D 0
Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
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 paper		Expenses
N/A		
<u> </u>		
		·····
<u> </u>		
·		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax y	ear on lines 1 and 2.	Amount
1 <u>N/A</u>		
All other program-related investments. See instructions.		
3		
		0
Fotol Add lines 1 through 3		n

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	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	89,006.
b	Average of monthly cash balances	1b	174,743.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	263,749.
е	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	263,749.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,956.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	259,793.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	3,274.
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.)	id certain	
1	Minimum investment return from Part X, line 6	1	3,274.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,274.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,274.
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	3,274.
P	art XII Qualifying Distributions (see instructions)	Γ 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		00 000
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	20,000.
þ	Program-related investments - total from Part IX-B	1b	<u> </u>
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	20,000.
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	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	20,000.
	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		

Undistributed Income (see instructions) Part XIII (a) (b) (c) (d) 2016 Years prior to 2015 2015 Corpus 1 Distributable amount for 2016 from Part XI. 3,274. line 7 2 Undistributed income, if any, as of the end of 2016 0 a Enter amount for 2015 only b Total for prior years: 0 . 3 Excess distributions carryover, if any, to 2016: a From 2011 **b** From 2012 c From 2013 d From 2014 e From 2015 0 f Total of lines 3a through e 4 Qualifying distributions for 2016 from Part XII, line 4: ► \$ a Applied to 2015, but not more than line 2a 0 b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 3,274. d Applied to 2016 distributable amount 16,726. e Remaining amount distributed out of corpus 0. Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount 0. must be shown in column (a)) Enter the net total of each column as indicated below: 16,726 a Corpus Add lines 3f, 4c and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b 0. c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2015. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0 may be required - see instructions) Excess distributions carryover from 2011 0. not applied on line 5 or line 7 Excess distributions carryover to 2017 16,726. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015

e Excess from 2016

16,726

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Part XIV Private Operating Fo			II-A, question 9)	<u>N/</u> A	
1 a 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 t	the ruling	•		
b Check box to indicate whether the found	ation is a private operatir	ng foundation described	in section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a				 	
c Qualifying distributions from Part XII,			 	 	
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			 		
for active conduct of exempt activities	"				
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			-	 	
alternative test relied upon:	1n				
a "Assets" alternative test - enter:					
(1) Value of all assets		<u> </u>	ļ	 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter	i				
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed		<u></u>			
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					<u> </u>
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundatio	n had \$5,000 or n	nore in assets
at any time during t					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	_	than 2% of the total cor	ntributions received by th	ne foundation before the c	ose of any tax
year (but only if they have contributed n			•		•
SEE STATEMENT 6					
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	ı (or an equally large por	tion of the ownership of a	partnership or
other entity) of which the foundation has	s a 10% or greater intere	st.			
NONE					
2 Information Regarding Contribute	on, Grant, Gift, Loan	, Scholarship, etc., F	Programs:		
Check here 🕨 🗶 if the foundation o	inly makes contributions	to preselected charitable	e organizations and does	not accept unsolicited re-	quests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations	under other conditions,	complete items 2a, b, c, a	nd d
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	olications should be addr	essed.	
b The form in which applications should be	e submitted and informa	ition and materials they	should include:		
c Any submission deadlines:					
~ 					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable field	s, kınds of institutions, o	r other factors:	

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Part XVI-A **Analysis of Income-Producing Activities**

nter gross amounts unless otherwise indicated.		o business income		by section 512 513 or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a				***	
b	-	-			
C	The state of the s			-	
					···
· · · · · · · · · · · · · · · · · · ·	1 1	-			
e	-		 		
a Face and contracts from accomment accomment	-		+		
g Fees and contracts from government agencies					
2 Membership dues and assessments	-				
3 Interest on savings and temporary cash					
investments			- 1	250	
4 Dividends and interest from securities	1		14	372.	
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			14		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b		•			· *-
С					
d					
e	-				
12 Subtotal. Add columns (b), (d), and (e)		0		372	0.
13 Total. Add line 12, columns (b), (d), and (e)		······	•		372
(See worksheet in line 13 instructions to verify calculations.)				10	<u> </u>
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	Exempt F	Purposes	
Line No Explain below how each activity for which inc	ome is reported ii	n column (e) of Part XVI	-A contribute	ed importantly to the accom-	nlishment of
the foundation's exempt purposes (other tha			71 00111110011	or importantly to the accom-	phormion of
					
	•				

Part XVII		ASEI FAM			nd Dalastan	01-400		Page 13
Pait VIII			insters to a	and Transactions a	ind Helations	nips with Noncha	iritable	
	Exempt Organ						1 14.	- N-
				g with any other organization		on 501(c) of	1 1	s No
				7, relating to political organ	uzations?			
a Transfers	from the reporting founda	ition to a nonchar	itable exempt org	ganization of:			1	
(1) Cash							1a(1)	<u> </u>
(2) Other	assets						1a(2)	X
b Other tran	sactions:							
(1) Sales	of assets to a noncharitat	ole exempt organi	zation				1b(1)	X
(2) Purch		1b(2)	X					
(3) Renta		1b(3)	X					
(4) Reim		1b(4)	X					
• •	s or loan guarantees						1b(5)	X
. ,	rmance of services or me	mbership or fund	raisino solicitatio	ins			1b(6)	X
٠,,	f facilities, equipment, mai		-				10	X
-		•		dule. Column (b) should alv	wave show the fair r	narket value of the goods		
				ed less than fair market valu				
	I) the value of the goods, o			oo looo man lan market vale	so in any tranoaotion	or onaring arrangement,	01.011	
(a) Line no	(b) Amount involved			e exempt organization	(d) Description	of transfers, transactions and	i sharing arrang	ements
(4)2	(2)/////	(o) name	N/A	- Champt or gameation	(W) Description	or translations and	7 Sharing allang	
	,_,					···		
					- 			
								
				4				
								
								
		<u> </u>	··	· · · · · · · · · · · · · · · · · · ·				
								
								- ,
2a is the four	ndation directly or indirect	tly affiliated with, i	or related to, one	or more tax-exempt organi	izations described	_		
ın section	501(c) of the Code (other	than section 501	(c)(3)) or in sect	tion 527?		[Yes	X No
b If "Yes," co	omplete the following sche	edule.						
	(a) Name of org	anization		(b) Type of organization		(c) Description of relation	ship	
	N/A							
				`				

Under	penanties of perjury I declare	that I have examined	this return, including	ng accompanying schedules and	statements and to the	best of my knowledge		
Sign and be	elief it is true, correct, and con	nplete Declaration o	f preparer (other tha	n taxpayer) is based on all inforr	mation of which prepare	r nas any knowledge re	lay the IRS disc turn with the pr	eparer
Here	Trulle	Ke M		11/6/17	to 21	یعی اُا	Yes	X No
Sign	nature of officer or trustee	1		Date	Title		res	_A_ 140
	Print/Type preparer's na		Preparer's s		Date	Check If PTIN		
				7		self- employed		
Paid	CHRISTOPHE TIKVART	A.	/hul	una	11/6/17	· -	102260	5 2
Preparer		T DDAD	V 1		11/2/1/		002260	
Use Only	Firm's name ► NEA	ר, פאאD?	SHER & T	AYLOR, P.A.		Firm's EIN ► 56-1	.4420T;	7
Joe Only		01 D 1222	TIME O TON	DDIVE		-		
	Firm's address ► 37			DKIAE		(040)	400	2262
	<u> </u>	RHAM, NO	27707			Phone no (919)	<u> 489-</u>	<u> </u>

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2016

Name of the organization

Employer identification number

T	HE CASEY FAMILY FOUNDATION	81-4080931
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 foun	ndation
	527 political organization	
Form 990-PF	S01(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on
	501(c)(3) taxable private foundation	
Check if your organization	is covered by the General Rule or a Special Rule.	
	c)(7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule See instructions
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributed on the contributor. Complete Parts I and II. See instructions for determining the contributor.	
Special Rules		
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% Z, line 1 Complete Parts I and II	, line 13, 16a, or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that reputions of more than \$1,000 exclusively for religious, charitable, scientific, literarchy to children or animals. Complete Parts I, II, and III	•
year, contribution is checked, enter purpose Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that runs exclusively for religious, charitable, etc., purposes, but no such contribution there the total contributions that were received during the year for an exclusion of the parts unless the General Rule applies to this organization of the contributions totaling \$5,000 or more during the year	ons totaled more than \$1,000 If this box sively religious, charitable, etc.,
but it must answer "No" of certify that it doesn't meet	that isn't covered by the General Rule and/or the Special Rules doesn't file Special Rules doesn't file Special Rule 2, of its Form 990, or check the box on line H of its Form 990-the the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	EZ or on its Form 990-PF, Part I, line 2, to

Name of organization

Employer identification number

THE CASEY FAMILY FOUNDATION

81-4080931

Part I	Contributors (See instructions) Use duplicate copies of Part I if	additional space is needed	
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	PAUL & SARAH CASEY 115 WATERFORD PLACE CHAPEL HILL, NC 27517	\$ 778,853.	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

Employer identification number

THE CASEY FAMILY FOUNDATION

81-4080931

Noncash Property (See instructions) Use duplicate copies of Pa	rt II if additional space is needed	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\ \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	(b) Description of noncash property given (b) Description of noncash property given	Description of noncash property given (b) Description of noncash property given (c) FMV (or estimate) (See instructions) (d) Description of noncash property given (e) FMV (or estimate) (See instructions) (f) Description of noncash property given (g) FMV (or estimate) (See instructions) (h) Description of noncash property given (h) Description of noncash property given

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM S	ECUR	ITIES S	STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	(A) REVEN S PER BO	WE	(B) NET INVEST		
SUNTRUST	372	•	0.	372.	372	•	
TO PART I, LINE 4	372	•	0.	372.	372		
FORM 990-PF		LEGAL	FEES			STATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
LEGAL FEES		7,000.	7,0	000.			0.
TO FM 990-PF, PG 1,	LN 16A =	7,000.	7,0	000.			0.
FORM 990-PF		CORPORAT	E STOCK			STATEMENT	3
DESCRIPTION				B00	K VALUE	FAIR MARKET	Г
SUNTRUST			_		184,996.	183,48	34.
			_				
TOTAL TO FORM 990-P	F, PART II	, LINE 10B	=		184,996.	183,48	34.
FORM 990-PF	F, PART II	, LINE 10B	E BONDS			183,48	4
	F, PART II		E BONDS	воо			4
FORM 990-PF	F, PART II		E BONDS	воо		STATEMENT FAIR MARKE	4 T

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	5
NAME OF CONTRIBUTOR	ADDRESS		
PAUL & SARAH CASEY	115 WATERFORD PLACE CHAPEL HILL, NC 27517		
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	

NAME OF MANAGER

PAUL F. CASEY SARAH B. CASEY