990 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning Mar 1 , 2017, and ending Feb 28 , 2018

B ☐

C JOEY F. CASEY MEMORIAL FOUNDATION

8121 CRESCO AVENUE

PHILADELPHIA, PA 19136

D Employer identification number 25-6594915

E (215)331-6424

G 510,085.

F NANCY CASEY, 8121 CRESCO AVENUE, PHILADELPHIA, PA 19136

H(a) ☐ Yes ☒ No

H(b) ☐ Yes ☐ No

H(c)

I ☒ ☐ ☐ ☐

J Website ▶ N/A

K ☒ ☐ ☐ ☐ ▶

L 1999

M PA

Part I Summary

1 Offer Tuition Reimbursement for Needy Students.

2 ☐

			Prior Year	Current Year
Activities & Governance	3	3		4
	4	4		4
	5	5		0
	6	6		4
	7a	7a		0.
	b	7b		0.
Revenue	8		601,558.	510,000.
	9			
	10		225.	85.
	11			
	12		601,783.	510,085.
Expenses	13		567,950.	513,982.
	14			
	15			
	16a			
	b	0.		
	17		1,591.	1,591.
	18		569,541.	515,573.
	19		32,242.	-5,488.
			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20		89,288.	83,800.
	21		0.	
	22		89,288.	83,800.

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OGDEN, UT
IRS-SCC

SCANNED MAR 21 2019

Part II Signature Block

Sign Here

01/15/2019

Joseph Casey, President

Paid Preparer Use Only

Joseph M. Brindisi		01/15/2019	P00283130
▶ Joseph M. Brindisi & Associates, P.C.			▶ 20-1128860
▶ 331 N. Broad Street, Lansdale, PA 19446			(610)624-4548

☒ Yes ☐ No

9 24

Part III Statement of Program Service Accomplishments ☒

1 Offer Tuition Reimbursement for Needy Students.

2 ☐ Yes ☒ No

3 ☐ Yes ☒ No

4

4a	180,000.	0.	0.	

The Foundation has supplied funds to St. Margaret's Grade School to help defray the rising costs of tuition for needy students. The Students must qualify for the support. They have also supplied funds to St. Genevieve School and Nativity grade school as well.

4b	154,900.	0.	0.	

The Foundation has supplied funds to Little Flower High School in the Phila. area to help defray rising tuition costs as well as to support their CYO and Outreach Programs. The students must qualify for the suport.

4c	168,100.	0.	0.	

The Foundation has supplied funds to Archbishop Wood High School, Roman Catholic High School and Father Judge High School in Phila., PA area to help defray the rising costs of tuition for needy students. The students must qualify for the support.

4d	10,982.	0.	0.	
4e	513,982.			

Part IV Checklist of Required Schedules

			Yes	No
1	If "Yes," complete Schedule A	1	X	
2	Schedule B, Schedule of Contributors	2	X	
3	If "Yes," complete Schedule C, Part I	3		X
4	**Section 501(c)(3) organizations** If "Yes," complete Schedule C, Part II	4		X
5	If "Yes," complete Schedule C, Part III	5		X
6	If "Yes," complete Schedule D, Part I	6		X
7	If "Yes," complete Schedule D, Part II	7		X
8	If "Yes," complete Schedule D, Part III	8		X
9	If "Yes," complete Schedule D, Part IV	9		X
10	If "Yes," complete Schedule D, Part V	10		X
11a	If "Yes," complete Schedule D, Part VI	11a		X
11b	If "Yes," complete Schedule D, Part VII	11b		X
11c	If "Yes," complete Schedule D, Part VIII	11c		X
11d	If "Yes," complete Schedule D, Part IX	11d		X
11e	If "Yes," complete Schedule D, Part X	11e		X
11f	If "Yes," complete Schedule D, Part X	11f		X
12a	If "Yes," complete Schedule D, Parts XI and XII	12a		X
12b	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	If "Yes," complete Schedule E	13		X
14a		14a		X
14b	If "Yes," complete Schedule F, Parts I and IV	14b		X
15	If "Yes," complete Schedule F, Parts II and IV	15		X
16	If "Yes," complete Schedule F, Parts III and IV	16		X
17	If "Yes," complete Schedule G, Part I	17		X
18	If "Yes," complete Schedule G, Part II	18		X
19	If "Yes," complete Schedule G, Part III	19		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20 a	If "Yes," complete Schedule H	20a		X
b		20b		
21	If "Yes," complete Schedule I, Parts I and II	21	X	
22	If "Yes," complete Schedule I, Parts I and III	22		X
23	If "Yes," complete Schedule J	23		X
24a	If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b		24b		
c		24c		
d		24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** If "Yes," complete Schedule L, Part I	25a		X
b	If "Yes," complete Schedule L, Part I	25b		X
26	If "Yes," complete Schedule L, Part II	26		X
27	If "Yes," complete Schedule L, Part III	27		X
28				
a	If "Yes," complete Schedule L, Part IV	28a		X
b	If "Yes," complete Schedule L, Part IV	28b		X
c	If "Yes," complete Schedule L, Part IV	28c		X
29	If "Yes," complete Schedule M	29		X
30	If "Yes," complete Schedule M	30		X
31	If "Yes," complete Schedule N, Part I	31		X
32	If "Yes," complete Schedule N, Part II	32		X
33	If "Yes," complete Schedule R, Part I	33		X
34	If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X
35a		35a		X
b	If "Yes," complete Schedule R, Part V, line 2	35b		X
36	**Section 501(c)(3) organizations.** If "Yes," complete Schedule R, Part V, line 2	36		X
37	If "Yes," complete Schedule R, Part VI	37		X
38	**Note**	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V ☐

				Yes	No
1a		1a	0		
b		1b	0		
c			1c		X
2a		2a	0		
b			2b		X
	Note *e-file*				
3a			3a		X
b	*If "No" to line 3b, provide an explanation in Schedule O*		3b		
4a			4a		X
b	➔				
5a			5a		X
b			5b		X
c			5c		
6a			6a		X
b			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a			7a		X
b			7b		
c			7c		X
d		7d			
e			7e		X
f			7f		X
g			7g		
h			7h		
8	**Sponsoring organizations maintaining donor advised funds.**		8		X
9	**Sponsoring organizations maintaining donor advised funds.**				
a			9a		X
b			9b		X
10	**Section 501(c)(7) organizations**				
a		10a			
b		10b			
11	**Section 501(c)(12) organizations**				
a		11a			
b		11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts**		12a		
b		12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a			13a		
	Note.				
b		13b			
c		13c			
14a			14a		X
b	*If "No," provide an explanation in Schedule O*		14b		

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions* ☒

Section A. Governing Body and Management

			Yes	No
1a	1a 4			
b	1b 4			
2		2	X	
3		3		X
4		4		X
5		5		X
6		6		X
7a		7a		X
b		7b		X
8				
a		8a	X	
b		8b	X	
9	If "Yes," provide the names and addresses in Schedule O	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a		10a		X
b		10b		
11a		11a	X	
b				
12a	If "No," go to line 13	12a		X
b		12b		
c	If "Yes," describe in Schedule O how this was done	12c		
13		13		X
14		14		X
15				
a		15a		X
b		15b		X
16a		16a		X
b		16b		

Section C. Disclosure

17 ▶ PA

18

☐ ☐ ☒ ☐ (explain in Schedule O)

19

20 ▶

Nancy Casey, 8121 Cresco Avenue - , Philadelphia,, PA 19136 (215)331-6424

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a current

current

current

former

former directors or trustees

☒

(A)	(B)	(C)						(D)	(E)	(F)
(1) Joseph F. Casey President	3.00	X						0.	0.	0.
(2) Thomas Crossett Vice President	3.00			X				0.	0.	0.
(3) Nancy J. Casey Treasurer	3.00	X						0.	0.	0.
(4) Kathleen A. Milligan Secretary	3.00			X				0.	0.	0.
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A)	(B)	(C)	(D)	(E)	(F)
(15)					
(16)					
(17)					
(18)					
(19)					
(20)					
(21)					
(22)					
(23)					
(24)					
(25)					
1b Sub-total ▶			0.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶					
d Total (add lines 1b and 1c) ▶			0.	0.	0.

2 ▶

			Yes	No
3	former If "Yes," complete Schedule J for such individual	3		X
4	If "Yes," complete Schedule J for such individual	4		X
5	If "Yes," complete Schedule J for such person	5		X

Section B. Independent Contractors

1

(A)	(B)	(C)

2 ▶

Part VIII Statement of Revenue

			(A)	(B)	(C)	(D)
Contributions, Gifts, Grants and Other Similar Amounts	1a					
	b					
	c					
	d					
	e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f 510,000.				
	g	Noncash contributions included in lines 1a-1f: $				
	h	Total	510,000.			
Program Service Revenue		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f					
	g	Total				
Other Revenue	3		85.	85.	0.	0.
	4					
	5					
	6a					
	b					
	c					
	d					
	7a	Gross amount from sales of assets other than inventory				
	b					
	c					
	d					
	8a					
	b					
	c					
	9a					
	b					
	c					
	10a					
	b					
	c					
		Business Code				
	11a					
	b					
	c					
	d					
	e	Total.				
	12	Total revenue.	510,085.	85.	0.	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A)	(B)	(C)	(D)
1	513,982.	513,982.		
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
a	356.	0.	356.	0.
b				
c	1,235.	0.	1,235.	0.
d				
e				
f				
g				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
a				
b				
c				
d				
e				
25 Total functional expenses.	515,573.	513,982.	1,591.	0.
26 Joint costs ▶ ☐				

Part X Balance Sheet

			(A)		(B)
Assets	1			1	
	2		89,288.	2	83,800.
	3			3	
	4			4	
	5			5	
	6			6	
	7			7	
	8			8	
	9			9	
	10a	10a			
	b	10b		10c	
	11		0.	11	
	12			12	
	13			13	
	14			14	
	15			15	
	16	Total assets.	89,288.	16	83,800.
Liabilities	17		0.	17	
	18			18	
	19			19	
	20			20	
	21			21	
	22			22	
	23			23	
	24			24	
	25			25	
	26	Total liabilities.	0.	26	
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
	27			27	
	28			28	
	29			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 30 through 34			
	30			30	
	31			31	
	32		89,288.	32	83,800.
	33		89,288.	33	83,800.
	34		89,288.	34	83,800.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	510,085.
2	Total expenses (must equal Part IX, column (A), line 25)	2	515,573.
3	Revenue less expenses. Subtract line 2 from line 1	3	-5,488.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	89,288.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	83,800.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other _____			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
	☒ Compilation ☐ Review ☐ Audit			
b	Were the organization's financial statements audited by an independent accountant?	2b		X
	☐ Compilation ☐ Review ☐ Audit			
c	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 CFR 200, subpart F?	3a		X
b	If "Yes," to line 3a, did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O.	3b		

Form 990 (2018)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization	Employer identification number
JOEY F. CASEY MEMORIAL FOUNDATION	25-6594915

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university

10 ☒ An organization that normally receives (1) more than 33⅓% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33⅓% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3)** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a ☐ **Type I** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2016 Schedule A, Part II, line 14 15 %

16a **33⅓% support test—2017.** If the organization did not check the box on line 13, and line 14 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33⅓% support test—2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% or more, check this box and **stop here** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2016** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	265,175.	307,365.	228,000.	200,000.	510,000.	1,510,540.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	0.	0.	0.	0.	0.	0.
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0.	0.	0.	0.	0.	0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0.	0.	0.	0.	0.	0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0.	0.	0.	0.	0.	0.
6 **Total** Add lines 1 through 5	265,175.	307,365.	228,000.	200,000.	510,000.	1,510,540.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 **Public support.** (Subtract line 7c from line 6)						1,510,540.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6	265,175.	307,365.	228,000.	200,000.	510,000.	1,510,540.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	643.	260.				903.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	643.	260.				903.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0.	0.				0.
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)	265,818.	307,625.	228,000.	200,000.	510,000.	1,511,443.

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	99.94 %
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	99.8 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f))	17	0.06 %
18	Investment income percentage from **2016** Schedule A, Part III, line 17	18	0.2 %

19a **33 1/3% support tests—2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests—2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s)*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard*	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions)***

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a government entity (see instructions)*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	2b		
3	Parent of Supported Organizations. ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard*	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2 Enter 85% of line 1.	2	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4 Enter greater of line 2 or line 3	4	
5 Income tax imposed in prior year	5	
6 **Distributable Amount** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**) See instructions	
7	**Total annual distributions.** Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**) See instructions	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in **Part VI**) See instructions			
3	Excess distributions carryover, if any, to 2017			
a				
b	From 2013			
c	From 2014			
d	From 2015			
e	From 2016			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2017 from Section D, line 7. $			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
c	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in **Part VI.** See instructions			
6	Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in **Part VI** See instructions			
7	**Excess distributions carryover to 2018** Add lines 3j and 4c			
8	Breakdown of line 7			
a	Excess from 2013			
b	Excess from 2014			
c	Excess from 2015			
d	Excess from 2016			
e	Excess from 2017			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b, Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions.)

SCHEDULE I
(Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22

▶ Attach to Form 990.

▶ Go to *www.irs.gov/Form990* for the latest information.

2017

Open to Public Inspection

JOEY F. CASEY MEMORIAL FOUNDATION

Employer identification number

25-6594915

Part I General Information on Grants and Assistance

1 ☒ Yes ☐ No

2

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1 (a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 ▶

3 ▶

Part III Grants and Other Assistance to Domestic Individuals.

	(a)	(b)	(c)	(d)	(e)	(f)
1						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information.

Pt I Line 2: ALL GRANT FUNDS ARE BASED ON NEED. RECIPIENT MUST FILE A NEED FORM

Pt I Line 2: WHICH WILL BE EVALUATED BY THE FOUNDATION TO SEE IF THEY QUALIFY FOR

Pt I Line 2: A GRANT. SCHOOLS RECEIVING GRANT MONEY NEED TO FOLLOW THE DIRECTIONS

Pt I Line 2: SET FORTH BY THE FOUNDATION

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information

▶ Attach to Form 990 or 990-EZ.

▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization

JOEY F. CASEY MEMORIAL FOUNDATION

Employer identification number

25-6594915

Pt VI, Line 2: Joseph & Nancy Casey are married.

Pt VI, Line 11b: President reviews return prior ti signing & mailing.

Pt III, Line 4d:

Expenses: $10,982 including grants of: $0 Revenue: $0

Description: The Foundation has supplied funds to many schools and community organizations all located in the Philadelphia area. The funds are for needy students to help with tuition costs.