

Form 990-PF

Return of Private Foundation

OMB No 1545-0052

2018

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For calendar year 2018 or tax year beginning, and ending

Name of foundation: CASEY FELDMAN MEMORIAL FOUNDATION. A Employer identification number: 27-0877433. B Telephone number: 215-285-9145. G Check all that apply: Initial return, Final return, Address change. H Check type of organization: Section 501(c)(3) exempt private foundation. I Fair market value of all assets at end of year: \$222,968. J Accounting method: Cash.

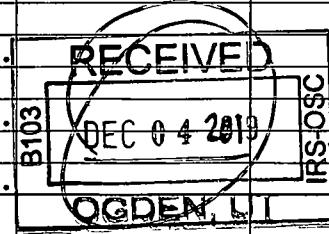
Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (Total 160,775), Operating and Administrative Expenses (Total 99,603), and Net investment income (0).

03/15

will not be scanned JAN 28 2020

N/A

2019 DEC 23 2019 4675033



625 19

| Part II Balance Sheets | | Attached schedules and amounts in the description column should be for end-of-year amounts only | | |
|--|--|---|----------------|-----------------------|
| | | Beginning of year | End of year | |
| | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| Assets | 1 Cash - non-interest-bearing | 44,359. | 104,435. | 104,435. |
| | 2 Savings and temporary cash investments | 32,270. | 32,296. | 32,296. |
| | 3 Accounts receivable | - | - | - |
| | Less: allowance for doubtful accounts | - | - | - |
| | 4 Pledges receivable | - | - | - |
| | Less: allowance for doubtful accounts | - | - | - |
| | 5 Grants receivable | - | - | - |
| | 6 Receivables due from officers, directors, trustees, and other disqualified persons | - | - | - |
| | 7 Other notes and loans receivable | - | - | - |
| | Less: allowance for doubtful accounts | - | - | - |
| | 8 Inventories for sale or use | - | - | - |
| | 9 Prepaid expenses and deferred charges | - | - | - |
| | 10a Investments - U.S. and state government obligations | - | - | - |
| | b Investments - corporate stock | STMT 9 88,712. | 84,390. | 84,390. |
| | c Investments - corporate bonds | - | - | - |
| | 11 Investments - land, buildings, and equipment basis | - | - | - |
| Less: accumulated depreciation | - | - | - | |
| 12 Investments - mortgage loans | - | - | - | |
| 13 Investments - other | - | - | - | |
| 14 Land, buildings, and equipment: basis | 24,708. | - | - | |
| Less: accumulated depreciation | STMT 8 22,861. | 2,944. | 1,847. | |
| 15 Other assets (describe) | - | - | - | |
| 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) | - | 168,285. | 222,968. | |
| Liabilities | 17 Accounts payable and accrued expenses | - | - | - |
| | 18 Grants payable | - | - | - |
| | 19 Deferred revenue | - | - | - |
| | 20 Loans from officers, directors, trustees, and other disqualified persons | - | - | - |
| | 21 Mortgages and other notes payable | - | - | - |
| | 22 Other liabilities (describe) | - | - | - |
| | 23 Total liabilities (add lines 17 through 22) | - | 0. | 0. |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here | <input checked="" type="checkbox"/> | - | - |
| | and complete lines 24 through 26, and lines 30 and 31 | - | - | - |
| | 24 Unrestricted | 168,285. | 222,968. | - |
| | 25 Temporarily restricted | - | - | - |
| | 26 Permanently restricted | - | - | - |
| | Foundations that do not follow SFAS 117, check here | <input type="checkbox"/> | - | - |
| | and complete lines 27 through 31 | - | - | - |
| | 27 Capital stock, trust principal, or current funds | - | - | - |
| | 28 Paid-in or capital surplus, or land, bldg., and equipment fund | - | - | - |
| 29 Retained earnings, accumulated income, endowment, or other funds | - | - | - | |
| 30 Total net assets or fund balances | - | 168,285. | 222,968. | |
| 31 Total liabilities and net assets/fund balances | - | 168,285. | 222,968. | |

Part III Analysis of Changes in Net Assets or Fund Balances

| | | |
|--|---|----------|
| 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 | 168,285. |
| 2 Enter amount from Part I, line 27a | 2 | 61,172. |
| 3 Other increases not included in line 2 (itemize) | 3 | 0. |
| 4 Add lines 1, 2, and 3 | 4 | 229,457. |
| 5 Decreases not included in line 2 (itemize) SEE STATEMENT 7 | 5 | 6,489. |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 222,968. |

Part IV Capital Gains and Losses for Tax on Investment Income

| (a) List and describe the kind(s) of property sold (for example, 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.) |
|---|--|--|--|---|
| 1a CAPITAL GAINS DIVIDENDS | | | | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| (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)) | |
| a 755. | | | 755. | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| 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) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | | |
| a | | | 755. | |
| b | | | | |
| c | | | | |
| d | | | | |
| e | | | | |
| 2 Capital gain net income or (net capital loss) | | { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 } | | 2 755. |
| 3 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). If (loss), enter -0- in Part I, line 8 } | | 3 N/A |

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 doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the 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)) |
|---|--|--|---|
| 2017 | 94,520. | 155,540. | .607689 |
| 2016 | 104,014. | 158,697. | .655425 |
| 2015 | 84,070. | 163,340. | .514693 |
| 2014 | 74,345. | 4,703. | 15.807995 |
| 2013 | 92,801. | 96,748. | .959203 |
| 2 Total of line 1, column (d) | | | 2 18.545005 |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 50, or by the number of years the foundation has been in existence if less than 5 years | | | 3 3.709001 |
| 4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 | | | 4 190,333. |
| 5 Multiply line 4 by line 3 | | | 5 705,945. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | | | 6 0. |
| 7 Add lines 5 and 6 | | | 7 705,945. |
| 8 Enter qualifying distributions from Part XII, line 4 | | | 8 99,603. |

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 calculation. Includes fields for exempt foundations, domestic foundations, tax under section 511, and credits/payments. Total tax due is 0.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, unrelated business income, and state reporting. Includes handwritten 'N/A' and '2'.

Part VII-A Statements Regarding Activities (continued)

| | Yes | No |
|--|-----|----|
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions | | X |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions | | X |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>CASEYFELDMANMEMORIALFOUNDATION.ORG</u> | X | |
| 14 The books are in care of ► <u>JOEL D. FELDMAN</u> Telephone no. ► <u>215-285-9145</u> Located at ► <u>469 RIDGE AVE., SPRINGFIELD, PA</u> ZIP+4 ► <u>19064</u> | | |
| 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 | | |
| 16 At any time during calendar year 2018, 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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ► | | X |

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.

| | Yes | No |
|---|---|----|
| 1a During the year, did the foundation (either directly or indirectly): | | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| (6) Agree to pay money or property to a government official? (Exception Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here | | |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? | | X |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | |
| a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years ► _____ | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) | | |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► _____ | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.) | | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | X |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018? | | X |

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 | | | Yes | No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 | N/A | 5b | | |
| 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? | N/A | | | |
| 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? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 6b | | X |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | | |
| 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? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 7b | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? | N/A | | | |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

| (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 |
|----------------------|---|---|---|---------------------------------------|
| SEE STATEMENT 11 | | 0. | 0. | 0. |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

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

| (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 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. If none, enter "NONE."

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, (c) Compensation. Row 1 contains 'NONE'.

Total number of others receiving over \$50,000 for professional services 0

Part IX-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activity, Expenses. Rows include 'SEE STATEMENT 12' (1,500), 'STUDENTS AGAINST DISTRACTED DECISIONS 501(C)(3) ORGANIZATION HEADQUARTERED IN MARLBOROUGH, MA.' (12,850), 'SEE STATEMENT 13' (81,038), and 'SEE STATEMENT 14' (1,000).

Part IX-B Summary of Program-Related Investments

Table with 2 columns: Description of investment, Amount. Row 1 contains 'N/A'. Row 3 contains 'All other program-related investments. See instructions.'

Total. Add lines 1 through 3 0.

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

| | | | |
|----------|---|-----------|----------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities | 1a | 86,551. |
| b | Average of monthly cash balances | 1b | 106,680. |
| c | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 193,231. |
| e | 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 | 193,231. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 2,898. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 190,333. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 9,517. |

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.)

| | | | |
|-----------|--|-----------|--------|
| 1 | Minimum investment return from Part X, line 6 | 1 | 9,517. |
| 2a | Tax on investment income for 2018 from Part VI, line 5 | 2a | |
| b | Income tax for 2018. (This does not include the tax from Part VI.) | 2b | |
| c | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 9,517. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 9,517. |
| 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 | 9,517. |

Part XII Qualifying Distributions (see instructions)

| | | | |
|----------|---|-----------|---------|
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| a | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 | 1a | 96,388. |
| b | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | 3,215. |
| 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 | 99,603. |
| 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 | 99,603. |

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 2017 | (c) 2017 | (d) 2018 |
|--|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2018 from Part XI, line 7 | | | | 9,517. |
| 2 Undistributed income, if any, as of the end of 2018 | | | | |
| a Enter amount for 2017 only | | | 0. | |
| b Total for prior years: | | 0. | | |
| 3 Excess distributions carryover, if any, to 2018: | | | | |
| a From 2013 | 87,964. | | | |
| b From 2014 | 74,110. | | | |
| c From 2015 | 75,903. | | | |
| d From 2016 | 96,079. | | | |
| e From 2017 | 86,743. | | | |
| f Total of lines 3a through e | 420,799. | | | |
| 4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$ | 99,603. | | | |
| a Applied to 2017, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus (Election required - see instructions) | 0. | | | |
| d Applied to 2018 distributable amount | | | | 9,517. |
| e Remaining amount distributed out of corpus | 90,086. | | | |
| 5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | 510,885. | | | |
| 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 assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable amount - see instructions | | 0. | | |
| e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 | | | | 0. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2013 not applied on line 5 or line 7 | 87,964. | | | |
| 9 Excess distributions carryover to 2019 Subtract lines 7 and 8 from line 6a | 422,921. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2014 | 74,110. | | | |
| b Excess from 2015 | 75,903. | | | |
| c Excess from 2016 | 96,079. | | | |
| d Excess from 2017 | 86,743. | | | |
| e Excess from 2018 | 90,086. | | | |

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 |
| a Paid during the year | | | | |
| STUDENTS AGAINST DESTRUCTIVE DECISIONS 201 BOSTON POST ROAD MARLBOROUGH, MA 01752 | NONE | PC | DONATION | 12,850. |
| TEMPLE UNIVERSITY 1801 NORTH BROAD STREET PHILADELPHIA, PA 19122 | NONE | PC | SCHOLARSHIP | 1,500. |
| GLOBAL POVERTY PROJECT INC 594 BROADWAY SUITE 207 NEW YORK, NY 10012 | NONE | PC | DONATION | 1,000. |
| DELAWARE COUNTY COMMUNITY COLLEGE 901 MEDIA LINE ROAD MEDIA, PA 19063 | NONE | PC | SCHOLARSHIP | 500. |
| HARFORD COMMUNITY COLLEGE 401 THOMAS RUN ROAD BEL AIR, MD 21015 | NONE | PC | SCHOLARSHIP | 500. |
| Total | | | ▶ 3a | 16,350. |
| b Approved for future payment | | | | |
| NONE | | | | |
| | | | | |
| | | | | |
| Total | | | ▶ 3b | 0. |

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | Unrelated business income | | Excluded by section 512, 513, or 514 | | (e) Related or exempt function income |
|---|---------------------------|---------------|--------------------------------------|---------------|---|
| | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | |
| 1 Program service revenue: | | | | | |
| a _____ | | | | | |
| b _____ | | | | | |
| c _____ | | | | | |
| d _____ | | | | | |
| e _____ | | | | | |
| f _____ | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | 26. |
| 4 Dividends and interest from securities | | | | | 2,215. |
| 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 | | | | | 755. |
| 9 Net income or (loss) from special events | | | 05 | 3,592. | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a _____ | | | | | |
| b _____ | | | | | |
| c _____ | | | | | |
| d _____ | | | | | |
| e _____ | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0. | | 3,592. | 2,996. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 6,588. |

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). |
|---------|---|
| 13 | CONTRIBUTIONS ARE PLACED IN A SAVINGS OR INVESTMENT ACCOUNT UNTIL SUCH |
| 13 | TIME THEY ARE USED FOR THE FOUNDATIONS EXEMPT PURPOSE. THE KEEPING OF |
| 13 | FUNDS IN A SAVINGS OR INVESTMENT ACCOUNT PROVIDES THE ORGANIZATION |
| 13 | ADDED FUNDING IN FULFILLING THEIR CHARITABLE PURPOSE. |
| 13 | THE FOUNDATION CONDUCTS AND SPONSORS PROGRAMS DESIGNED TO CALL |
| 13 | ATTENTION TO AND END DISTRACTED DRIVING AND DESTRUCTIVE DECISION |
| 13 | MAKING. ALSO, FOUNDATION TEAMS UP AND PARTNERS WITH CHARITABLE |
| 13 | ORGANIZATIONS, FEDERAL, STATE AND LOCAL GOVERNMENT BODIES, AND |
| 13 | BUSINESSES FOR PURPOSE OF BRINGING AWARENESS TO PARENTS, TEENS, NATION |
| 13 | ON THE DETRAMENTS ASSOCIATED WITH DISTRACTED DRIVING AND DESTRUCTIVE |
| 13 | DECISION MAKING. THE PROGRAMS ARE IN EXISTENCE AND REQUIRE THE ABILITY |
| 13 | TO SPEAK AND PRESENT VIDEOS ANYWHERE IN CONTINENTAL NORTH AMERICA AT |
| 13 | A MOMENTS NOTICE. MONIES NEED TO BE IMMEDIATELY AVAILABLE TO MEET |
| 13 | EXPENDITURES ASSOCIATED WITH SAME. |

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

OMB No 1545 0047

2018

Name of the organization

CASEY FELDMAN MEMORIAL FOUNDATION

Employer identification number

27-0877433

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

CASEY FELDMAN MEMORIAL FOUNDATION

27-0877433

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|------------|--|----------------------------|---|
| 1 | JOEL D. FELDMAN AND DIANNE L. ANDERSON 469 RIDGE LAND SPRINGFIELD, PA 19064 | \$ 20,443. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| 2 | HORACE MANN SCHOOL FOUNDATION PO BOX 720962 SAN JOSE, CA 95172 | \$ 20,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| 3 | FIREHOUSE SUBS FOUNDATION 12735 GRAN BAY PKWY # 150 JACKSONVILLE, FL 32258 | \$ 10,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| 4 | LEAR CORPORATION 21557 TELEGRAPH ROAD SOUTHFIELD, MI 48033 | \$ 25,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| 5 | EAST KENTUCKY POWER COOPERATIVE 4775 LEXINGTON ROAD WINCHESTER, KY 40392-0707 | \$ 10,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |
| 6 | FIRSTENERGY 76 SOUTH MAIN STREET AKRON, OH 44308-1890 | \$ 5,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions) |

Name of organization

Employer identification number

CASEY FELDMAN MEMORIAL FOUNDATION

27-0877433

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
|------------------------------|--|--|----------------------|
| | _____ _____ _____ | \$ _____ | _____ |
| | _____ _____ _____ | \$ _____ | _____ |
| | _____ _____ _____ | \$ _____ | _____ |
| | _____ _____ _____ | \$ _____ | _____ |
| | _____ _____ _____ | \$ _____ | _____ |
| | _____ _____ _____ | \$ _____ | _____ |
| | _____ _____ _____ | \$ _____ | _____ |

| | |
|--|---|
| Name of organization CASEY FELDMAN MEMORIAL FOUNDATION | Employer identification number 27-0877433 |
|--|---|

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|---------------------|---------------------|-----------------|-------------------------------------|
| | | | |

| (e) Transfer of gift | |
|---|--|
| Transferee's name, address, and ZIP + 4 | Relationship of transferor to transferee |
| | |

FORM 990-PF, INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

| SOURCE | (A) REVENUE PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME |
|-------------------------|-----------------------------|---------------------------------|-------------------------------|
| WELLS FARGO | 26. | 26. | |
| TOTAL TO PART I, LINE 3 | 26. | 26. | |

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDENDS | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
|------------------------|-----------------|-------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| MET LIFE SECURITIES | 2,970. | 755. | 2,215. | 2,215. | |
| TO PART I, LINE 4 | 2,970. | 755. | 2,215. | 2,215. | |

FORM 990-PF OTHER INCOME STATEMENT 3

| DESCRIPTION | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
|---|-----------------------------|-----------------------------------|-------------------------------|
| GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS | 3,592. | 0. | |
| TOTAL TO FORM 990-PF, PART I, LINE 11 | 3,592. | 0. | |

FORM 990-PF ACCOUNTING FEES STATEMENT 4

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| ACCOUNTING | 2,250. | 0. | | 2,250. |
| TO FORM 990-PF, PG 1, LN 16B | 2,250. | 0. | | 2,250. |

| FORM 990-PF | OTHER PROFESSIONAL FEES | | | STATEMENT 5 |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| PROFESSIONAL FEES - OTHER | 586. | 0. | . | 586. |
| TO FORM 990-PF, PG 1, LN 16C | 586. | 0. | | 586. |

| FORM 990-PF | OTHER EXPENSES | | | STATEMENT 6 |
|--|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| CHARITABLE PURPOSE SUPPLIES | 6,000. | 0. | | 6,000. |
| INVESTMENT & BANK CHARGES | 2,430. | 2,430. | | 0. |
| INSURANCE | 1,139. | 0. | | 1,139. |
| POSTAGE / DELIVERY | 1,508. | 0. | | 1,508. |
| PROGRAM ADVERTISING AND MARKETING | 3,282. | 0. | | 3,282. |
| PROGRAM EXPENSES - SERVICE DAY & PSA | 4,448. | 0. | | 4,448. |
| SUBCONTRACT - PROGRAM & GRANT WRITERS & CONSULTANTS | 10,367. | 0. | | 10,367. |
| WEBSITE MAINTENANCE | 26,802. | 498. | | 26,304. |
| OTHER DIRECT PROGRAM EXPENSES | 1,169. | 0. | | 1,169. |
| DEPRECIATION - CHARITABLE PURPOSE | 0. | 287. | | 723. |
| AMORTIZATION - CHARITABLE PURPOSE | 0. | 0. | | 87. |
| CREDIT CARD CHARGEBACKS | 2,068. | 0. | | 2,068. |
| MEMBERSHIPS & SUBSCRIPTIONS | 1,750. | 0. | | 1,750. |
| SUPPLIES | 616. | 0. | | 616. |
| MISCELLANEOUS | 80. | 0. | | 80. |
| AMORTIZATION | 87. | 0. | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 61,746. | 3,215. | | 59,541. |

FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES STATEMENT 7

| DESCRIPTION | AMOUNT |
|--|--------|
| UNREALIZED LOSS FROM MARKETABLE SECURITIES | 6,489. |
| TOTAL TO FORM 990-PF, PART III, LINE 5 | 6,489. |

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 8

| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE | FAIR MARKET VALUE |
|---------------------------|---------------------|--------------------------|------------|-------------------|
| WEBSITE | 12,260. | 12,260. | 0. | 0. |
| VIDEO PRODUCTION | 7,593. | 7,593. | 0. | 0. |
| COMPUTER EQUIPMENT | 1,414. | 1,332. | 82. | 82. |
| COMPUTER EQUIPMENT | 2,141. | 1,524. | 617. | 617. |
| TRADEMARK | 1,300. | 152. | 1,148. | 1,148. |
| TO 990-PF, PART II, LN 14 | 24,708. | 22,861. | 1,847. | 1,847. |

FORM 990-PF CORPORATE STOCK STATEMENT 9

| DESCRIPTION | BOOK VALUE | FAIR MARKET VALUE |
|---|------------|-------------------|
| MARKETABLE SECURITIES | 84,390. | 84,390. |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 84,390. | 84,390. |

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT 10
 PART VII-A, LINE 10

| NAME OF CONTRIBUTOR | ADDRESS |
|-------------------------------------|--|
| JOEL D. FELDMAN, DIANNE L. ANDERSON | 469 RIDGE AVE SPRINGFIELD, PA 19064 |
| LEAR CORPORATION | 21557 TELEGRAPH ROAD SOUTHFIELD, MI 48033 |

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS STATEMENT 11
 TRUSTEES AND FOUNDATION MANAGERS

| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
|--|--------------------------|-------------------|------------------------------|--------------------|
| JOEL D. FELDMAN 469 RIDGE LANE SPRINGFIELD, PA 19064 | PRESIDENT 30.00 | 0. | 0. | 0. |
| DIANNE L. ANDERSON 469 RIDGE LANE SPRINGFIELD, PA 19064 | SECRETARY 25.00 | 0. | 0. | 0. |
| BRETT FELDMAN 380 30TH STREET BOULDER, CO 80305 | TREASURER 1.00 | 0. | 0. | 0. |
| JOHN BAIR C/O MILESTONE CONSULTING 737 MAIN STREET # 100 BUFFALO, NY 14203 | DIRECTOR 1.00 | 0. | 0. | 0. |
| KELSEY BUTLER 155 W 60TH STREET NEW YORK, NY 10023 | DIRECTOR 1.00 | 0. | 0. | 0. |
| JANINE REPKA 160 EAST 48TH STREET NEW YORK, NY 10017 | DIRECTOR 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII | | 0. | 0. | 0. |

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 12

ACTIVITY ONE

TEMPLE UNIVERSITY
 1801 NORTH BROAD STREET
 PHILADELPHIA, PA 19122
 SCHOLARSHIP

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

1,500.

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 13

ACTIVITY THREE

PUBLIC SPEAKING IS CONDUCTED THROUGHOUT THE UNITED STATES ON THE DANGERS OF DISTRACTED DRIVING. SPEAKERS VISIT SCHOOLS, A SUNDRY OF ORGANIZATIONS, SMALL AND LARGE BUSINESSES, FEDERAL, STATE AND LOCAL GOVERNMENT BODIES TO CONDUCT EDUCATION TALKS, DISCUSSIONS AND PRESENTATIONS ON THE DANGERS OF DISTRACTED DRIVING.

THROUGH A NETWORK OF VOLUNTEER SPEAKERS EDUCATIONAL TALKS ARE PROVIDED TO MIDDLE SCHOOL, HIGH SCHOOL AND COLLEGE STUDENTS WITHOUT COST TO THE SCHOOLS. SINCE 2010 NEARLY 450,000 STUDENTS HAVE SEEN PRESENTATIONS IN 46 STATES AND CANADA AND ABOUT 18000 ADULTS. ABOUT 750 STUDENTS AND PARENTS ARE INVOLVED IN ANNUAL VIDEO AND MEME CONTESTS. EDUCATIONAL MESSAGES ARE ALSO DISSEMINATED THROUGH 70,000 ACTIVE FACEBOOK AND TWITTER FOLLOWERS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 3

81,038.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 15
PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED ✓

THE CASEY FELDMAN MEMORIAL FOUNDATION
469 RIDGE AVENUE
SPRINGFIELD, PA 19064

TELEPHONE NUMBER

215-285-9145

EMAIL ADDRESS

WWW.CASEYFELDMANFOUNDATION.ORG & ENDDD.ORG

FORM AND CONTENT OF APPLICATIONS

SEE WEBSITE: WWW.CASEYFELDMANFOUNDATION.ORG

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

ONLY CONSISTENT WITH FOUNDATION MISSION