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EXTENDED TO NOVEMBER 15 **Return of Private Foundation**

. Form 990-PF

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

Department of the Treasury Internal Revenue Service For calendar year 2016 or tax year beginning and ending Name of foundation A Employer identification number WM CRAIG AND TENEEN L DOBBS CHARITABLE FOUNDATION 27-6429985 Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number 2360 TREESDALE CIRCLE 3178485377 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CARMEL, IN 46032 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here If Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 1,123. (Part I, column (d) must be on cash basis.) ▶\$ **Analysis of Revenue and Expenses** Part I (a) Revenue and expenses per books (d) Disbursements for charitable purposes (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) income income (cash basis only) 158,700 N/A Contributions, gifts, grants, etc., received Check Inf the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments STATEMENT 1 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all b assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) 11 Other income 158,701 Total. Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 2 6,025 0. 0. **b** Accounting fees c Other professional fees 17 Interest 1,403 0. 0. STMT 3 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings and 22 Printing and publications 23 Other expenses 24 Total operating and administrative <u>7,428</u>. 0 expenses. Add lines 13 through 23 151,940 148,690 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 148,690. 159,368 Add lines 24 and 25 27 Subtract line 26 from line 12: <667 2 Excess of revenue over expenses and disbursements 1. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A

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

CHARITABLE FOUNDATION 27-6429985 Page 2 Balance Sheets Attached schedules and amounts in the description Beginning of year End of year column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value 790. 123 123. 4 Cash - non-interest-bearing 2 Savings and temporary cash investments 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 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 Less accumulated depreciation STATEMENT 5 1,000 1,000 1,000. 15 Other assets (describe ► 16 Total assets (to be completed by all filers - see the 1,790 1.123 1,123. instructions. Also, see page 1, item I) 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 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Vet Assets or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted $\triangleright \mathbf{x}$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0. 0. 1,790. ,123. STATEMENT 4 29 Retained earnings, accumulated income, endowment, or other funds 1,790. 1,123. 30 Total net assets or fund balances 1,790 31 Total liabilities and net assets/fund balances 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) 1,790. 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3

623511 11-23-16

Form **990-PF** (2016)

5 Decreases not included in line 2 (itemize)

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

Form 990-PF (2016)

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How a P - Puro D - Dor	cquired chase ation	(c) Date acqui (mo., day, yr	red (d) Date sold .) (mo., day, yr.)	
a							
b NO	NE			<u> </u>		·- · · · · · · · · · · · · · · · · · ·	
C				ļ <u>-</u>			
d				 			
<u>e</u>	(D)						(1)
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			(h) Gain or (e) plus (f) n	
8							
b							
<u>C</u>							
<u>d</u>							
Complete only for assets shown	ng gain in column (h) and owner	d by the foundation	on 10/21/60			0 (0-1 //-	N
Complete only for assets showing					(I) COL	Gains (Col. (h (k), but not le:	ı) gain minus ss than -0-) or
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			Losses (from	1 col. (h))
a							
b							
<u>C</u>							
<u>d</u>							
<u>e</u>	<u> </u>						
Capital gain net income or (net ca	apital loss) { If gain, also if (loss), enti	enter in Part I, line er -0- in Part I, line	7 7	} 2			
Net short-term capital gain or (lo	•						
If gain, also enter in Part I, line 8,		(-)]			
If (loss), enter -0- in Part I, line 8] 3	<u> </u>		
Part V Qualification U	Jnaer Section 49 4 0(e).						
					ment Inc	ome	
For optional use by domestic privat					ment Inc	ome	
•	te foundations subject to the sec				ment Inc	ome	
f section 4940(d)(2) applies, leave t	te foundations subject to the sectithis part blank.	tion 4940(a) tax on	net investment ii	ncome.)	ment inc	ome	Voc V No
section 4940(d)(2) applies, leave t	te foundations subject to the sectithis part blank. Control 4942 tax on the distributab	tion 4940(a) tax on le amount of any ye	net investment ii ear in the base pe	ncome.)	ment Inc	ome	Yes X No
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WM CRAIG AND TENEEN L DOBBS Form 990-PF (2016) CHARITABLE FOUNDATION Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1. -Date of ruling or determination letter: __ (attach copy of letter if necessary-see instructions) 0. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here **X** and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 0. Add lines 1 and 2 3 0. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 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 d Backup withholding erroneously withheld 6d 0. 7 Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 0. Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 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 Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b

	Title allower is Tes to Ta. of Tb., attach a detailed description of the activities and copies of any materials published of	"			
	distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?		1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ► \$ O . (2) On foundation managers. ► \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		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 instrument, articles of incorporation, or	j			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
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?		5		X
	If "Yes," attach the statement required by General Instruction T	Į.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	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," complete Part II, col. (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	_			
	IN				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	l
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar				
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	L	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
	-	For	m 99 0)-PF	(2016)

	990-PF (2016) CHARITABLE FOUNDATION	27-64299	85		Page 5
P	art VIL-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)		11		Х
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)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address ► NONE				
14		▶3178485	37	7	
	Located at ▶ 2360 TREESDALE CIRCLE, CARMEL, IN	ZIP+4 ▶460		<u>. </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	/ p <u></u>		_	\Box
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities, or other financial account in a foreign country?	Г	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	-	10		
	foreign country				
Pá	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
4.	During the year did the foundation (either directly or indirectly):	-		162	110
16		es X No			
		es LAL No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	. 🖼			
		es X No			
		es X No			
		es X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
		es X 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.)	es X No			
t	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)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here	ightharpoons			
(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 2016?		1c		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)):				
8	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginni	na			
		es X No			
	If Woo I leat the years	10			
ŀ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	,t			
-	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attact	I .			
	statement - see instructions.)	/-	O.		
,	•	M/A	2b		
٠	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
٠.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
38	· · · · · · · · · · · · · · · · · · ·	. 🖼			
		es X No			
(of "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons a				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				!
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule				
	Form 4720, to determine if the foundation had excess business holdings in 2016.)	N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	L	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?		4b		X
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Form 990-PF (2016) CHARITABLE FOUNDATION			<u>27-64299</u>	<u>85</u>	Pa	age 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ıed)			
5a During the year did the foundation pay or incur any amount to:						
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No			
 (2) Influence the outcome of any specific public election (see section 4955); or 	r to carry on, directly or indire				1	
any voter registration drive?			s X No	1		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			1		
4945(d)(4)(A)? (see instructions)		X Ye	8 No	-		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			i		
the prevention of cruelty to children or animals?		Ye	8 X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described	ın Regulatıons		1	- [
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?			5b	X	
Organizations relying on a current notice regarding disaster assistance check h	iere					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	ined			- 1	
expenditure responsibility for the grant?			s X No	1		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				İ	- 1	
a personal benefit contract?	F-7 F	☐ Ye	s X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6b	1	X
If "Yes" to 6b, file Form 8870.	or bornar bornam communic		-		<u> </u>	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chelter transaction?		s X No		1	
b If "Yes," did the foundation receive any proceeds or have any net income attribute.		L		7b		
Part VIII Information About Officers, Directors, Trust		nagers Highly				
Paid Employees, and Contractors	ooo, r ouridation me	go.o,g	•			
1 List all officers, directors, trustees, foundation managers and their	compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e	Expe	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		count, d llowan	
WM CRAIG DOBBS	TRUSTEE	Citter -0 j	compensation	 "	iio ii diii	
2360 TREESDALE CIRCLE	INODIDE					
CARMEL, IN 46032	0.00	0.	0.	1		0.
TENEEN L DOBBS	TRUSTEE			 	-	
2360 TREESDALE CIRCLE	IKOSIEE					
CARMEL, IN 46032	0.00	0.	0.	ļ		0.
CARMED, IN 40032	0.00		<u> </u>	╁─-		<u> </u>
	†					
	-					
				┼──		
	_	1		1		
	-					
2. Componentian of five highest anid amplement of they then the single	luded on line 4) If none	anter PAIONE U		<u> </u>		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	, enter NONE.	(d) Contributions to	1	e) Expe	9000
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acc	count,	other
- 	devoted to position	 	compensation	<u>a</u>	llowan	ices
NONE	4					
		-		┼		
]		ļ	}		
		 		 		
	1					
<u> </u>		ļ		↓		
<u> </u>	1		[
<u></u>		<u> </u>		<u> </u>		
]			1		
	L	<u> </u>		<u> </u>	_	
Total number of other employees paid over \$50,000		····				0
			Form	1 990	-PF((2016)

WM CRAIG AND TENEEN L DOBBS

Total. Add lines 1 through 3

Form 990-PF (2016) CHARITABLE FOUNDATION 27-6429985 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) 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 b Average of monthly cash balances 1b c Fair market value of all other assets 1c 2,841. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 2.798. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 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.) 140. Minimum investment return from Part X, line 6 1 Tax on investment income for 2016 from Part VI, line 5 Income tax for 2016. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b 140. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 140. 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 7 140. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 148,690. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 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 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 148,690. 4

Adjusted qualifying distributions. Subtract line 5 from line 4 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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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6

income. Enter 1% of Part I, line 27b

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				1.10
line 7				140.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:		•		
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 79,408.				
b From 2012 262, 373.				
c From 2013 299, 529.				
d From 2014 228, 053.				
e From 2015 152,659.	4 000 000			
f Total of lines 3a through e	1,022,022.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 148,690.				
a Applied to 2015, 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	_ 1			
(Election required - see instructions)	0.			110
d Applied to 2016 distributable amount				140.
e Remaining amount distributed out of corpus	148,550.			
5 Excess distributions carryover applied to 2016 (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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,170,572.			
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 2015. Subtract line	=			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017			ļ <u> </u>	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 2011			<u> </u>	
not applied on line 5 or line 7	79,408.			<u> </u>
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	1,091,164.		<u> </u>	
10 Analysis of line 9:				
a Excess from 2012 262, 373.				
b Excess from 2013 299, 529.				
c Excess from 2014 228,053.			[1
d Excess from 2015 152,659.	!		1	
e Excess from 2016 148,550.		<u> </u>	l <u> </u>	L

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Part XIV Private Operating F	oundations (see ins		II-A, question 9)	N/A	2,3,5,0,5			
1 a If the foundation has received a ruling of	determination letter that i	t is a private operating		<u></u>				
foundation, and the ruling is effective for			▶					
b Check box to indicate whether the found	ation is a private operating	foundation described	in section	4942(j)(3) or 49	42(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			T					
each year listed				l.				
b 85% of line 2a					<u> </u>			
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	1							
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: a "Assets" alternative test - enter:	}							
(1) Value of all assets				1	<u></u>			
(2) Value of assets qualifying								
under section 4942(j)(3)(B)(i)								
b "Endowment" alternative test - enter								
2/3 of minimum investment return shown in Part X, line 6 for each year			}		•			
listed	_							
c "Support" alternative test - enter:								
(1) Total support other than gross	1							
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			if the foundation	had \$5,000 or mo	ore in assets			
at any time during t	he year-see instr	uctions.)						
1 Information Regarding Foundation	-							
a List any managers of the foundation wh			ntributions received by the	foundation before the clo	se of any tax			
year (but only if they have contributed r	nore than \$5,000). (See se	ection 507(d)(2).)						
SEE STATEMENT 6				·				
b List any managers of the foundation wh			n (or an equally large porte	on of the ownership of a p	artnership or			
other entity) of which the foundation ha	o a 10 /0 UI YIRAKRI IIIKRES							
NONE				_				
2 Information Regarding Contribut					and for former life			
Check here \(\sum_\) if the foundation of the foundation makes gifts, grants, etc.				not accept unsolicited requ				
	<u>`</u>							
a The name, address, and telephone num	ber or e-mail address of tr	ie person to wnom app	Dilications snould be addre	ssea:				
CDE CMAMDADAM 7	OPE OF TRANSPORT 7							
	SEE STATEMENT 7							
b The form in which applications should be submitted and information and materials they should include:								
c Any submission deadlines:								
d Any rootrotions or limitations as con-	o quah aa hu aaccaak	Largae charatala ficial	o kinds of institutions :	other factors:				
d Any restrictions or limitations on award	o, ouch as by geographica	। वा एवड, सावा ।विधार ॥६।०	o, rimus of institutions, of	ouici idoldis.				
		 _						

3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
OUNG MARINES OF THE MARINE CORPS		PC	GENERAL FUND	
,EAGUE P.O. BOX 70735, SOUTHWEST STATION				
VASHINGTON DC 20024	<u> </u>			1,000
THE CHILDREN'S THERAPLAY FOUNDATION,		PC	GENERAL FUND	
INC				
9919 TOWNE ROAD CARMEL IN 46032				16,200
AUGIST, IN 40032	 			10,200
THE COLLEGE OF FELLOWS		PC	GENERAL FUND	
3823 BEVERLY GLEN BLVD			SEMERAL FORD	
SHERMAN OAKS, CA 91423				1,800
		1		
IN SEARCH OF A CURE		₽C	GENERAL FUND	
14551 S RAVINIA AVE SUITE 2B				
ORLAND PARK, IL 60462		 		5,000
SCHOOL ON WHEELS		PC	GENERAL FUND	
2605 E. 62ND STREET SUITE 2005 INDIANAPOLIS IN 46220				2,500
	TINUATION SHE	ET(S)	▶ 3a	151 940
b Approved for future payment				
		1		
NONE				
			ļ.	
		<u> </u>		
		1		
	 	_	<u> </u>	
		Ì		
Total		<u> </u>	> 3b	
				orm 990-PF (201

nter gross amounts unless otherwise indicated.		ousiness income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a			1.5		
b					
c			ļ		
d	1 1		ļ		
e	-				
England contracts from covernment agencies	-				
g Fees and contracts from government agencies Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	1.	
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property			-		
Other investment income Gain or (loss) from sales of assets other			-	-	
than inventory	j				
Net income or (loss) from special events			 		
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b	_ [
	I .				
c	 				
d			ļ		
d					
e Subtotal. Add columns (b), (d), and (e)		0.		1.	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)		0.			
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations	3.)			13	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations	3.)			13	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	s to the Accor	nplishment of E	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Ge worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which i	s to the Accor	nplishment of Excolumn (e) of Part XVI-A	kemp	13 ot Purposes	

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Form 990-PF (2016) 27-6429985 CHARITABLE FOUNDATION Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 10 If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? **b** If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss the return with the preparer Sign shown below (se Here PRESIDENT LX Yes Signature of officer or trustee Title Print/Type preparer's name Check [PTIN r's signa**t**ur, self- employed Paid P00019231 DAVID A. RESNICK DAVID A RESNICK 06/14/17 Preparer Firm's name ► KSM BUSINESS SERVICES, Firm's EIN ► 35-2123203 Use Only

Firm's address ▶ P.O. BOX 40857

INDIANAPOLIS, IN 46240-0857

Phone no.

(317) 580-2000

Form **990-PF** (2016)

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount contribution status of Name and address (home or business) or substantial contributor recipient PIRATES INC PC GENERAL FUND P.O. BOX 3288 2,500. MUNSTER, IN 46321 SHOOT FOR A CURE GENERAL FUND PC 1345 YOSEMITE CIRCLE 2,500, OAKLEY CA 94561 UNIVERSITY OF INDIANAPOLIS ÞС GENERAL FUND 1400 E HANNA AVENUE 3,000. INDIANAPOLIS, IN 46227 INTERNATIONAL GUIDING EYES - GUIDE РC GENERAL FUND DOGS OF AMERICA 13445 GLENOAKS BLVD 5,000, SYLMAR, CA 91342 PAINTERS AND ALLIED TRADES FOR PC GERNAL FUND CHILDREN'S HOPE FOUNDATION 7234 PARKWAY DRIVE HANOVER MD 21076 1,500. LOCAL 39 EDUCATIONAL SCHOLARSHIP FUND ₽C SCHOLARSHIP FUND 337 VALENCIA STREET SAN FRANCISCO, CA 94103 5,000, SHEET METAL WORKERS INTERNATIONAL ÞС SCHOLARSHIP FUND SCHOLARSHIP FUND 1750 NEW YORK AVENUE NW 6,000. WASHINGTON, DC 20006 BALL STATE UNIVERSITY FOUNDATION, INC PC GENERAL FUND 2800 W. BETHEL AVENUE 15,000. MUNCIE IN 47304 REID HOSPITAL FOUNDATION SO III FI GENERAL FUND 1100 REID PARKWAY RICHMOND IN 47374 5,000. PLASTERERS & CEMENT MASONS ÞС GENERAL FUND SCHOLARSHIP 810 W. STADIUM LANE SACRAMENTO CA 95834 3,000, Total from continuation sheets 125,440,

3 Grants and Contributions Paid During the Y	, 			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTRIBUTION	
MICHIGAN CHAPTER OF THE SHEET METAL &		NC	GRANT TO ORGANIZATION.	
AIR CONT. CONTRACTORS		NC	NO EXPENDITURE	
P.O. BOX 220	1		RESPONSIBILITY DONE.	
HASLETT, MI 48840			CORRECTED.	
			Solution Dy.	
REBEUF HIGH SCHOOL		PC PC	GENERAL FUND	
801 WEST 86TH STREET				
INDIANAPOLIS, IN 46268		<u> </u>		13,50
MIAMI UNIVERSITY FOUNDATION		PC	GENERAL FUND	
107 ROUDEBUSH HALL		{		
OXFORD, OH 45056		 		6,25
IRON WORKERS 392 SCHOLARSHIP FUND		PC	SCHOLARSHIP FUND	
2995 KINGSHIGHWAY		}	}	
EAST ST, LOUIS, IL 62201	 			34
CARMEL CLAY PUBLIC LIBRARY		PC	GENERAL FUND	
55 4TH AVE SE		}	}	
CARMEL, IN 46032		 		5,00
LOCAL NO. 1 ELEVATOR CONSTRUCTORS		NC	GRANT TO ORGANIZATION.	
UNION OF NEW YORK CITY AND VICINITY			NO EXPENDITURE	
47-24 27TH STREET		1	RESPONSIBILITY DONE.	
LONG ISLAND CITY, NY 11101			CORRECTED,	50
COMMUNITY CANCER RESEARCH		PC	GENERAL FUND	
901 MACARTHUR BLVD		1		
MUNSTER, IN 46321	 		+	2,0
		l		
THE CHILDREN'S HEALTH FUND		₽C	GENERAL FUND	
107 ROUDEBUSH HALL		1		_
OXFORD OH 45056				5
INDIANA STATE FAIR FOUNDATION		PC	GENERAL FUND	
1202 EAST 38TH STREET				10.0
INDIANAPOLIS, IN 46205		 	+	10,0
INITED STATES EQUESTRIAN TEAM		PC	GENERAL FUND	
FOUNDATION		1		
1040 POTTERSVILLE ROAD P.O. BOX 355		1		
GLADSTONE, NJ 07934 Total from continuation sheets		ــــــــــــــــــــــــــــــــــــــ		25_0

CHARITABLE FOUNDATION

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				
Recipient Alexa and address (hears an historian)	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
CARMEL FOP LODGE 185 FOUNDATION		PC	GENERAL FUND	
P.O. BOX 3142				
CARMEL, IN 46082	 	-		1,000
EVANS SCHOLARS		PC	GENERAL FUND	
ONE BRIAR ROAD]		10.00
GOLF, IL 60029		 		10,00
BIG BROTHERS BIG SISTERS		PC	GENERAL FUND	
2960 N. MERIDIAN STREET #150 INDIANAPOLIS, IN 46208				10
INDIANAFODIS, IN 40200		 		10
GUIDER MORNE MORNING LOCAL I				
SHEET METAL WORKERS LOCAL 7 4931 CONTEC DRIVE		NC	GRANT TO ORGANIZATION. NO EXPENDITURE	
LANSING MI 48910			RESPONSIBILITY DONE.	25
		 		
		1		
				_
				
	+	 	+	
Total from continuation sheets		.1		

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.

2016

Name of the organization

WM CRAIG AND TENEEN L DOBBS
CHARITABLE FOUNDATION

Employer identification number

27-6429985

Organization type (check one): Filers of: Section: ___ 501(c)(Form 990 or 990-EZ) (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 foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. 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),

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) (2016)

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).

Name of organization WM CRAIG AND TENEEN L DOBBS CHARITABLE FOUNDATION

Employer identification number

27-6429985

Part I	Contributors	(See instructions)	Use duplicate copies of F	Part I if additional	space is needed.
--------	---------------------	--------------------	---------------------------	----------------------	------------------

(a)	(b)	(c)	(d)	
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution	
1	WM CRAIG & TENEEN L DOBBS 2360 TREESDALE CIRCLE CARMEL, IN 46032	\$ 158,700.	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 Omnicash 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

WM CRAIG AND TENEEN L DOBBS

CHARITABLE FOUNDATION

Employer identification number

27-6429985

Part II	Noncash Property (See instructions) Use duplicate copies of P	art 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
		\$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Employer identification number

	AND TENEEN L DOBBS LE FOUNDATION		27-6429985			
Part III I	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete of completing Part III, enter the total of exclusively religiou	columns (a) through (e) and the following s, charitable, etc., contributions of \$1,000 or less	ection 501(c)(7), (8), or (10) that total more than \$1,000 for			
l	Jse duplicate copies of Part III if addition	al 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, a	nd 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, a	nd 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 SAV	INGS AND TEM	PORARY (CASH II	NVESTMENTS	STATEMENT	1
SOURCE	(A REVE PER B	NUE		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOM	3
MORGAN STANLEY	•	1.		1.		
TOTAL TO PART I, LINE 3		1.		1.		
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS		VEST-	(C) ADJUSTED NET INCOM		
ACCOUNTING	6,025.	w'	0.			0.
TO FORM 990-PF, PG 1, LN 16B	6,025.		0.			0.
FORM 990-PF	TAX	ES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS		VEST-	(C) ADJUSTED NET INCOM	CHARITA	
EXCISE TAX & PENALTY	1,403.		0.			0.
TO FORM 990-PF, PG 1, LN 18	1,403.		0.			0.
FORM 990-PF	OTHER F	UNDS			STATEMENT	4
DEGGETARETON			BEG	(A) INNING OF YEAR	(B) END OF YEAR	
DESCRIPTION						
DESCRIPTION ENDOWMENT FUND			-	1,790.	1,1	23.

FORM 990-PF	OTHER ASSETS	STATEMENT		
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	?
ACTIVE ASSET ACCOUNT	1,000.	1,000.	1,00	0.
TO FORM 990-PF, PART II, LINE 15	1,000.	1,000.	1,000	
FORM 990-PF PART LIST OF F	STATEMENT	6		

NAME OF MANAGER

WM CRAIG DOBBS TENEEN L DOBBS FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MR. WM. CRAIG DOBBS 2360 TREESDALE CIRCLE CARMEL, IN 46032

TELEPHONE NUMBER

317-848-5377

FORM AND CONTENT OF APPLICATIONS

SEND LETTER STATING TYPE OF ORGANIZATION & MISSION STATEMENT, AMOUNT OF DONATION, ADDRESS OF ORGANIZATION, NAME AND TELEPHONE NUMBER OF CONTACT PERSON.

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

ASSISTANCE WILL ONLY BE PROVIDED TO ORGANIZATIONS THAT PROVIDE THE FOLLOWING SERVICES: CHARITABLE, RELIGIOUS, SCIENTIFIC, LITERARY, AND/OR EDUCATIONAL.