Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0052

2017

Open to Public Inspection

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Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2017 or tax year beginning 2017, and ending 20 A Employer identification number Name of foundation 36-3990693 WILLIAM AND WILMA DOOLEY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 235 SHERIDAN ROAD (847)835 - 1136City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ GLENCOE IL 60022-1923 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, ☐ Address change □ Name change check here and attach computation E If private foundation status was terminated under Check type of organization: |X| Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method: 🗵 Cash 🗌 Accrual Fair market value of all assets at If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here end of year (from Part II, col. (c), line 16) ▶ \$ (Part I, column (d) must be on cash basis) 960,998. (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and for charitable (b) Net investment (c) Adjusted net expenses per books amounts in columns (b), (c), and (d) may not necessarily equal ıncome purposes (cash basis only) the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) 1.070. 1 2 Check ► X if the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 81. 81 81 4 Dividends and interest from securities 12,577. 12,577. 12,577. 5a 0. 0. 0. Gross rents Net rental income or (loss) 0. b Net gain or (loss) from sale of assets not on line 10 Revenue 6a b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 68,198 Net short-term capital gain 0. 209. 9 Income modifications 1 4/57 2 0 2018 Gross sales less returns and allowances 10a Less: Cost of goods sold . . . 0. b 0. Gross profit or (loss) (attach schedule) 0. 1,328. 1,328. Other income (attach schedule) See Stim 11 1,328. Total. Add lines 1 through 11 ~ 82,184. 14,195. 12 15.056. 10Compensation of officers, directors, trustees, etc. S 13 0. 0. 0. 0. Operating and Administrative Expenses Other employee salaries and Wages . 0. 14 0. 0. 0. Pension plans, employee benefits 0. 15 0. 0. 0. 16a Legal fees (attach schedule) . 0. 0. 0. 0. Accounting fees (attach schedule) 1,220. 150 150. 1,070. b Other professional fees (attach schedule) L-16c. Stmt. 3,643. 3,643. 3,643. 0. C 17 Interest Taxes (attach schedule) (see instructions) See . Stimt. 615. 615. 615. 0. 18 19 Depreciation (attach schedule) and depletion . . . 0. 0. 0. 0. 20 0. 0. Occupancy 0. Travel, conferences, and meetings 21 0. 0. 0. 0. 0. 0. 22 0. 0. Printing and publications . . . Other expenses (attach schedule) See .St.mt. 23 54. 0. n 54. 24 Total operating and administrative expenses. Add lines 13 through 23 5,532. 4,408 4,408. 1,124. 99,075. 25 Contributions, gifts, grants paid 99,075 Total expenses and disbursements. Add lines 24 and 25 104,607. 4,408 4,408. 100,199 26 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -89,551 **b** Net investment income (if negative, enter -0-) . 77,776 9,787. Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

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art II	Attached schedules and amounts in the description column	Beginning of year	End of y	ear
artii	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value (c) Fair Market Value
1	Cash-non-interest-bearing	1,983.	5,292.	5,292
2	Savings and temporary cash investments	6,287.	304.	304
3	Accounts receivable ▶0.			
	Less: allowance for doubtful accounts ▶0	0.	0.	(
4	Pledges receivable ► 0.			
	Less: allowance for doubtful accounts	0.	0.	(
5	Grants receivable	0.	0.	(
6	Receivables due from officers, directors, trustees, and other		_	
_	disqualified persons (attach schedule) (see instructions) ⁰	0.	0.	(
7	Other notes and loans receivable (attach schedule) ▶0.			
	Less allowance for doubtful accounts ▶ 0.	0.	0.	
8 9 10a	Inventories for sale or use	0.	0.	(
9	Prepaid expenses and deferred charges	0.	0.	(
1		0.	0.	
b		375,346.	356,413.	929,082
C		25,500.	25,500.	26,32
11	Investments—land, buildings, and equipment: basis ► 0.			
1,0	Less accumulated depreciation (attach schedule) ▶ 0.	0.	0.	
12	Investments—mortgage loans	0.	0.	
13	investments—other (attach schedule)0	0.	0.	
14	Land, buildings, and equipment, basis ▶ 0.			
	Less accumulated depreciation (attach schedule) ► 0.	0.	0.	
15	Other assets (describe ► L-15 Stmt)	500.	0.	
16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item l)		225 522	0.00
12		409,616.	387,509.	960,99
17	Accounts payable and accrued expenses	0.	0.	
18	Grants payable	0.	0.	
19	Deferred revenue	0.	0.	
20	Mortgages and other notes payable (attach schedule)	0.	0.	
19 20 21 22	Other liabilities (describe ► L-22 Stmt)	0.	59.	
23	Total liabilities (add lines 17 through 22)	0.	59.	
	Foundations that follow SFAS 117, check here	<u> </u>		
	and complete lines 24 through 26, and lines 30 and 31.			
24	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted			
24 25 26	Foundations that do not follow SFAS 117, check here ► 🗵 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	409,616.	387,450.	
30	Total net assets or fund balances (see instructions)	409,616.	387,450.	
27 28 29 30 31	Total liabilities and net assets/fund balances (see			
	instructions)	409,616.	387,509.	
art III				
	tal net assets or fund balances at beginning of year-Part II, colur			
	d-of-year figure reported on prior year's return)			409,61
	ter amount from Part I, line 27a			-89,55
	her increases not included in line 2 (itemize) ► Cash and Inves			67,38
	d lines 1, 2, and 3			387,450
5 De	creases not included in line 2 (itemize) ▶	,,	5	
6 To	creases not included in line 2 (itemize) ► tal net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), line	930 6	387,450

Part	V Capital Gains and	Losses for Tax on Investm	nent Income			
		nd(s) of property sold (for example, real e se, 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 :	117.096 shs Lazard	Global Listed Infra		P	05/29/2014	09/01/2017
b :	371.185 shs Wm Bla	ır Small Mid Cap Grw		P	05/31/2014	04/13/2017
C 2	2,000 shs LKQ Corp			D	11/22/1994	12/04/2017
d			 			
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		ain or (loss) s (f) minus (g))
а	2,000.	0.		1,704.		296.
b	8,000.	0.		7,429.		571.
С	79,131.	0.		11,800.		67,331.
<u>d</u>		 				
e	0	(h) and a control of	h the efection detection	10/01/60		
	(i) FMV as of 12/31/69	owing gain in column (h) and owned (j) Adjusted basis as of 12/31/69	(k) Exce	ess of col (i) ol (j), if any	col (k), but i	col (h) gain minus not less than -0-) or (from col (h))
a					· · · · · · · · · · · · · · · · · · ·	296.
<u>b</u>						571.
						67,331.
d						01,331.
e						
2	Capital gain net income o	r (not conital loce) / Y	also enter in Pa		2	68,198.
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c) See instru	ictions. If (loss	s), enter -0- ın)	3	
Part		ler Section 4940(e) for Red			1 - 1	
Was t		e this part blank. section 4942 tax on the distribu			base period?	☐ Yes 🗷 No
1		ount in each column for each ye	<u>`</u>		akına anv entrie	3
	(a)	(b)	ar, see the man	(c)	aking any entire.	(d)
Cale	Base period years endar year (or tax year beginning in	Adjusted applifying distribution	ns Net value	of noncharitable-use a		histribution ratio b) divided by col. (c))
	2016	90,7	93	918,0		0.098902
	2015	80,7		947,4		0.085207
	2014	80,4		1,002,5		0.080256
	2013	70,8		993,9		0.071278
	2012	60,1		840,8		0.071532
2	Total of line 1, column (d)					0.407175
3		for the 5-year base period—di oundation has been in existence				0.081435
4	Enter the net value of nor	charitable-use assets for 2017	from Part X, line	e 5	. 4	912,624.
5	Multiply line 4 by line 3				. 5	74,320.
6	Enter 1% of net investme	nt income (1% of Part I, line 27t	o)		. 6	778.
7	Add lines 5 and 6				. 7	75,098.
8		ons from Part XII, line 4 ater than line 7, check the box i				100, 199. 1% tax rate. See the



rait	Excise Tax based on investment income (Section 4940(a), 4940(b), 4940(e), 0749	40—see	Instruct	ions)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	778	
	here ► 🗷 and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
_	Part I, line 12, col. (b).			
2 3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Add lines 1 and 2	3	0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	778	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5	<u>0</u> 778	
6	Credits/Payments:			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 778.			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) . 6c 0.			
_d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d	7	778	<u></u>
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	8		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	9 10	0	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax	11		
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	or did it	Ye	es No
	participate or intervene in any political campaign?		1a	×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?	See the	1 1	
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any	 materiale	1b	×
	published or distributed by the foundation in connection with the activities.	materiais		
C	Did the foundation file Form 1120-POL for this year?		1c	×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$;
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in on foundation managers. ▶ \$	nposed		ţ
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? .		2	×
	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, a incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3 4a	- ×
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?		4a 4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	×
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory direct and the state legislation that effectively amends the governing instrument so that no mandatory direct			
_	conflict with the state law remain in the governing instrument?		6 ×	
7 8a	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), an Enter the states to which the foundation reports or with which it is registered. See instructions.	d Part XV	7 >	(
L	IL If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b >	,
9	Is the foundation claiming status as a private operating foundation within the meaning of section 49			
9	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV.			· ·
	complete Part XIV		9	\times \angle
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule lis			
	names and addresses		10	<u> </u>
			-npp qqn_E	JE (0017)

Part	VII-A Statements Regarding Activities (continued)					
	At any time of one of the case when the foundation disease, and the state of the case of the state of t		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		×		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			<u> </u>		
-	person had advisory privileges? If "Yes," attach statement. See instructions	12		×		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×			
	Website address ► N/A					
14	The books are in care of ► WILMA A. DOOLEY Telephone no. ► (847):	335-	1136			
15	Located at ► 235 SHERIDAN ROAD, GLENCOE, IL ZIP+4 ► 60022-Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	-192.		▶ [
15	and enter the amount of tax-exempt interest received or accrued during the year	• •	•			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No		
	over a bank, securities, or other financial account in a foreign country?	16		×		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					
Dort	the foreign country ► VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
Part	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? ☐ Yes ☒ No					
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person?					
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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)?					
	(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					
h	termination of government service, if terminating within 90 days.)					
b	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b				
	Organizations relying on a current notice regarding disaster assistance, check here	113				
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			i,		
	were not corrected before the first day of the tax year beginning in 2017?	1c		×		
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)):					
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and					
	6e, Part XIII) for tax year(s) beginning before 2017?					
b	If "Yes," list the years ▶ 20 , 20 , 20 , 20 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.)	2b		X		
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	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
Ja	at any time during the year?					
b	If "Yes," did it have excess business holdings in 2017 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 2017.)	6:				
4a	foundation had excess business holdings in 2017.) Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a		×		
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70				
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X		

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5a			Inich Form	7,20	,			, = = = ,		
	During the year, did the foundation pay or incur	any am	ount to.							Yes No
	(1) Carry on propaganda, or otherwise attempt	to influe	nce legislatio	n (sect	ion 4945(e)))? .	☐ Yes	⊠ No		
	(2) Influence the outcome of any specific publi	c electi	on (see secti	on 495	5); or to ca	arry on,				
	directly or indirectly, any voter registration di	rive?					Yes	⊠ No		
	(3) Provide a grant to an individual for travel, stu	idy, or d	other similar p	ourpose	es?		Yes	⊠ No		
	(4) Provide a grant to an organization other tha	n a cha	rıtable, etc., d	organiz	ation desc	ribed in				
	section 4945(d)(4)(A)? See instructions						☐ Yes	⊠ No		
	(5) Provide for any purpose other than religious									
	purposes, or for the prevention of cruelty to children or animals?							ı		
b	the state of the s									
	Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions									
	Organizations relying on a current notice regard	ıng disa	ster assistan	ce, che	ck here .			▶ □		
С	If the answer is "Yes" to question 5a(4), does	the four	ndation claim	exem	otion from	the tax				
	because it maintained expenditure responsibility	for the	grant?				☐ Yes	☐ No		
	If "Yes," attach the statement required by Regul	ations s	section 53.49	45-5(d)						
6a	Did the foundation, during the year, receive any	funds,	directly or inc	directly	to pay pre	emiums	;			
	on a personal benefit contract?						☐ Yes	⊠ No		
b	Did the foundation, during the year, pay premiur	ns, dire	ctly or indired	tly, on	a personal	benefi	t contract	? .	6b	×
	If "Yes" to 6b, file Form 8870.									
	At any time during the tax year, was the foundation						TYes	🗵 No		
b	If "Yes," did the foundation receive any proceed								7b	
Part	VIII Information About Officers, Direct	ctors, 1	rustees, Fo	ounda	tion Man	agers,	Highly F	Paid E	mploye	es,
	and Contractors									
1	List all officers, directors, trustees, and found					,			·	
	(a) Name and address	hou	e, and average rs per week	(If r	mpensation not paid,	emplo	Contribution byee benefit	plans :		se account, lowances
		+	ed to position	en	ter -0-)	and def	erred compe	ensation	Otheral	
	MA A. DOOLEY	PRES-								_
	SHERIDAN RD, GLENCOE IL 60022	GEOV	2.00		0.	<u> </u>		0.		0.
	LIAM F. DOOLEY	SECY	i		0	ļ		_		0
2.35			2.00							
	SHERIDAN RD, GLENCOE IL 60022	DIDE			0.			0.		0.
WAL	TER ZEGERS	DIRE	CTOR							
WAL		DIRE			0.			0.	!	0.
WAL	TER ZEGERS	DIRE	CTOR							
WAL' 235	FER ZEGERS SHERIDAN RD, GLENCOE IL 60022		CTOR 1.00	o incl	0.	1		0.	-) 16	0.
WAL	FER ZEGERS SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe		CTOR 1.00	se incl	0.	ne 1-	see instr	0.	s). If no	0.
WAL' 235	FER ZEGERS SHERIDAN RD, GLENCOE IL 60022		CTOR 1.00 er than thos		0.	ne 1-		0.		0.
235 2	FER ZEGERS SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE."	es (oth	er than thos	verage	0. uded on li		(d) Contribi	0.	(e) Expen	o. ne, enter
235 2	FER ZEGERS SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe	es (oth	CTOR 1.00 er than thos	verage reek	0.		(d) Contrib	0.	(e) Expen	0. ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	o. ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	o. ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	ne, enter
235 2	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek	0. uded on li		(d) Contribi employee plans and	0.	(e) Expen	ne, enter
2 2 NONE	SHERIDAN RD, GLENCOE IL 60022 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	es (oth	er than thos	verage reek ssition	0 . uded on li	nsation	(d) Contribi employee plans and d compen	Utions to benefit deferred sation	(e) Expen	o. ne, enter

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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Pa and Contractors (continued)	aid Employees,
3 Fiv	re highest-paid independent contractors for professional services. See instructions. If none, enter	"NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total nun	nber of others receiving over \$50,000 for professional services	. ▶ 0
Part IX-		
rait in	Summary of Direct Chantable Activities	
	foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the num tions and other beneficiaries served, conferences convened, research papers produced, etc.	nber of Expenses
1		
2		
		•••••
3		
4	······································	
Part IX-	<u> </u>	
	the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
2		
		·
All other	program-related investments. See instructions	
3		
Total. Ad	d lines 1 through 3	
		Form 990-PF (2017

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn fou	ındatıons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
а	Average monthly fair market value of securities	1a	917,971.
b	Average of monthly cash balances	1b	8,551.
C	Fair market value of all other assets (see instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	926,522.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	926,522.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	13,898.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	912,624.
6	Minimum investment return. Enter 5% of line 5	6	45,631.
Part !		ounda	tions
1	Minimum investment return from Part X, line 6	1	45,631.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	778.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	44,853.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	44,853.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	44,853.
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	40	100 100
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	100,199.
þ	Program-related investments—total from Part IX-B	1b	
2	purposes	2	0
2			0.
3	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	3a	0.
a	Cash distribution test (attach the required schedule)	3b	0.
ь 4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	100,199.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	 	100,199.
•	Enter 1% of Part I, line 27b. See instructions	5	778.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	99,421.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whet	

ai c	Ondistributed income (see instruction	7113)			
1	Distributable amount for 2017 from Part XI, line 7	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2	Undistributed income, if any, as of the end of 2017:	··- · · ·			44,853.
_	Enter amount for 2016 only			0	
a			·	0.	
р	Total for prior years. 20,20,20	 · · -			
3	Excess distributions carryover, if any, to 2017:				
a	From 2012				
b	From 2013				
С	From 2014				
d	From 2015				
е	From 2016				
f	Total of lines 3a through e	111,399.	· · · · · · · · · · · · · · · · · · ·		
4	Qualifying distributions for 2017 from Part XII,				
	line 4: ▶ \$ 100,199.				
а	Applied to 2016, but not more than line 2a .			0.	
þ	Applied to undistributed income of prior years				
	(Election required—see instructions)		0.		
С	Treated as distributions out of corpus (Election				
	required—see instructions)	0.	,		
d	Applied to 2017 distributable amount	<u> </u>	<u>-</u>		44,853.
е	Remaining amount distributed out of corpus	55,346.			
5	Excess distributions carryover applied to 2017	0.		,	0.
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as	:			
	indicated below:				
a	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	166,745.	·		
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b	,	0.		
С	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.		
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount—see instructions			_	
				0.	
f	Undistributed income for 2017. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2018				_
-					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)				
8	Excess distributions carryover from 2012 not	0.			
ь	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2018.	0.			
3	Subtract lines 7 and 8 from line 6a	166 745			
10	Analysis of line 9.	166,745.			
ıu a	Excess from 2013				
a b	Excess from 2014				
C	Excess from 2015				
d	Excess from 2016				
e	Excess from 2017				

	00-PF (2017)					Page /10
Part					9)	N/A/
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for		-		<u> </u>	
b	Check box to indicate whether the four		e operating founda		ection	(3) or 🔲 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) ² 014	(4, 12.2.
	each year listed					
þ	85% of line 2a		ļ		1	
С	Qualifying distributions from Part XII,					
	line 4 for each year listed			- 1		
đ	Amounts included in line 2c not used directly for active conduct of exempt activities .					
	· • • • • • • • • • • • • • • • • • • •		ļ	/		
е	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					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(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	1				
	Part X, line 6 for each year listed					
С	"Support" alternative test-enter:				1	
	(1) Total support other than gross					
	investment income (interest,				+	
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or rovalties)			`		
	(2) Support from general public and 5 or more exempt					
	organizátions as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization				<u> </u>	
200	(4) Gross investment income	n (Complete t	his part only if t	he foundation	had \$5 000 or m	ore in assets at
rait	any time during the year –	•	•	ne roundation	11aa 45,500 O1 111	ore in assets at
1	Information Regarding Foundation					
-	List any managers of the foundation v		uted more than 29	% of the total con	tributions received	by the foundation
	before the close of any tax year (but o					•
	WILLIAM F. DOOLEY AND WILM	A A. DOOLEY				
b	List any managers of the foundation	who own 10% o	or more of the sto	ck of a corporation	on (or an equally la	arge portion of the
	ownership of a partnership or other er	ntity) of which the	foundation has a	10% or greater in	terest.	
	N/A					
2	Information Regarding Contribution	, Grant, Gift, Lo	an, Scholarship, e	etc., Programs:		
	Check here ▶ ☐ If the foundation					
	unsolicited requests for funds. If the f		gifts, grants, etc.,	to individuals or	organizations unde	r other conditions
	complete items 2a, b, c, and d. See in					·
а	The name, address, and telephone nu	mber or email ac	ldress of the perso	on to whom applic	ations should be a	ddressed:
-	See Supplementary Informat					
b	The form in which applications should	i be submitted ar	nd information and	materials they sh	oula include:	
	Any submission deadlines:					
С	Any submission deadlines.					
d	Any restrictions or limitations on av	vards, such as t	oy geographical a	reas, charitable	ields, kinds of ins	stitutions, or other
_	factors.	,	, 0 0 1 - 1	,	,	

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Ye

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient					
a Paid during the year							
ART INSTITUTE							
111 S Michigan Ave							
Chicago IL 60603		Charity	Donation	100.			
BOY SCOUTS OF AMERICA							
1218 W Adams St				150			
Chicago IL 60607		Charity	Donation	150.			
CYSTIC FIBROSIS FOUNDATION							
150 N Michigan Ave		Ch a si è b s s	Danahian	1 000			
Chicago IL 60601		Charity	Donation	1,000.			
CHICAGO SYMPHONY ORCHESTRA		,					
220 S Michigan Ave		Chanitu	D	7 000			
Chicago IL 60604		Charity	Donation	7,800.			
CHICAGO BOTANIC GARDENS 1000 Lake Cook Rd							
Glencoe IL 60022		Charity	Donation	200.			
CHRIST CHURCH		Chartey	Donacion	200.			
1713 Green Bay Rd		}					
Highland Park IL 60035		Church	Donation	4,300.			
DOCTORS WITHOUT BORDERS		Ciraren	bonderon.	1,000.			
333 7th Avenue							
New York NY 10001		Charity	Donation	9,000.			
BIG BROS/BIG SISTERS				,			
560 W Lake St							
Chicago IL 60661		Charity	Donation	250.			
JOURNETY CARE FOUNDATION	1	1					
405 Lake Zurich Road							
Barrington IL 60010		Charity	Donation	7,100.			
See Statement							
				69,175.			
Total		<i>.</i>	▶ 3a	99,075.			
b Approved for future payment							
			1				
			200000000				
Total			> 3b				

irei 6	ross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
4 5		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 P	rogram service revenue:			,		
b				ļ <u></u>		
c						
d						[<u>-</u>
e		<u> </u>				
f						
g	Fees and contracts from government agencies				· · ·	
_	lembership dues and assessments					
	terest on savings and temporary cash investments					
	ividends and interest from securities			14	12,577.	
	et rental income or (loss) from real estate:	.5		1.	12/5//	
	Debt-financed property		·	Î i		
	Not debt-financed property					
	et rental income or (loss) from personal property					
	ther investment income					
	ain or (loss) from sales of assets other than inventory					
	et income or (loss) from special events					
	ross profit or (loss) from sales of inventory				······································	
	ther revenue: a					
b						
С						
d						
е						
	ubtotal. Add columns (b), (d), and (e)	·			12,577.	
	, , , , , , , , , , , , , , , , , , , ,	<u>*</u>				10.000
13 T	otal. Add line 12, columns (b), (d), and (e)				13	12,577.
	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation				13	12,577.
ee w	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		
ee w	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		
ee w Part Line l	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		
ee w Part Line l	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		
ee w Part Line l	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		
ee w Part Line l	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		
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ee w art .ine l	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		
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ee w art .ine l	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		
ee w Part Line l	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		
ee w Part Line l	orksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ıs.) Accomplishm	ent of Exemp	t Purposes		

Phone no (847)828-0421 Form **990-PF** (2017)

Part	XVII	Informatio	n Regarding Tra	ansfers to	and Tran	saction	s and D	elationshi	os With N	Jonchai	itable	FYA	mni
	*741	Organizati			and Hai	.545401	.o unu n			Jonar	· (abic	LAG	pt
	in se	he organization	directly or indirectl other than section								ì	Yes	No
а	Trans	sfers from the re	porting foundation	to a noncha	arıtable ex	empt org	anızation	of:					
											1a(1)		×
		ther assets .								• •	1a(2)		X
b		r transactions.											
			a noncharitable e	_							1b(1)		<u> </u>
			ets from a nonchar							• •	1b(2)		X
			s, equipment, or ot arrangements								1b(3)		×
			arantees								1b(4) 1b(5)		÷
			ervices or member								1b(6)		×
С			equipment, mailing								1c		<u> </u>
			of the above is "Y									air m	
			other assets, or ser										
	value	in any transact	ion or sharing arrai	ngement, sh	ow in colu	mn (d) th	ne value c	of the goods,	other ass	ets, or se	rvices	receiv	/ed.
(a) Line	no	(b) Amount involved	(c) Name of no	ncharitable exe	mpt organiza	tion	(d) Desc	ription of transfe	rs, transactio	ns, and sha	ring arra	ngeme	nts
			ļ										
			<u> </u>	 -									
													
			 										
	\dashv												
			 -	····-									
	+											-	
	-												
													
		····											
2a	desc	ribed in section	rectly or indirectly 501(c) (other than	section 501					_] Yes	X 1	۷o
b	If "Ye		e following schedu			 :			 				
		(a) Name of orga	inization		(b) Type of or	ganization			(c) Description	on of relatio	nship	 	
													
						· · · ·							
	-									·			
													
	Und	er penalties of periury.	I declare that I have exam	nined this return.	including acco	ompanvino s	chedules and	statements, and	to the best of	my knowled	dge and b	pelief, it	is true
Sign		ect, and complete Dec	claration of preparer (other	than taxpayer) i	s based on all	information	of which prej	parer has any kno	wledge	May the I			
Here		Solly	166	20001	1.41.1	Y PR	ESIDEN	т		with the p	reparer s	hown be	9low?
		nature of officer or tri	ustee	2xx	Date	Title	LULULIN	<u></u>		See instru	ctions	Yes []No
Doid		Print/Type prepare	er's name	Preparèr'	s signature	11 ×	0	Date	Char	k 🛛 ıf F	PTIN		
Paid Prep	arer	Ronald M	Pfeif <u>f</u> er	Rona	of the file	Ket et	erffl	107/05/2	018 self-	employed	20028	3790)
Use (efeiffer,			//		Firm's EIN				
C C	~ : ::y										20.0	4 0 3	

IL 60004-3246

2006 N Burke Dr Arlington Heights

Firm's address ▶

BAA

Continuation Statement WILLIAM AND WILMA DOOLEY FOUNDATION Form 990-PF: Return of Private Foundation Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

6	()	, ,	
Name and Address Information	Form Information	Submission Information	Restrictions
WILMA A. DOOLEY 235 SHERIDAN RD GLENCOE, IL 60022	FINANCIAL STATEMENTSIRS EXEMPTION LETTERINFORMATION DESCRIBING	BEFORE SEPTEMBER 30	NONE
847-835-1136			
WILMA A DOOLEY, PRESIDENT 235 SHERIDAN ROAD Glencoe, IL 60022	ORGANIZATION AND ACTIVITIES IN NEED OF ASSISTANCE	REQUESTS SUBMITTED PRIOR TO SEPTEMBER 30	
847-835-1136			

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

	If recipient is an			
Recipient name and address (home or business)	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	· ·			
EARTH UNIVERSITY Foundation		Education	Donation	500.
3525 Piedmont Rd NE	1			
Atlanta, GA 30305				
FRIENDS OF GLENCOE PUBLIC LIBRARY		Public	Donation	100.
320 Park Ave		Library		
Glencoe, IL 60022				
GLENCOE PATRIOT DAYS		Local Governmen	Donation	25.
675 Village Court		t		
Glencoe, IL 60022				
HOMES FOR OUR TROOPS		Charity	Donation	2,000.
6 Main Street			1	
Taunton, MA 02780				
LOYOLA ACADEMY		Education	Donation	15,000.
1100 Laramie Ave				
Wilmette, IL 60091	<u> </u>			5 000
MARQUETTE UNIVERSITY		Education	Donation	5,000.
1250 Wisconsın Ave				
Milwaukee, WI 53233			1	
MEALS ON WHEELS		Charity	Donation	100.
1550 Crystal Dr				
Arlington, VA 22202				
MISERICORDIA HOME		Charity	Donation	5,000.
6300 N Ridge Ave				
Chicago, IL 60660				
MERIT SCHOOL OF MUSIC		Charity	Donation	500.
38 S Peoria St				
Chicago, IL 60607				
FIELD MUSEUM		Public Museum	Donation	100.
1400 S Lake Shore Dr		Museum		
Chicago, IL 60605		<u> </u>	<u> </u>	
MUSEUM of SCIENCE & INDUSTRY		Public Museum	Donation	100.
5700 S Lake Shore Dr		Haseam		
Chicago, IL 60637			<u> </u>	1 000
NIGHT MINISTRY		Charity	Donation	1,000.
4711 N Ravenswood Ave				
Chicago, IL 60640			 - - - - - -	2 000
SALVATION ARMY		Charity	Donation	2,000.
506 N Des Plaines St				
Chicago, IL 60601	ļ	D 1 1 '	 	1.50
SHEDD ACQUARIUM		Public MUSEUN	Donation	150.
1200 S Lake Shore Dr		1700000		
Chicago, IL 60605				10 000
SMILE TRAIN		Charity	Donation	10,000.
41 Madison Ave			1	
New York, NY 10010		[Ch	I Donation	1 000
ST MARGARET-MARY CHURCH		Church	Donation	1,000.
2324 W Chase Ave				
Chicago, IL 60645		J	<u> </u>	

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

	If recipient is an			
Recipient name and address (home or business)	individual, show any	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
LES TURNER ALS		Charity	Donation	7,100.
5550 W Touhy Ave				
Skokie, IL 60077			1	
TOYS FOR TOTS		Charity	Donation	250.
8900 Odell Ave				
Bridgeview, IL 60060				
WETLANDS INITIATIVE		Charity	Donation	10,000.
53 W Jackson Blvd				
Chicago, IL 60604				
WORLD WILDLIFE FUND		Charity	Donation	2,000.
1250 24th Street NW				
Washington, DC 20037				
WRITERS THEATRE		Charity	Donation	1,000
321 Park Ave				
Glencoe, IL 60022				
WTTW - CHANNEL 11 PBC		Public	Donation	100.
5400 N St Louis Ave		Broadcast ing	1	
Chicago, IL 60625		<u> </u>		
USO		Charity	Donation	500.
333 S WABASH AVE	ļ	1	1	
Chicago, IL 60604		G1 11		200
WORLD VISION FOUNDATION		Charity	Donation	200.
PO BOX 9716 FEDERAL WAY, WA 98063				
WOUNDED HEROES FOUNDATION		Charity	Donation	2,500
161 N Clark St		Chartcy	Donacion	2,300
Chicago, IL 60601				
HONOR FLIGHT CHICAGO		Charity	Donation	250
938 Montana St		Chartey		200
Chicago, IL 60614			1	
CAPITAL CITY JUDO		Charity	Donation	200
2300 Sutterville Rd		Jonatha		
Sacramento, CA 95822				
THE IRELAND FUNDS of AMERICA		Charity	Donation	500
10 Post Office Square		1		
Boston, MA 02109				
GILDA'S CLUB CHICAGO		Charity	Donation	1,500
537 Wells St				, = = =
Chicago, IL 60654				
AMERICA'S VETDOGS		Charity	Donation	500
371 East Jericho Turnpıke				
Smithtown, NY 11787				
	1	1	<u>1</u>	

Legal and Professional Fees

2017

Name
WILLIAM AND WILMA DOOLEY FOUNDATION

Employer Identification No 36-3990693

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total to Form 990-	PF, Part I, Line 16a				

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Ronald M Pfei CIBC Bank USA		1,070.	0.	0.	1,070.
Total to Form 990-	PF, Part I, Line 16b	1,220.	150.	150.	1,070.

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CIBC Bank USA	Investment Adv	3,643.	3,643.	3,643.	0.
Total to Form 990-	PF, Part I, Line 16c	3,643.	3,643.	3,643.	0.

Name ∛ILLIAM AND WILMA DOOLE	Y FOUNDATION			ployer Identification No
Line 10a - Investments - US and State Government Obligations:	End of State and Local Obligations Book Value	f Year State and Local Obligations FMV	En US Governme Obligations Book Value	Obligations
Tot to Fm 990-PF, Pt II, Ln 10a				
Line 10b - Investm	ents - Corporate	Stock:	En Book Value	d of Year Fair Market Value
CIBC BANK USA			356,413	3. 929,082.
Totals to Form 990-PF, Part II, I	Line 10b		356,413	3. 929,082.
Line 10c - Investme	ents - Corporate E	Bonds:	En Book Value	d of Year Fair Market Value
CIBC BANK USA			25,500	26,320.
Totals to Form 990-PF, Part II, I	Line 10c		25,500	26,320.
Line 12 - Investme	ents - Mortgage lo	oans:	En Book Value	d of Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 12			
Line 13 - Inve	estments - Other:		En Book Value	d of Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 13			

Form 990-PF Other Ass Part II

Other Assets and Liabilities

Name	Employer Identification No
WILLIAM AND WILMA DOOLEY FOUNDATION	36-3990693

	Beginning	End of		
Line 15 - Other Assets:	Year Book Value	Book Value	Fair Market Value	
Prepaid Taxes	500.	0.	0.	
Totals to Form 990-PF, Part II, line 15	500.	0.	0.	

Line 22 - Other Liabilities:	Beginning Year Book Value	Ending Year Book Value
Excise Tax Due	0.	59.
Totals to Form 990-PF, Part II, line 22		59.