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SCANNED SEP 1 0 2015

Form **990-PF** Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 16, 2015 Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

24 Total operating and administrative expenses. Add lines 13 through 23 19,100. 9,542. 9,558. 25 Contributions, gifts, grants paid 1,307,608. 1,307,608.	For	aler	dar year 2014 or tax year beginning		, and ending		
Recommended traver for PC Dear number finant an exclusive size of provinces, country, and ZIP or foreign postal code CHICAGO, IL 60697 G Check all that apply:					A Employer identification	n number	
BANK OF AMERICA, N.A., 231 S LASALLE ST City or town, state or province, country, and ZiP or foreign postal code CHICAGO, ILL 60697 6 Check all that apply: Initial return Address change H Check type of organization: XL Section 501(c)(3) exempt private foundation I Fair market value of all assets at end of year informer public chanty Section 4947(a)(1) nonexempt charable trust Other Section 4947(a)(1)(4), clock here Other Section 4947(a)(4), clock here Other Section 4947(a)(4)(4), clock here Other Section 4947(a)(4)(4)(4), clock here Other Section 4947(a)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)(4)						27-189517	5
Contributions, grifts, grants, etc., received Contributions Contributions, grifts, grants, etc., received Contribution			•	•	1	1 '	
CHICAGO, TL 60697 6 Check all that apply: Initial return Amended	_B	<u>AN</u>	K OF AMERICA, N.A., 231	S LASALLE S'	т 1332	(312)828-	2055
6 Check all that apply:	-			ostal code		C If exemption application is	pending, check here
Final return Anderes change Name change Name change Section 4947(a)(1) nonexempt charable trust Section 501(c)(3) exempt private foundation Et if private foundation status was terminated under section 507(b)(1)(6), check here If arm ranket value of all assests and of year A counting method:				Initial return of a fo	rmer public charity	D 1 Foreign organization	ns check here
Address change Check type of organization: Address change Name change Check type of organization: Address change Check type Chec	u	HOUN		_	armor public charity	1.1 or organization	io, encor nore
Control transcriptions Control transcripti			=	=		Foreign organizations mechanisms and attach of the control of	neeting the 85% test,
Section 4947(a)(1) nonexempt charitable trust	H C	heck			 .	1	
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 under section 507(b)(1)(8), check here Marylasis of Revenue and Expenses Raylasis		_			ition		
Cheek Chee	I Fa	_				1	
S 1.25 2.06 (Part I, contum (d) must be on cash bass)			Part II, col (c), line 16)	her (specify)		1	
The total of amounts in columns (b), (c), and (s) may not necessary equal than amounts in columns (b), (c), and (s) may not necessary equal than amounts in columns (b), (c), and (s) may not necessary equal than amounts in columns (b). (c) and (s) may not necessary equal than amounts in columns (b). (c) and (s) may not necessary equal than amounts in columns (b). (c) and (s) may not necessary equal than amounts in columns (b). (c) and (s) may not necessary equal than amounts in columns (c). (c) and (s) may not necessary equal than amounts in columns (c). (c) and (s) may not necessary equal than amounts or columns (c). (c) and (s) may not necessary equal than amounts or columns (c). (c) and (s) may not necessary equal than amounts or columns (c). (c) and (s) may not necessary equal than amounts or columns (c). (c) and (s) may not necessary equal than amounts or columns (c). (c) and (s) may not necessary equal than amounts or columns (c). (c) and (s) may not necessary equal than amounts or columns (c). (c) and (s) and			8,125,206. (Part I, colu	mn (d) must be on cash t	pasis)	1	
1 Contributions, gifts, grants, etc., received 2 Cheek	Pa	rt I	(The total of amounts in columns (b), (c), and (d) may not				for charitable purposes
Chook	_	1		·		N/A	(Cash basis only)
Interest on asympa and temporary		_	. —	5,112,555			
## A Dividends and interest from securities ## Sa Gross rents Dividends and interest from securities			Interest on savings and temporary	1.	1.		STATEMENT 2
Sa Gross rents Direct Note Statement		Ĭ.		ı — · ı			
Description		_					
STATEMENT 1				,			•
8 Net short-term capital gail RECIVED 9 Income modifications 10a Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through(1):	evenue	6a	Net gain or (loss) from sale of assets not on line 10	-480,067.			STATEMENT 1
8 Net short-term capital gail RECIVED 9 Income modifications 10a Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through(1):		b					1 ,
8 Net short-term capital gail RECIVED 9 Income modifications 10a Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through(1):		7	Capital gain net income (from Part IV, line 2)		2,243,282.		
10a Gross sales less returns	Œ	8	Net short-term capital gain				
b Less Cost of goods and allowances b Less Cost of goods and c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through [1]		9					
c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through(1) 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 25 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid		10a	and allowances				
Total. Add lines 1 through (1) — —————————————————————————————————							<u> </u>
12 Total. Add lines 1 through (1)			1 7 1	100			
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 4 9 585 4 792 4 7793 4 7750 5 5 7500 5				4 700 626	2 200 450		
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 4 9,585. 4,792. 4,793. b Accounting fees STMT 5 9,500. 4,750. 4,750. c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 4 9,585. 4,792. 4,750. 9,585. 4,792. 4,793. 4,793. 4,750. 1 Total operation and depletion 2 Depreciation and depletion 3 Depreciation and depletion 4 Depreciation and depletion 3 Depreciation and depletion 4 Depreciation and depletion 4 Depreciation and depletion 4 Depreciation and depletion 5 Depreciation and depletion 6 Depreciation and depletion 7 Depreciation and depletion 8 Depreciation and depletion 9 Depreciation	_					<u> </u>	
15 Pension plans, employee benefits 16a Legal fees STMT 4 9,585 4,792 4,793 4,750 5 6a Legal fees STMT 5 9,500 4,750 4,750 5 6a Legal fees STMT 5 9,500 4,750 6a 1,750 6a				U•			•
16a Legal fees STMT 4 9,585 4,792 4,750							+
c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 2 Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 1 7 307,608.	Se			9 585	4 792.		4 793
c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 2 Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 1 7 307,608.	Su.S						, , ,
17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Expenses STMT 6 27 Total operating and administrative expenses. Add lines 13 through 23 26 Contributions, gifts, grants paid 27 Interest 28 Taxes 29 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total operating and administrative expenses. Add lines 13 through 23 26 Total operating and administrative expenses. Add lines 13 through 23 27 Total operating and administrative expenses. Add lines 13 through 23 28 Total operating and administrative expenses. Add lines 13 through 23 29 Total operating and administrative expenses. Add lines 13 through 23 29 Total operating and administrative expenses. Add lines 13 through 23 20 Total operating and administrative expenses. Add lines 13 through 23 29 Total operating and administrative expenses. Add lines 13 through 23 20 Total operating and administrative expenses. Add lines 13 through 23 20 Total operating and administrative expenses. Add lines 13 through 23 21 Total operating and administrative expenses. Add lines 13 through 23 21 Total operating and administrative expenses. Add lines 13 through 23 21 Total operating and administrative expenses. Add lines 13 through 23 25 Total operating and administrative expenses.	ă.			- 3,3001	-7.000		1 2,7300
25 Contributions, girls, grants paid 1,507,608.	9			_			
25 Contributions, girls, grants pard	ati				······································	<u> </u>	1 .
25 Contributions, girls, grants pard	iistr	i					<u> </u>
25 Contributions, girls, grants pard	Ë		•				
25 Contributions, girls, grants pard	Ad	21					
25 Contributions, girls, grants pard	and	22					
25 Contributions, girls, grants pard	ng,	23	Other expenses STMT 6	15.	0.		15.
25 Contributions, girls, grants pard	rati	24	Total operating and administrative				
25 Contributions, girls, grants pard	ğ		· · · · · · · · · · · · · · · · · · ·		9,542.		
	J	l l		1,307,608.		ļ	1,307,608.
		26	Total expenses and disbursements.	1 206 700	0 540		1 215 466
				1,326,708.	9,542.		1,317,166.
27 Subtract line 26 from line 12:				2 201 020			
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 2,279,908.				3,301,948.	2 270 000		+
			•		4,413,300		+
	4235			<u>I</u> instructions		1 N/A	Form 990-PF (2014)

Б	Part II Balance Sheets Attached schedules and amounts in the description column should be for and always amounts only		Beginning of year		of year		
<u> </u>	ai t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	3,529.	1,014,871.	1,014,871.		
	2	Savings and temporary cash investments			<u></u>		
	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		<u></u>			
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts					
)ts	8	Inventories for sale or use					
Assets		Prepaid expenses and deferred charges					
٩		Investments - U.S. and state government obligations	E 004 E40	T 650 206			
		Investments - corporate stock STMT 7	5,281,740.	7,652,326.	7,110,335.		
	C	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis			- -		
		Less accumulated depreciation					
		Investments - mortgage loans					
	13	Investments - other					
	14	Land, buildings, and equipment basis					
		Less accumulated depreciation			-		
		Other assets (describe)					
	16	Total assets (to be completed by all filers - see the	5,285,269.	9 667 107	9 125 206		
_	17	Instructions. Also, see page 1, item I)	3,203,203.	8,667,197.	8,125,206.		
	18	Accounts payable and accrued expenses Grants payable			1		
	19	Deferred revenue			1		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			•		
ipi	21	Mortgages and other notes payable					
Ξ.		Other liabilities (describe)					
					1		
	23	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here			İ		
		and complete lines 24 through 26 and lines 30 and 31.					
lances	24	Unrestricted					
lan	25	Temporarily restricted]		
Fund Ba	26	Permanently restricted	··]		
Ĕ		Foundations that do not follow SFAS 117, check here					
Ē		and complete lines 27 through 31.	_	_			
Net Assets or	27	Capital stock, trust principal, or current funds	0.	0.]		
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	5,307,569.	7,726,755.	1		
Ţ	29	Retained earnings, accumulated income, endowment, or other funds	-22,300.	940,442.	4		
ž	30	Total net assets or fund balances	5,285,269.	8,667,197.	1		
		-	5,285,269.	0 667 107			
_	31	Total liabilities and net assets/fund balances		8,667,197.	<u></u>		
P	art	Analysis of Changes in Net Assets or Fund B	alances				
_	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30	T	1		
		st agree with end-of-year figure reported on prior year's return)		1	5,285,269.		
	•	r amount from Part I, line 27a		2	3,381,928.		
		er increases not included in line 2 (itemize)		3	0.		
4	Add	lines 1, 2, and 3		4	8,667,197.		
		reases not included in line 2 (itemize)		5	0.		
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	8,667,197.		
		·			Form 990-PF (2014)		

Part IV Capital Gains	and Loss	ses for Tax on Ir	nvestment	Income						
(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.)			(p)	How ac - Purcl	quired hase	(c) Date a (mo., d	acquired av. vr.)	(d) Date sold (mo., day, yr.)		
18 35,000 SHS MORNINGSTAR INC.			10	- Dona		VARI		VARIOUS		
b 55,000 Sh5 MOR	NTNGSI	AR INC.			-			VARI	005	VARIOUS
C					\vdash	_	<u> </u>			
đ				-						
e										
(e) Gross sales price		preciation allowed or allowable)		t or other basis xpense of sale					ain or (loss (f) minus	(g)
a 2,243,282.										2,243,282.
<u>b</u>					_					
d					\dashv					
e					\dashv					
Complete only for assets showing	ig gain in col	umn (h) and owned by	the foundation	on 12/31/69		_	(1) Gains (C	ol. (h) gair	ı minus
#3.5.14.V. an at 40/04/00		Adjusted basis		cess of col. (I)			col	. (k), but r	iot less tha (from col.	n -0-) or
(i) F.M.V. as of 12/31/69	as	s of 12/31/69	over	col. (j), if any				L03363	(IIOIII COL	. ,,
a				<u>.</u>						2,243,282.
<u>b</u>					-					
d			ļ		\dashv					
e										
		∫ If gain, also ente	r in Dart I line	7	7					
2 Capital gain net income or (net ca	pital loss)	If (loss), enter -0	i in Fait i, iiie I- in Part I, line	, 7	<u>}</u>	2				2,243,282.
3 Net short-term capital gain or (los	ss) as defined	•								
If gain, also enter in Part I, line 8,	,		(-/-		Ŋ					
If (loss), enter -0- in Part I, line 8 Part V Qualification U	malan Ca	otion 4040(a) for	Dadwaad	Tay on Nat		3	2001 100		N/A	<u> </u>
							IEHL IIIC	Oille		
(For optional use by domestic private	toundations	s subject to the section	4940(a) tax on	net investment ir	ICOM	: .)				
If section 4940(d)(2) applies, leave the	nis part blank	ζ.								
Was the foundation liable for the sec	tion 4942 tax	on the distributable an	nount of any ye	ar in the base pe	rıod?					Yes X No
If "Yes," the foundation does not qua										
1 Enter the appropriate amount in	each column	for each year, see the I	nstructions bet	ore making any e					····	(4)
(a) Base period years		(b) Adjusted qualifying dis	etributions	Net value of no	(C)) ritable-	uce accete		Distri	(d) bution ratio
Calendar year (or tax year beginni	ng in)		37,511.	NEL VAIDE OF THE	липа		3,357		(col. (b) al	vided by col. (c)) 1.384315
2013			0.	•			9,496			.000000
2012		1.04	6,919.				$\frac{3,430}{2,172}$			2.422459
2010			5,000.	-			1,127			.067051
2009		-								_
										
2 Total of line 1, column (d)								2		3.873825
3 Average distribution ratio for the	-		on line 2 by 5,	or by the number	r of ye	ars				060454
the foundation has been in existe	nce if less th	an 5 years						3		.968456
4 Enter the net value of noncharitat	ala-uca accat	e for 2014 from Part Y	line 5					4		4,998,520.
4 Enter the net value of noncharitat	JIE-USE 455EL	.5 101 20 14 110111 Fait A,	IIII6 J					-		4,550,520
5 Multiply line 4 by line 3								5		4,840,847.
6 Enter 1% of net investment incor	ne (1% of Pa	ırt I, line 27b)						6		22,799.
7 Add lines 5 and 6								7		4,863,646.
8 Enter qualifying distributions from	n Part XII, lın	ne 4 .						8	L	1,317,166.
If line 8 is equal to or greater than	n line 7, chec	k the box in Part VI, line	e 1b, and comp	lete that part usir	ng a 1	% tax ı	rate.			
See the Part VI instructions.										·

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a),	4940(b), 4940(e), or	4948	- see ins	stru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 📖 and enter "N/	/A" on line 1.		l			
	Date of ruling or determination letter: (attach copy of letter if necessary	y-see instructions)					
. b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1		4	5,5	<u>98.</u>
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Par	1 l, line 12, col. (b). 丿					
-2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others en	nter -0-)	2				<u>0.</u>
3	Add lines 1 and 2		3		4	5,5	<u>98.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others e	nter -0-)	4				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		4	5,5	<u>98.</u>
6	Credits/Payments:						
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a	71	<u>.</u>				
b	Exempt foreign organizations - tax withheld at source 6b		_				
C	Tax paid with application for extension of time to file (Form 8868)	60,000	•				
đ	Backup withholding erroneously withheld 6d						tetr-sananer
	Total credits and payments. Add lines 6a through 6d		7		6	0,0	<u>71.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10	<u> </u>	1	4,4	
		L4,473. Refunded▶	11				0.
	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation of	or did it participate or interver	ie in	L	_	Yes	$\overline{}$
	any political campaign?			L	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				1b		X
	If the answer is "Yes" to $_{1a}$ or $_{1b}$, attach a detailed description of the activities and copies	ies of any materials publis	hed or				
	distributed by the foundation in connection with the activities				- 1		_= -
	Did the foundation file Form 1120-POL for this year?			L	1c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•			l		
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$		<u>•</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure ta	x imposed on foundation			١		
	managers. ▶ \$0.			ļ			
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			\vdash	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 instrum	nent, articles of incorporation,	or	-	-		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			-	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		NT.	⊢	4a		
	If "Yes," has it filed a tax return on Form 990-T for this year?		14		4b 5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			· -	3		
	If "Yes," attach the statement required by General Instruction T. Are the requirements of cost on 500(s) (relating to cost one 4041 through 4045) estated either.						
0	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or				- 1		
	 By state legislation that effectively amends the governing instrument so that no mandatory direct 	tions that conflict with the sta	to law		- 1		
	remain in the governing instrument?	nons that connict with the se	IC IAW		6	Х	-
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)	۸/	· -	7	X	
•	bit the foundation have at least 40,000 in assets at any time during the year. If these, complete	r art ii, cor (c), and r art i	•	·	ᅥ		<u> </u>
Яa	Enter the states to which the foundation reports or with which it is registered (see instructions)	•					
Ja	IL						
h	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	, actional (or addignate)			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4	942(i)(3) or 4942(i)(5) for ca	lendar				
٠	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," comple		uı		9		х
10	Did any persons become substantial contributors during the tax year? if the schedule listing			<u> </u>	10		$\overline{\mathbf{x}}$

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Pa	art VII-A Statements Regarding Activities (continued)		-		
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		x
1,2	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	orivileges?			
	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	X	
-	Website address ► N/A				
14		▶ 312-82			
	Located at ► BANK OF AMERICA, N.A., 231 S LASALLE ST NO. 1332,	ZIP + 4 ▶ 60	<u>697</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			. ▶	·
	and enter the amount of tax-exempt interest received or accrued during the year	15		/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,			Yes	
	securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name	e of the			
D	foreign country				<u> </u>
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ		Yes	No
18	a During the year did the foundation (either directly or indirectly):				
		es 🗶 No			,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	es X No			·
		es 🛣 No			
		es 🛣 No			
		es La 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)?	es X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	es (A) NU			
	If the foundation agreed to make a grant to or to employ the official for a period after				,
		es X No			
ŀ	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	23 22 110			
-	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	▶ □			
	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 2014?		- 1c		$\tilde{\mathbf{X}}$
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)):				
ē	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	ıg			
	before 2014?	es 🗶 No			
	If "Yes," list the years				
t	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		_		_
	statement - see instructions.)	N/A	2b		
0	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
38					
		es X No			
t	of "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons af				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to c				
	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		ا ا		
	Form 4720, to determine if the foundation had excess business holdings in 2014)	N/A	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos	e tnat	,		v
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?		_4b		X

Form 990-PF (20		FOUNDATION			<u>27-18951</u>	<u>.75</u>	Pag	ge 6
Part VII-B	Statements Regard	ing Activities for Which	Form 4720 May Be I	Required (contin	ued)			
5a During the	year did the foundation pay or i	incur any amount to:						
(1) Carry o	on propaganda, or otherwise at	tempt to influence legislation (section	n 4945(e))?	Yo	es 🛣 No		. 1	
(2) Influen	ce the outcome of any specific	public election (see section 4955); o	or to carry on, directly or indir	ectly,				
any vo	ter registration drive?				es 🔀 No 📗			
(3) Provide	e a grant to an individual for tra	avel, study, or other similar purposes	s?	Y(es 🛣 No			
(4) Providi	e a grant to an organization oth	ier than a charitable, etc., organizatio	n described in section			1		
- 4945(0	1)(4)(A)? (see instructions)			Ye	es X No			
(5) Provide	e for any purpose other than re	eligious, charitable, scientific, literary,	, or educational purposes, or t					
•	evention of cruelty to children o				es 🗶 No		. 1	
•		of the transactions fail to qualify un		in Regulations	37/3			
	-	arding disaster assistance (see instru	•		N/A	5b		—
		egarding disaster assistance check t						,
	_	oes the foundation claim exemption f			l			
•	e responsibility for the grant?			I/A L Y	es L No			
	· ·	d by Regulations section 53 494						
		e any funds, directly or indirectly, to	pay premiums on		[32]			
•	benefit contract?			Y	es X No			·
		remiums, directly or indirectly, on a p	personal benefit contract?			6b	 -	<u>X</u>
	6b, file Form 8870.							
		oundation a party to a prohibited tax s		Y	es X No			—
		oceeds or have any net income attrib			N/A	7b		
Part VIII	Paid Employees, an			inagers, riigni	y 			
1 List all office	cers, directors, trustees, f	oundation managers and their		T. L. Componentian	l /als			
	(a) Name and ad	idress	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	ad	(e) Expen ccount, of allowance	ther es
JOSEPH I	D. MANSUETO		PRESIDENT					
C/O DEBI	RA L. GRAND, B	ANK OF AMERICA,						
CHICAGO	, IL 60697		PART-TIME	0.	0.	<u>. </u>		0.
RIKA YOS			VICE-PRESIDE	i)T]		
C/O DEBI		BANK OF AMERICA,		_	_	1		_
CHICAGO	, IL 60697		PART-TIME	0.	0.	1_		0.
						ı		
			_					
	·							
	- 4					1		
			ladada Barada Marana		<u> </u>			
2 Compensa	tion of five highest-paid e	mployees (other than those in	(b) Title, and average	, enter "NONE."	(d) Contributions to	1 7	(e) Expen	ise
	me and address of each employ	/ee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	l ai	ccount, of allowance	ther
NO	ONE							
						<u> </u>		
				ļ	ļ	\vdash		
			1		ĺ	1		
					ļ	\vdash		
			1					
				ļ		↓_		
			4		1			
		<u> </u>	<u> </u>	<u> </u>	L			
Total number o	f other employees paid over \$5	50,000			. 🕨			0

Form 990-PF (2014) MANSUETO FOUNDATION	2/-1	832T/2	Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	pensation
NONE	(b) Type of Solvies		
NONE	4		
•			
		İ	
·			
	¬		
<u> </u>			
	7		
Total number of others receiving over \$50,000 for professional services	<u></u>	$\overline{}$	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist	ucal information such as the		
number of organizations and other beneficiaries served, conferences convened, research papers prod	uced, etc.	Expenses	;
1 N/A			
- N/Ω			
			
2			
3			
4			
[=			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount	
1 <u>N/A</u>			
2			
· · ·			
·			
All other program-related investments. See instructions.			
3			

0.

Total. Add lines 1 through 3

P	art X		
_	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
ą	Average monthly fair market value of securities	1a	5,008,215. 66,425.
b	Average of monthly cash balances	1b	66,425.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	5,074,640.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,074,640.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	76,120.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,998,520.
6	Minimum investment return. Enter 5% of line 5	6	249,926.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	249,926.
2a	Tax on investment income for 2014 from Part VI, line 5		
þ	Income tax for 2014. (This does not include the tax from Part VI.)	_	
C	Add lines 2a and 2b	2c	45,598.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	204,328.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	204,328.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	204,328.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,317,166.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,317,166.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,317,166.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies fo	or the section

Form **990-PF** (2014)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part line 7				204,328.
2 Undistributed income, if any, as of the end of 2	014			
a Enter amount for 2013 only			0.	
b Total for prior years:		0.	· · · · · · · · · · · · · · · · · · ·	
3 Excess distributions carryover, if any, to	2014:	0.		
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013 2,3	354.			:
f Total of lines 3a through e	2,354.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ▶\$ 1,317,1	L66.			
a Applied to 2013, but not more than line			0.	
b Applied to undistributed income of prior				
years (Election required - see instruction		0.	,3 ^	
c Treated as distributions out of corpus			*2.00 5	
(Election required - see instructions)	0.		* * * * * * * * * * * * * * * * * * * *	;
d Applied to 2014 distributable amount		4	* *	204,328.
e Remaining amount distributed out of co	rpus 1,112,838.	*** '7 7/3		204,320°
·	1,112,030.	****	\$4 \!\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	0.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same a must be shown in column (a))		·	<u> </u>	
6 Enter the net total of each column as indicated below;	4.7	4 ^	\$	
& Corpus Add lines 3f, 4c, and 4e Subtract line	1,115,192.	, ,		,
b Prior years' undistributed income. Subtr				**************************************
line 4b from line 2b		0.	*,*	,
c Enter the amount of prior years'				
undistributed income for which a notice deficiency has been issued, or on which the section 4942(a) tax has been previous assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		,
e Undistributed income for 2013. Subtract	Hino	0.		
4a from line 2a. Taxable amount - see in			0.	
f Undistributed income for 2014. Subtract			0.	
lines 4d and 5 from line 1. This amount				
be distributed in 2015	must			0.
7 Amounts treated as distributions out of				
	hu			
corpus to satisfy requirements imposed				
section 170(b)(1)(F) or 4942(g)(3) (Elec	0.			
may be required - see instructions)				
8 Excess distributions carryover from 200				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	1,115,192.			
0 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012	NE 4			
	354.			
e Excess from 2014 1,112, 8	338.			
2358 I 1-24-14				Form 990-PF (2014)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information	n (continued)	· -	·	
3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation 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 OF CHICAGO	NONE	PC	GENERAL SUPPORT	
111 SOUTH MICHIGAN AVE				
CHICAGO, IL 60603				100,000.
BETTER GOVERNMENT ASSOCIATION	NONE	PC	GENERAL SUPPORT	
223 W. JACKSON BLVD, SUITE 620				
CHICAGO, IL 60606				200,000.
BLOOMINGDALE TRAIL IN CHICAGO	NONE	₽C	GENERAL SUPPORT	
120 S. LASALLE ST, SUITE 2000				
CHICAGO, IL 60603				100,000.
			1	
CHICAGO INNOVATION FOUNDATION	NONE	PC	GENERAL SUPPORT	
2001 N. HALSTED, SUITE 201				
CHICAGO, IL 60614				10,000.
COMMERCIAL CLUB FOUNDATION	NONE	PC	GENERAL SUPPORT	
21 SOUTH CLARK ST, SUITE 4301				CO 000
Total SEE CO	NTINUATION SHE	፲ ፻ጥ(s)	▶ 3a	1,307,608.
b Approved for future payment		<u> </u>	1	2,001,000.
NO				
NONE				
			-	
		ļ		
Total			<u>▶ 3b</u>	0.

Part XVI-A	Analysis of	Income-Producing	Activities

Enter gross amounts unless otherwise indicated.				ided by section 512, 513, or 514	(e)		
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income		
-	- Code				· · · · · · · · · · · · · · · · · · ·		
å	-						
- b	-		 				
<u> </u>			┢				
d	1		-				
e							
f							
g Fees and contracts from government agencies			ļ				
2 Membership dues and assessments							
3 Interest on savings and temporary cash			۱.,				
investments			14	1.			
4 Dividends and interest from securities			14	46,167.			
5 Net rental income or (loss) from real estate:							
a Debt-financed property							
b Not debt-financed property			Ĭ				
6 Net rental income or (loss) from personal							
property							
7 Other investment income							
8 Gain or (loss) from sales of assets other			t				
than inventory			18	-480,067.			
9 Net income or (loss) from special events			 		·		
10 Gross profit or (loss) from sales of inventory			<u> </u>				
11 Other revenue:			 				
•							
a			1				
b			\vdash		<u> </u>		
·			<u> </u>				
d			 				
e			<u> </u>	422 000			
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.		-433,899.	0.		
13 Total Add line 12, columns (b), (d), and (e)				13_	-433,899.		
(See worksheet in line 13 instructions to verify calculations.)				- /	·		
Part XVI-B Relationship of Activities	to the Acc	omplishment of Ex	kemp	ot Purposes			
Line No. Explain below how each activity for which inco	me is reported	in column (e) of Part XVI-A	contri	buted importantly to the accon	nplishment of		
▼ the foundation's exempt purposes (other than	by providing fi	unds for such purposes).					
N/A							
					<u> </u>		
	_						
		·-					
	_						
							
							
i							

Form 990-PF (2		ETO FOUNI	OATION			27-1	895175	Pa	ge 13
Part XVII			sfers To	and Transactions	and Relations	ships With Non	charitable		
1 Did the or	Exempt Organ		of the follower	ng with any other organizati	on described in sec	tion FO1(c) of		Vac	No
				27, relating to political orga		11011 30 1(C) 01		163	140
	from the reporting found			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		1		
(1) Cash			·				1a(1)		X
- (2) Other	assets						1a(2)		X
b Other tran									
(1) Sales	of assets to a noncharita	ible exempt organiza	ition				1b(1)		X
	hases of assets from a no	•	organization				1b(2)		X
• •	al of facilities, equipment,						1b(3)		X
	bursement arrangements s or loan guarantees	•					1b(4) 1b(5)		$\frac{\mathbf{x}}{\mathbf{x}}$
	rmance of services or me	emhershin or fundra	ısına salıcıtatıc	חתפ			1b(6)		X
	f facilities, equipment, ma	•	•				1c		X
-		-		edule. Column (b) should a	lways show the fair i	market value of the go		ts,	
				ed less than fair market val		_			
column (c	1) the value of the goods,								
(a)Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) Descriptio	n of transfers, transaction	s, and sharing arra	ngeme	nts
			N/A	 					
		-	· ·						
									
						·			
									
						 -			
						-			
		-		·		-			
		 							
					-				
									
2a Is the four	ndation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organ	izations described				
	501(c) of the Code (othe)(3)) or in sect	tion 527?			Yes Yes	X] No
b If "Yes," co	omplete the following sch			Labra d	,				
17 /7	(a) Name of org	ganization		(b) Type of organization	ļ	(c) Description of rela	ationship		
N/A					 	_			
		 -			<u> </u>	 -			
	-	· <u>-</u>			<u> </u>				
				·	<u> </u>				
l and be				ng accompanying schedules and			May the IRS dis	scuss t	his
Sign	eller, it is true, correct, and cor	mplete Declaration of p	eparer (outer tha	n taxpayer) is based on all infon	mation of which prepare	r nas any knowledge	return with the shown below (s	prepar	er e
Here	1 xuenus	nus_		8-51-15	D CHN	m	X Yes		No
Sign	nature of officer or trustee		I Dranararia a	Date	Title	Chook I if I	DTIN		=
	Print/Type preparer's na	ant	Preparer's s	iynatul c	Date	Check if I self- employed	PTIN		
Paid	RYAN THOMA	S	RYAN T	HOMAS	08/24/15	· · · I	P005387	771	
Preparer	Firm's name ▶ DEL			1101110	00/24/13	Firm's EIN ▶ 86			
Use Only			_ 					_	
•	Firm's address ▶ 11	1 SOUTH W	VACKER	DRIVE		 			
	CH	IICAGO, II	60606			Phone no. (31	.2) 486-	-10	00

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2014

Name of the organization

MANSUETO FOUNDATION

Employer identification number

27-1895175

Organiz	ation type (check or	ne)
Filers of	•	Section:
Form 99	0 or 990-EZ	501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	nly a section 501(c)(covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General	nuie	
X	_	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor Complete Parts I and II See instructions for determining a contributor's total contributions
Special	Rules	
	sections 509(a)(1) any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III
	year, contributions is checked, enter h purpose Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.
but it m	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Page 2 Name of organization Employer identification number MANSUETO FOUNDATION 27-1895175

			<u> </u>
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) · No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOSEPH D. MANSUETO; C/O DEBRA L. GRAND, BANK OF AMERICA, N.A 231 S LASALLE ST NO. 1332 CHICAGO, IL 60697	\$5,142,535 .	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
123452 11-05	i-14	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2014)

Employer identification number

MANSUETO FOUNDATION

27-1895175

Part II	Noncash Property (see instructions) Use duplicate copies of P	Part II if additional space is needed	
(a) · No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	77,000 SHS MORNINGSTAR, INC		
		\$\$,093,935.	12/26/14
(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
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
3453 11-05		\$	90, 990-EZ, or 990-PF) (2

Employer identification number

SUET	FOUNDATION Evaluation religious, charitable, etc., contr	ibutions to organizations	described in section	on 501(c)(7), (8), or (10	27-1895175 That total more than \$1,000
	Exclusively religious, charitable, etc., contributor. Complete c	olumns (a) through (e) an	d the following line	entry. For organizations	• \$
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if additional	s, charitable, etc., contributions	of \$1,000 or less for th	ne year (Enter this info once)	Ψ
lo. m			·		
m ti	(b) Purpose of gift	(c) Use of	gift	(d) Descript	tion of how gift is held
_ _					
ł		(e) Trans	fer of gift		
		1715 A	_		
-	Transferee's name, address, an	id ZIP + 4	R	elationship of transf	eror to transferee
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No.					
rti	(b) Purpose of gift	(c) Use of	gift	(a) Descrip	tion of how gift is held
_ _	<u> </u>				
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		(e) Trans	fer of gift		
	Tourstone le como establece en		В	alatiawahin of topos	ares to transfers
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		(e) Irans	fer of gift		
İ	Transferee's name, address, ar	nd ZIP + 4	R	elationship of transf	eror to transferee
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<u> </u>		(e) Trans	fer of gift		
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	Transferee's name, address, ar	nd ZIP + 4	R	elationship of transf	eror to transferee
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MANSUETO FOUNDATION

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 or substantial contributor Foundation Purpose of grant or **Amount** status of contribution Name and address (home or business) recipient FRANCIS W. PARKER SCHOOL NONE GENERAL SUPPORT ÞС 330 W. WEBSTER AVE 200,000. CHICAGO, IL 60614 FRANCISCAN OUTREACH GENERAL SUPPORT NONE ÞС 1645 W. LEMOYNE ST CHICAGO, IL 60622 25,000. GREATER CHICAGO FOOD DEPOSITORY NONE ÞС GENERAL SUPPORT 4100 W ANN LURIE PLACE CHICAGO, IL 60632 72,608. HEARTLAND ALLIANCE HUMAN NEEDS NONE þс GENERAL SUPPORT 208 S. LASALLE ST, SUITE 1818 CHICAGO, IL 60604 50,000. GENERAL SUPPORT JUNIOR ACHIEVEMENT OF CHICAGO NONE ÞС 651 W. WASHINGTON BLVD, SUITE 404 CHICAGO, IL 60661 10,000. LINCOLN PARK ZOOLOGICAL SOCIETY NONE ₽C GENERAL SUPPORT 2001 N. CLARK ST CHICAGO, IL 60614 25,000. NETWORK FOR TEACHING ENTREPRENEURSHIP NONE ÞС GENERAL SUPPORT 770 N. HALSTED ST, SUITE 308 CHICAGO, IL 60642 100,000. NORTHWESTERN MEMORIAL HEALTHCARE NONE GENERAL SUPPORT PC 251 EAST HURON ST, GALTER PAVILION SUITE 3-200 CHICAGO, IL 60611 200,000. ONE CHICAGO FUND NONE ÞС GENERAL SUPPORT 33 SOUTH STATE ST, 4TH FLOOR 100,000. CHICAGO, IL 60603 OUNCE OF PREVENTION FUND NONE ÞС GENERAL SUPPORT 33 WEST MONROE ST, SUITE 2400 20,000. CHICAGO, IL 60603 837,608. Total from continuation sheets

MANSUETO FOUNDATION

Part XV | Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of recipient Purpose of grant or contribution Amount Name and address (home or business) PRO PUBLICA INC. NONE GENERAL SUPPORT ONE EXCHANGE PLAZA, 55 BROADWAY, 23RD FLOOR NEW YORK, NY 10006 25,000. ST JUDE CHILDRENS RESEARCH HOSPITAL NONE GENERAL SUPPORT ÞC 262 DANNY THOMAS PLACE, MSC 512 MEMPHIS , TN 38105 10,000. Total from continuation sheets

Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868 ·

OMB No 1545-1709

-	• • • • • • • • • • • • • • • • • • •					
• If yo	ou are filing for an Automatic 3-Month Extension, comple	te only Pa	irt I and check this box			▶ X
-	ou are filing for an Additional (Not Automatic) 3-Month Ex	-		this form).		
Dà no	t complete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	ly filed For	m 8868	
	onic filing (e-file). You can electronically file Form 8868 if y					r a corporation
	ed to file Form 990-T), or an additional (not automatic) 3-more					
	e to file any of the forms listed in Part I or Part II with the exc					
	nal Benefit Contracts, which must be sent to the IRS in pap	•	•			
	ww irs gov/efile and click on e-file for Charities & Nonprofits		,		J	,
Par			submit original (no copies nee	eded).		
	poration required to file Form 990-T and requesting an autor					
Part I				•		
	er corporations (including 1120-C filers), partnerships, REM	IICs. and t	rusts must use Form 7004 to reques	t an exten	sion of time	,
	income tax returns	, 00, 0				ing number
Туре	Name of exempt organization or other filer, see instru	ctions				on number (EIN) or
print	Traine of exempt organization of earlier mer, see more	01.07.0		шр.о, о.		,
	MANSUETO FOUNDATION				27-18	95175
File by t due date filing you	for Number, street, and room or suite no. If a P.O. box, s				cunty numb	er (SSN)
return S	BANK OF ATERICA, N.A., 251		·			
ınstructı	Oity, town or poor onloo, state, and I'm ood o'r or a re	oreign add	iress, see instructions			
	CHICAGO, IL 60697					
Enter	the Return code for the return that this application is for (file	e a separa	te application for each return)	-		0 4
Applie	eation	Return	Application		····	Return
Is For		Code	Is For			Code
	990 or Form 990-EZ	01	Form 990-T (corporation)	_		07
	990-BL	02	Form 1041-A			08
	4720 (individual)	03	Form 4720 (other than individual)			09
	990-PF	04	Form 5227			10
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	990-T (trust other than above)	06	Form 8870			12
101111	DEBRA L. GRAND		NK OF AMERICA, N.A	23	1 S LA	
• The	e books are in the care of No. 1332 - CHI					
	ephone No ► 312-828-2055		Fax No ▶ 312-453-62	65		
	ne organization does not have an office or place of business	s in the Ur	·			
	nis is for a Group Return, enter the organization's four digit			f this is for	the whole	group, check this
box		-				• • •
	I request an automatic 3-month (6 months for a corporation					
•			tion return for the organization name		The extens	ion
	is for the organization's return for ► X calendar year 2014 or					
			al analysis			
	tax year beginning	, an	d ending		_	
	If the tay year entered in line 4 is faultier 40 and the	book	on Institut entire	Final retur	2	
2	If the tax year entered in line 1 is for less than 12 months, o Change in accounting period	neck reas	on L Initial return L	rınaı retun		
3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069	enter the tentative tax, less any			
	nonrefundable credits. See instructions	, 2. 10001		3a	\$	60,071.
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069), enter an	v refundable credits and	<u> </u>		
_	estimated tax payments made Include any prior year over			3b	\$	71.
С	Balance due. Subtract line 3b from line 3a. Include your pa					
	by using EFTPS (Electronic Federal Tax Payment System)	•		3с	\$	60,000.
Caurti	on. If you are going to make an electronic funds withdrawal			3453-EO ar	nd Form 88	79-EO for payment

instructions

Form 8	8868 (Rev 1-2014)					Page 2
	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, o	complete only Part II and check this	box		▶ X
	Only complete Part II if you have already been granted an a		_		8868	
• If yo	u are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I (on page 1)			
Part	II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	pies ne	eded).
			Enter filer's	identifyir	g numbe	r, see instructions
Туре	Name of exempt organization or other filer, see instru	ctions		Employe	dentifica	ation number (EIN) or
print						
File by th					27-1	.895175
due date filing you	Number, street, and room or suite no if a P O box, si			Social se	cunty nur	nber (SSN)
return S	BANK OF AMERICA, N.A., 231 S					
instruction	City, town or post office, state, and ZIP code For a it	oreign add	ress, see instructions			
	CHICAGO, IL 60697					
						\Box
Enter t	he Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
		D-4	A 1: A:		-	Return
Applic	ation	Return	Application			
Is For	2000 or Form 2000 F7	Code 01	ls For			Code
Form 9	990 or Form 990-EZ	02	Form 1041-A			08
	1720 (individual)	03	Form 4720 (other than individual)			09
	990-PF	04	Form 5227			10
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	990-T (trust other than above)	06	Form 8870			12
	Do not complete Part II if you were not already granted			iously file	d Form 8	
			NK OF AMERICA, N.A			
• The	books are in the care of No. 1332 - CHIC	CAGO,	IL 60697			
	ephone No ▶ 312-828-2055		Fax No ► 312-453-62	65		
	ie organization does not have an office or place of business	s in the Ur	nited States, check this box			▶ □
• If th	is is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) l	f this is fo	r the who	le group, check this
box 🕨			ch a list with the names and EINs of	all memb	ers the ex	tension is for
		NOVEM	BER 15, 2015			
5	For calendar year 2014 , or other tax year beginning $_$, and ending	<u>g</u>		
6	f the tax year entered in line 5 is for less than 12 months, c	heck reas	on LInitial return L	Final r	etum	
	Change in accounting period					
7	State in detail why you need the extension	TIME (TO CAMUED MUE MECE	CCADV	TNEC	DWARTON
	TAXPAYER REQUESTS ADDITIONAL TO FILE A COMPLETE AND ACCURATE			SSARI	INFC	RMATION
	TO FILE A COMPLETE AND ACCORA.	IP VP	I UKN .			
				-	-	
8a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720.	or 6069	enter the tentative tax less any			
	nonrefundable credits See instructions	, 0. 0000,		8a	s	45,694.
	If this application is for Forms 990-PF, 990-T, 4720, or 6069	enter an	y refundable credits and estimated			
	tax payments made Include any prior year overpayment al				1	
	previously with Form 8868		•	8b	\$	60,071.
C	Balance due. Subtract line 8b from line 8a Include your pa	ayment wr	th this form, if required, by using			
	EFTPS (Electronic Federal Tax Payment System) See instr			8c	\$	0.
			st be completed for Part II o			
Under	penalties of perjury, I declare that I have examined this form, include	ling accomp	panying schedules and statements, and to	the best o	f my know	ledge and belief,
it is tru	e, correct, and complete, and that am authorized to prepare this fo					
Signati	Title >	CPA		Date	. ► 8 / °	13/15

Form 8868 (Rev 1-2014)

FORM 990-PF	GAIN OR	(LOSS)	FROM	SALE	OF	ASSE	rs		STA	TEMENT	1
. (A) DESCRIPTION OF PROPE	RTY				1	MANNI ACQUII		DA' ACQU		DATE S	OLD
35,000 SHS MORNINGST	AR INC.							VARI	ous	VARIO	บร
(B) GROSS	COS:	C) r OR	EXF	(D) ENSE	OF		(E)			(F)	
SALES PRICE	OTHER	BASIS		SALE		DI	EPRE	C.	GAIN	OR LOS	
2,243,28	32. 2,	723,349	•		0	•		0.		-480,0	67.
CAPITAL GAINS DIVIDE	NDS FROM I	PART IV									0.
TOTAL TO FORM 990-PE	, PART I,	LINE 6	A					-	_	-480,0	67.
								=			
FORM 990-PF INTERES	T ON SAVII	IGS AND	ТЕМРО	RARY	CAS	SH IN	VEST!	MENTS	STA	TEMENT	2
SOURCE			(A) REVENU ER BOO		NI	ET IN	(B) VESTI			(C) ADJUSTED ET INCOM	
INTEREST ON TEMP IN	VESTMENTS			1.				1.			
TOTAL TO PART I, LIN	IE 3			1.				1.	====		
											<u> </u>
FORM 990-PF	DIVIDEND	S AND I	NTERES	T FR	OM :	SECUR:	ITIE	S	STA	TEMENT	
SOURCE	GROSS AMOUNT	GA	ITAL INS DENDS		(A EVEI R B		NET MEN	(B) INVE T INC		(C) ADJUST NET INC	
MORNINGSTAR INC.	46,167	•	0 .	,	46	,167.		46,1	67.		
TO PART I, LINE 4	46,167	•	0.	,	46	,167.		46,1	67.		

FORM 990-PF	LEGAL	FEES		STATEMENT 4
DESGRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
HARRISON & HELD	9,585.	4,792.		4,793.
TO FM 990-PF, PG 1, LN 16A	9,585.	4,792.		4,793.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
DELOITTE TAX LLP	9,500.	4,750.		4,750.
		· —————		
TO FORM 990-PF, PG 1, LN 16B	9,500.	4,750.		4,750.
TO FORM 990-PF, PG 1, LN 16B FORM 990-PF	9,500. OTHER E			4,750. STATEMENT 6
= 			(C) ADJUSTED NET INCOM	STATEMENT 6 (D) CHARITABLE
FORM 990-PF	OTHER E (A) EXPENSES	(B) NET INVEST- MENT INCOME	ADJUSTED	STATEMENT 6 (D) CHARITABLE
FORM 990-PF DESCRIPTION	OTHER E (A) EXPENSES PER BOOKS	XPENSES (B) NET INVEST- MENT INCOME 0.	ADJUSTED	STATEMENT 6 (D) CHARITABLE E PURPOSES
FORM 990-PF DESCRIPTION IL ANNUAL REPORT FILING FEE	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME 0.	ADJUSTED	STATEMENT 6 (D) CHARITABLE PURPOSES 15.
FORM 990-PF DESCRIPTION IL ANNUAL REPORT FILING FEE TO FORM 990-PF, PG 1, LN 23	OTHER E (A) EXPENSES PER BOOKS 15.	(B) NET INVEST- MENT INCOME 0. 0.	ADJUSTED	STATEMENT 6 (D) CHARITABLE PURPOSES 15.
FORM 990-PF DESCRIPTION IL ANNUAL REPORT FILING FEE TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	OTHER E (A) EXPENSES PER BOOKS 15.	XPENSES (B) NET INVEST- MENT INCOME 0. 0.	ADJUSTED NET INCOM	STATEMENT 6 (D) CHARITABLE PURPOSES 15. 15. STATEMENT 7 FAIR MARKET