Form 990-PF

EXTENDED TO NOVEMBER 16, 202**29491**009 6822 1

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.
Go to www.irs.gov/Form990PF for instructions and the latest information. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

Dep	artmer	nt of the Treasury				r social security v.irs.gov/Form99					<u> </u>
_		ndar year 2019 or	tax year b		GO TO WWV	v.irs.gov/Formes	OFF IOT ITISE	, and e	- : · · · ·	rmauon. V V I	Open to Public Inspection
_		f foundation	tun your o	-gg				, 5,,5		A Employer identification	n number
											_
		SUETO FO	_				· · ·			27-1895175	<u> </u>
		and street (or P O box							Room/suite	B Telephone number	2520
_		NORTH M								 	2528
		own, state or prov			P or toreign	postal code				C If exemption application is p	pending, check here
		all that apply:		nitial return	1	Initial	return of a f	ormer public o	harity	D 1. Foreign organization	s, check here
			=	ınal return			ded return	•	•		
_			XA	ddress ch	ange	Name	change			Foreign organizations me check here and attach co	perting the 85% test, perputation
H	_	type of organizat				exempt private fo			M	E If private foundation sta	atus was terminated
		ction 4947(a)(1) r				Other taxable p	<u> </u>		<u> </u>	under section 507(b)(1)(A), check here
		arket value of all as		d of year		nting method:	X Cash	Accr	ual	F If the foundation is in a	
	ırom ı ►\$	Part II, col. (c), line 4.2	. 856 .	535.		Other (specify) _ umn (d), must be	on cash bas	sis.)		under section 507(b)(1)(B), check here
-	art I	Analysis of Rev	enue and E	Expenses		(a) Rever		(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
		(The total of amour necessarily equal to	nts in columns he amounts in	s (b), (c), and n column (a)	l (d) may not }	expenses		inco		income	for charitable purposes (cash basis only)
<u>カー</u>	1	Contributions, gi	fts, grants,	etc , recen	ved	4,402	2,666.		P. H. M.	N/A	
乙	2		he foundation is		attach Sch B						
S	3	Interest on savings a cash investments		-			025.		4,833.	<u>-</u>	STATEMENT 2
	4	Dividends and inf	terest from	securities		525	785.	54	5,785.	·	STATEMENT 3.1
	1	Gross rents	(1)					239.00			
	١	Net rental income or Net gain or (loss) from		ete not on lie		6.311	.,694.	100	40.000		STATEMENT 1
9	e ca	Gross sales price for assets on line 6a			,646.		##.CA##				$-\sqrt{3}$
0	7	Capital gain net inco	me (from Par	t IV, line 2)	·	EZTIMBA		18,90	7,646.	THE STATE OF THE S	U_Q\
۵	8	Net short-term ca	apıtal gaın	6	>			120001		THE CITY	
	9	Income modificat		(0				66.76 %	Texas and a	PUSO / 13/
	10a	Gross sales less retu and allowances	irns							16/10/ ₁₀	
	1	Less Cost of goods	_			247.21				18	
	1	Gross profit or (I	oss)			1	.,327.	KON AZZI HO'Y	1,327.	OGUE	STATEMENT 4
	11 12	Other income Total. Add lines	1 through 1	11			,843.		5,937.		STATEMENT 4
_	13	Compensation of off			etc	111,233	0.	10,02	0.	<u> </u>	0.
j.	14	Other employee s									
707	15	Pension plans, er		-							
<u>.</u> ۾	16a	Legal fees			MT 5		728.		4,864.		4,864.
- 2	b	Accounting fees		ST	MT 6	9	,450.		4,725.		4,725.
FED U	C	Other professiona	al fees								
<u>و</u> ـــ	17	Interest									
) į	18	Taxes	damint.on			}					
CAININED and Administra	17 18 19 20 21	Depreciation and Occupancy	aepietion							-	TO POST A SECURITION OF THE PERSON OF THE PE
	21	Travel, conference	es and me	etinas							
<u>ک</u> ک	22	Printing and publ		umgo							
		Other expenses		ST	'MT 7	175	5,580.	17!	5,555.		25.
	23 24 25	Total operating a	ınd adminis	strative				1		<u></u>	
ğ		expenses. Add I	nes 13 thro	ough 23		194	758.	18	5,144.	to the control of the state of	9,614. 5,281,915.
ς.		Contributions, gif				5,281	,915.		1995	atta (Februaria)	5,281,915.
	26	Total expenses a		ements.		- 486		4.0	= 1 4 4		E 201 F20
_	07	Add lines 24 and		<u> </u>		5,4/6	,673.	T8:	5,144.		5,291,529.
		Subtract line 26 f		-		5 762	,1 <u>70.</u>				the transport
	Ι.	Net investment in				3,703	, <u>, , , , , , , , , , , , , , , , , , </u>	19,34	793		100000
	ı	Adjusted net inco					20027-538	VALUE CALL		N/A	

	<u>अदरक्क के</u>	Relance Sheets Attached schedules and amounts in the description	Beginning of year	End o	of year
ş	art	High Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	353,742.	5,974,921.	
	,	Savings and temporary cash investments			7-1-7-1
	2	Accounts receivable ►	73.2 E. S.		9.74
	"	Less: allowance for doubtful accounts	////s	2,000,000.	2,000,000.
	١.		GALL SALES OF THE	2,000,000	2,000,000.
	4	Pledges receivable -			
	١.	Less; allowance for doubtful accounts	-		
	5	Grants receivable	<u> </u>		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	Water Co. 3552 3354 /60564 427 7285	NAME OF THE PERSON OF THE PERS	
	7	Other notes and loans receivable	14 X X X X X X X X X X X X X X X X X X X		
		Less; allowance for doubtful accounts		<u> </u>	
হ	8	Inventories for sale or use		. <u>.</u>	
Assets	9	Prepaid expenses and deferred charges		<u> </u>	
₹	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 8	25,444,310.	17,247,159.	28,542,471.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 9	0.	6,339,142.	6,339,143.
	14	Land, buildings, and equipment basis	2010		
		Less accumulated depreciation			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			-
	'`	instructions. Also, see page 1, item I)	25,798,052.	31,561,222.	42,856,535.
_	17	Accounts payable and accrued expenses		<u> </u>	
	18	Grants payable			1977 11 984 1983
/0	19	Deferred revenue			
ţį	20	Loans from officers, directors, trustees, and other disqualified persons			
abilities	21	Mortgages and other notes payable			
Ę		Other liabilities (describe		· · · · · · · · · · · · · · · · · · ·	
	**	Control magnitudes (added to be			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow FASB ASC 958, check here			
		and complete lines 24, 25, 29, and 30.			
lances	24	Net assets without donor restrictions			
ğ	25	Net assets with donor restrictions			
Ba	23	Foundations that do not follow FASB ASC 958, check here	_		
'n		<u> </u>			54.54
ij	00	and complete lines 26 through 30.	0.	0.	
õ		Capital stock, trust principal, or current funds	23,805,812.	34,508,673.	**************************************
Set	27	Paid-in or capital surplus, or land, bldg., and equipment fund	1,992,240.	-2,947,451.	
As	28	Retained earnings, accumulated income, endowment, or other funds	25,798,052.	31,561,222.	
Net Assets or Fund Ba	29	Total net assets or fund balances	23,190,032.	31,301,222.	and the second s
_		Table 19 to	25,798,052.	31,561,222.	
=		Total liabilities and net assets/fund balances		31,301,222.	V4.5 - 8 - 178 - 188 - 188 - 188 - 188 - 188 - 188 - 188 - 188 - 188 - 188 - 188 - 188 - 188 - 188 - 188 - 188
Ŗ	ärt.	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29	T	
	(mus	t agree with end-of-year figure reported on prior year's return)		1	25,798,052.
2	Enter	amount from Part I, line 27a		2	5,763,170.
3	Other	rincreases not included in line 2 (itemize)			0.
4	Add I	ines 1, 2, and 3		4	31,561,222.
5	Decre	eases not included in line 2 (itemize)		5	0.
<u>6</u>	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	6	31,561,222.	

Form 990-PF (2019) MAN	SUETO FOUNDATION	1					2	17-189	5175	Page :
	and Losses for Tax on I		Income							
	the kind(s) of property sold (for ex arehouse; or common stock, 200 st		ate,	(p)	How a	cquired chase	(c) Date (mo., c	acquired day, yr.)	(d) Dat (mo., d	
1a 138552 100 SHS	MORNINGSTAR INC	1.4		╁			VARI	OUS	VARIO	วบร
b				T						
G				†				-	-	
d			-							
e										
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1 107	st or other basis expense of sale			· ·		Gain or (loss s (f) minus		
a 18,907,646.		1						1	8,907	646.
b		1				-				
c			-							
d		 	_				-			
e		1						-		
	ig gain in column (h) and owned by	the foundation	on 12/31/69.				Gains (C	Col. (h) gain	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	col. (j), if any				(k), but	not less that (from col. (n -0-) or	
a								1	8,907	646.
b						·				
C		1							_	
d				\neg						
e		1								
	(If gain also ent	arın Dart I kas	7	$\overline{}$						
2 Capital gain net income or (net ca	, (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0- in Part I, line	7	<i>\</i>	2			1	8,907	646.
3 Net short-term capital gain or (los	, , ,	ınd (6);		ا د						
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	column (c).			 	,			N/A		
Part V. Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	inve	stm	ent Inco	me			
(For optional use by domestic private	touridations subject to the section	4940(a) tax on	net investment inc	come.	-)					
If section 4940(d)(2) applies, leave th	ns part blank.									
									<u> </u>	च् चि
Was the foundation liable for the sect				log'y					Yes	X No
If "Yes," the foundation doesn't qualify										
	each column for each year; see the	instructions bei	ore making any en						/d\	
(a) Base period years	(b)	ctributions	Net value of no	(c)		uca accata		Distrib	(d) outlon ratio	
Calendar year (or tax year beginning								(col. (b) div	ided by col.	
		70,082.				6,842				11922
2017		04,032.				4,035				71088
2016		57,307.				0,166				76064
2015		30,034.				7,541				2174
2014	1,31	L7,166.		4	,99	<u>8,520</u>	<u>. </u>		. 26	3511
							1 1			
2 Total of line 1, column (d)							2		. 52	<u> 24759</u>
3 Average distribution ratio for the 5	5-year base period - divide the total	on line 2 by 5.0), or by the numbe	er of y	ears/					
the foundation has been in existen	ice if less than 5 years						3_			<u>)4952</u>
4 Enter the net value of noncharitable	le-use assets for 2019 from Part X,	line 5					4	3	6,303,	505.
5 Multiply line 4 by line 3							5		<u>3,810,</u>	<u> 125.</u>
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		<u> </u>	418.
	•									
7 Add lines 5 and 6							7	. '	4,003,	343.
B Enter qualifying distributions from	·						8_		<u>5,291,</u>	<u>529.</u>
If line 8 is equal to or greater than	line 7, check the how in Part VI, line	e 1h, and comp	lete that nart using	n a 1º	% tay r	ate				

Form 990-PF (2019) MANSUETO FOUNDAT Part VI: Excise Tax Based on investment	ION Section 494	0(a), 4940(b), 4940	e), or 49	27-18951 48 - see inst	75 Page 4 tructions)	<u>.</u>
1a Exempt operating foundations described in section 4940(d)() . I		Medidinan
Date of ruling or determination letter:			ŀ	A TO SERVICE A.	193,418.	į
of Part I, line 27b	nems in Fart V, Check here	21 and enter 1%		*	755,410.	ĝ
c All other domestic foundations enter 2% of line 27b. Exempt	foreign organizations, enter 4	% of Part I line 12 col (b)	J			
2 Tax under section 511 (domestic section 4947(a)(1) trusts a	•		ľ	2	0.	,
3 Add lines 1 and 2	no taxabio ibanibationo emy, e		Ī		193,418.	•
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts	and taxable foundations only:	others, enter -0-)	Ī	4	0.	•
5 Tax based on investment income. Subtract line 4 from line		- · · · · · · · · · · · · · · · · · · ·	Ī	5	193,418.	•
6 Credits/Payments.						×
a 2019 estimated tax payments and 2018 overpayment credite	d to 2019	6a 37	,357.			
b Exempt foreign organizations - tax withheld at source		6b	0.			
c Tax paid with application for extension of time to file (Form 8	868)	6c 550	,000.			
d Backup withholding erroneously withheld		6d	0.			
7 Total credits and payments. Add lines 6a through 6d				7	<u>587,357.</u>	
8 Enter any penalty for underpayment of estimated tax. Check	here 🗶 ıf Form 2220 ıs att	ached	L	8	4,584.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter	r amount owed		▶	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8	, enter the amount overpaid		▶ .	10	389,355.	
11 Enter the amount of line 10 to be: Credited to 2020 estimate		389,355. Rei	unded 🕨		0.	
Rart VII-A Statements Regarding Activitie		<u> </u>		120	3 14 1A	
1a During the tax year, did the foundation attempt to influence a	ny national, state, or local legi	slation or did it participate o	r intervene i	n 🍱	Yes No	
any political campaign?				— — — — — — — — — — — — — — — — — — —	ta X	
b Did it spend more than \$100 during the year (either directly of				ion .	1b X	i
If the answer is "Yes" to 1a or 1b, attach a detailed descripti	on of the activities and copies	of any materials published	or	\bar{\bar{\bar{\bar{\bar{\bar{\bar{		ĺ
distributed by the foundation in connection with the activities	•			arter		İ
c Did the foundation file Form 1120-POL for this year?				1356	1c X	į
d Enter the amount (if any) of tax on political expenditures (see			^	14		l
(1) On the foundation. ► \$			0.	**		ł
e Enter the reimbursement (if any) paid by the foundation duri	ig the year for political expend	iture tax imposed on tound	ation	_{-ب} اد		ł
managers. > \$0.	www.nb.chan.congrad to the I	neo		ــــــــــــــــــــــــــــــــــــــ	2 X	ı
2 Has the foundation engaged in any activities that have not pr	eviously been reported to the r	nor		*2		i
if "Yes," attach a detailed description of the activities.3 Has the foundation made any changes, not previously reports	nd to the IDC in its governing	instrument articles of inco	noration or			
bylaws, or other similar instruments? If "Yes," attach a confo		mstrument, articles of moor	poration, or	3.43	3 X	İ
4a Did the foundation have unrelated business gross income of		ır?			4a X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	with the state of	•			4b X	
5 Was there a liquidation, termination, dissolution, or substant	al contraction during the year's	>		-	5 X	
If "Yes," attach the statement required by General Instruction	• •					ĺ
6 Are the requirements of section 508(e) (relating to sections 4		ither;		*		ĺ
By language in the governing instrument, or	,			ر براد م		ĺ
By state legislation that effectively amends the governing ii	strument so that no mandator	ry directions that conflict wi	th the state l	aw 🔝		
remain in the governing instrument?					6 X	
7 Did the foundation have at least \$5,000 in assets at any time	during the year? If "Yes," comp	olete Part II, col. (c), and Pa	rt XV		7 X	
				*		ĺ
8a Enter the states to which the foundation reports or with whic	n it is registered. See instruction	ons. ►				ĺ
IL				[2,5]		ĺ
b If the answer is "Yes" to line 7, has the foundation furnished a	copy of Form 990-PF to the A	Attorney General (or designa	nte)			i
of each state as required by General Instruction G? If "No,"	attach explanation			_ {	Bb X	_
9 Is the foundation claiming status as a private operating found	ation within the meaning of se	ection 4942(j)(3) or 4942(j)	(5) for calend	dar 🔣		
year 2019 or the tax year beginning in 2019? See the instruc	ions for Part XIV. If "Yes," con	nplete Part XIV		<u> </u>	9 X	
10 Did any persons become substantial contributors during the	ax year? If "Yes," attach a sched	ule listing their names and addre	sses		10 X	

Page 5

All any time during the year, did the foundation, decoby or indirectly, own a controlled antity within the meaning of section 512(N)(3)? If Yes,* statch schedule. See instructions 1	R	art VII-A Statements Regarding Activities (continued)			
section 512(b) (13)° If Yes,* attach schedule, See instructions 10 bit the fundation make a distribution to a drive of und over which the foundation or a designalfied person had advisory privileges? 11 Yes,* attach statement, See instructions 13 bit the foundation canaging with the public instructions with the foundation and exemption application? 14 The books are in case of MIKE IBERIL Located at # 400 NORTH MICHIGAN AVE, SUITE 350, CHICAGO, IL 76+4 \$60.611 15 Section 497(a)(1) none-simple charable trusts filing form 990-PF in lieu of Farm 1041 - check bere and either the amount of tax-evenity interest faceword or accreased during they are 16 At any time during calendary year 2019, did the foundation have an interest in or a signalure or other authority over a bank, securities, or other francolal account in a foreign country? 16 At any time during calendary year 2019, did the foundation have an interest in or a signalure or other authority over a bank, securities, or other francolal account in a foreign country? 17 See the instructions for exceptions and filing requirements for FinCEN Form 114. If Yes,* enter the name of the foundation of receptions and filing requirements for FinCEN Form 114. If Yes,* enter the name of the foundation of receptions and filing requirements for FinCEN Form 114. If Yes,* enter the name of the foundation of receptions of the foundation france of the more of the foundation for exceptions of the foundation france of the more of the foundation for exceptions of the foundation for exceptions of the foundation for exceptions of the foundation for exceptions of the foundation of accountry foundation foundation of accountry foundation foundation of accountry foundation of accountry foundation of accountry foundation of accountry foundation of accountry foundation of accountry foundation of accountry foundation of accountry foundation page of a major year of the foundation of the foundation has a major filt of the provisions of section 4942(a)(2) or 19 segminary foundation founda			446	Yes	No
12 Uth froundation make a distribution to a droor advised fund over which the foundation or a disqualified person had advisory privileges? 13 Ord the foundation comply with the public inspection requirements for its annual returns and exemption application? Whose address > N7A 13 The books are in one of > MIXE IBERL Located at > 400 NORTH MICHIGAN AVE, SUITE 350, CHICAGO, IL 20P4 > 50611 20P4 > 506511 20P4 > 509511	11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
13 Dut to foundation comply with the goaltic inspection requirements for its annual returns and exemption application? Value and address N/A		section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
13 Duff the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
Wester address ► N/A 1 The books are on care of ► MIRE TBERL Located at ► 400 NORTH MICHIGAN AVE, SUITE 350, CHICAGO, IL 21P+4 ► 60611 15 Section 4947(a)(1) nonexempt charable trusts filing form 999PF in lead of Form 1041 - check here and enter the amount of tax-exempt interest research or accused during they year and enter the amount of tax-exempt interest research or accused during they are 16 At any time during calendary year 2019, did the foundation have an interest in or a signature or other natural accusing the foundation have an interest in or a signature or other authority over a bank, securities, or other financial accusint in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. **REAT_VIII-B** Statements Regarding Activities for Which Form 4720 May Be Required **FIRE Form 4720 if any Item is checked in the "Yes" column, unless an exception applies. **In Using the Property of the Column of the directly or indirectly!* **(1) Engage in the sale or exchange, or leasing of property with a disqualified person?* **(2) Borrow money fron, lend money fron, end money fron end from the foundation person?* **(3) Firarish goods, services, or facilities to (or accept them from) a disqualified person?* **(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?* **(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?* **(5) Tirarisfer any income or assist to a disqualified person?* **(6) Agree to pay money or property to a government official?* (Exception, Check 'No' **(7) Tirarisfer any income or assist to a disqualified person of the foundation engage in a prior year		If "Yes," attach statement. See instructions	12		X
40 The books are in care of ▶ MIKE IBERL. Telephone no. ▶ (312) 736-2528 Located at ▶ 400 NORTH MICHIGAN AVE, SUITE 350, CHICAGO, IL 2P-44 ▶ 60611 15 Section 497(3)(1) noneximpt charable trusts thing Form 990-FF in lieu of Form 1041-check there and enter the amount of tax-exempl interest received or accrued during the year A continuing calending year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? Sea the instructions for exceptions and filting requirements for FinCEN Form 114. If "Yes," enter the name of the foundation for the interest of the filting of the fi	13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
Located at M 400 NORTH MICHIGAN AVE, SUTTE 350, CHTCAGO, IL Section 4947(a)(1) nonexempt charable trusts fitting Form 990-PF in live of Form 1041 - check here and effect the amount of tax-exempt interest received or accrued during the year 16					
Located at P 400 NORTH MICHIGAN AWF, SUITE 350, CHICAGO, II. Section 497(g)(t) honesterpic charable trusts then leve of farm 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 16 At any time during calendary year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign countin ? See the instructions for exceptions and filing requirements for FinCEN Form 114. II "Yes," enter the name of the foreign countiny. Part VIII	14	The books are in care of ► MIKE IBERL Telephone no. ► (312)	736	<u> 25 </u>	28
and enter the amount of tax-exempt interest received or accured during the year At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 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? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish pods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person or make any of either available for the height of the the height of the themself or use of a disqualified person or lease any analysis of the service of the file		Located at ► 400 NORTH MICHIGAN AVE, SUITE 350, CHICAGO, IL ZIP+4 ►6	<u>0611</u>		
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Securities, or other financial account in a foreign country? See the instructions for exceptions and filling requirements for FinCEN Form 114, II "Yes," enter the name of the foreign country. I PERITYUTI-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. 1 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? (2) Borrow money from, lead 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? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (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) (or make any of either available for the their direction of government except. If termination of government service, if termination within 90 days.) b If any answer is "es" to 1a(1)-(6), did any of the acts fall to qualify under the exceptions described in Regulations section 53.494 (1d)-3 or in a current notice regarding disaster assistance? See instructions before the first day of the tax year beginning in 2019 2? 1 Taxes on failure to distribute moome (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942()(3) or 4942()(5):): a Aft the end of atx year 2019, days are beginning in 2019 2? 1 Taxes on failure to distribute moome (section 4942) (does not applying the provisions of section 4942(a)(2) (relating to micorrect valuation of assets) to the year's undestributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions of the year's undestributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instru		and enter the amount of tax-exempt interest received or accrued during the year			
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b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions C Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019? 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(1)(3) or 4942(1)(5)): a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years \			1		
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had not been removed from jeopardy before the first day of the tax year beginning in 2019?				- 22	
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				-PF	

2 C	compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."		-
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, othe allowances
	NONE				
_					
		 			-
Total	I number of other employees paid over \$50,000			<u> </u>	

Paid Employees, and Contractors (con 3 Five highest-paid independent contractors for professional		- a	
(a) Name and address of each person paid more than			(c) Compensation
NONE	\$50,000	(b) Type of service	(C) Compensation
HOME			
**************************************	•		
			
	· · · · · · · · · · · · · · · · · · ·		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u> </u>		<u> </u>
			<u> </u>
List the foundation's four largest direct charitable activities during the tax number of organizations and other beneficiaries served, conferences conv			Expenses
1_ N/A			
	<u></u>		
2_			
	<u> </u>		
3			
- · · · · · · · · · · · · · · · · · · ·			
			-
			
	·		
Part IX-B Summary of Program-Related Investm	ents		
Describe the two largest program-related investments made by the foundation		nd 2.	Amount
N/A			
<u> </u>			
-	<u> </u>		
All other program-related investments. See instructions.			
·	<u> </u>		
	<u> </u>		
			
otal Add lines 1 through 3			0.

Form 990-PF (2019) MANSUETO FOUNDATION 27-1895175 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 30,430,971. a Average monthly fair market value of securities 1a 6,425,379. 1b b Average of monthly cash balances c Fair market value of all other assets 1c 36,856,350. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 36,856,350**.** 3 Subtract line 2 from line 1d 552,845. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 36,303,505. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 1,815,175. Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here
and do not complete this part.) 1,815,175. Minimum investment return from Part X, line 6 193,418. Tax on investment income for 2019 from Part VI, line 5 2a 28. Income tax for 2019. (This does not include the tax from Part VI.) 2b 193,446. c Add lines 2a and 2b 2c 3 621,729. Distributable amount before adjustments, Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 621, 729. 5 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 621, 729. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 5,291,529. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a 3b b Cash distribution test (attach the required schedule) 5,291,529. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 193<u>,418.</u>

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2019)

5,098,111.

6

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

Adjusted qualifying distributions. Subtract line 5 from line 4

Part XIII Undistributed Income (see instructions)

(a) (b) (c) (d) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c					
1 Distributable amount for 2019 from Part XI, ine 7 2 Undesthated recent, if any, as of this worl of 2019 2 Encess distributions carryover, if any, to 2019: 3 Encess distributions carryover, if any, to 2019: 4 From 2014 2 62 2, 312 - 4 From 2015 4 04 2, 251 - 5 From 2015 4 04 2, 251 - 5 From 2015 4 04 2, 251 - 5 From 2016 3 82 2, 853 - 4 From 2017 4 26 3, 418 - 6 From 2018 1 Test of lines 3s through 8 4 Qualifying distributions for 2019 from Part XII, line 4 P S 5 2, 291 , 529 - 3 Applied to 2018, but not lines than line 2a 4 Applied to 2018 distributions of 2019 from part XII, line 4 P S 5 2, 291 , 529 - 3 Applied to 2018 distributions of corpus (Election required - see instructions) 4 Applied to 2018 distributions of corpus (Election required - see instructions) 5 Encess distributions are seen seed of corpus (Election required - see instructions) 4 Applied to 2018 distributions of corpus (Election required - see instructions) 5 Encess distribution of price years (Election required - see instructions) 6 Enter the net total of each column as indicated below. 8 Cares And from 2 4, 4, and se distribution of price years (Instituted income for 2018 Subtract lines 4 from line 2a 1 Cares And from 2 4, 4, and se distribution of price years (Instituted income for 2018 Subtract lines 4 from line 2a 2 Cares And from 2 4, 4, and 4 se formaced by continued in a care of care of care in a care of care in					
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2. Underbusked Hosens, 4 may, no or the was of 2019	·	•			1,621,729.
8 Total for prior years: 3 Excess distributions carryover, if amy, to 2019; 4 From 2015 4 Q4, 251_ 4 From 2016 3 82, 853_ 4 From 2018 4 Outsidying distributions for 2019 from 2018 4 Outsidying distributions for 2019 from 2017 total of lines 3 at through e 4 Outsidying distributions for 2019 from 2017 total of lines 3 at through e 4 Outsidying distributions for 2019 from 2017 total of lines 3 at through e 4 Outsidying distributions for 2019 from 2017 total of lines 3 at through e 4 Outsidying distributions out occupies 5 Treated as distributions out of corpus 6 Interest as distributions out of corpus 6 Excellent an expendent - see instructions) 4 Applied to 2019 distributible amount 7 Permaning amount distributed out of corpus 5 Excellent antibutions an outher of the heaves amount 8 Permaning amount distributed out of corpus 5 Excellent antibutions are control (%) the same amount 9 O. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.					1
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## From 2015 40.4 , 25.1 ## From 2018 38.2 , 85.3 ## From 2018 42.6 , 41.8 ## From 2018 4.2 ## Fr		-			
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## From 2017	b From 2015 404,251.				
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c Excess from 2017 426, 418. d Excess from 2018	h Eyress from 2016 382 853	_			
d Excess from 2018		,			
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MANSUETO FOUNDATION

Part XV Supplementary Information				r
3 Grants and Contributions Paid During the Y				
Recipient (home or business)	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		
BRAVEN INCORPORATED	NONE	PC	GENERAL SUPPORT	
100 N. LASALLE STREET SUITE 310				10 000
CHICAGO, IL 60602			-	10,000
BY THE HAND CLUB FOR KIDS	NONE	₽C	GENERAL SUPPORT	
PO BOX 10043				
CHICAGO, IL 60610				100,000
CASTLE RESTORATION FUND	NONE	PC	GENERAL SUPPORT	
10244 SOUTH LONGWOOD DRIVE				ŀ
CHICAGO, IL 60643			-	100,000
CHANGE ILLINOIS	NONE	PC	GENERAL SUPPORT	
233 N MICHIGAN AVE STE 1800				25,000
CHICAGO, IL 60601			-	23,000
CHICAGO ARCHITECTURE BIENNIAL INC.	NONE	₽C	GENERAL SUPPORT	
78 E WASHINGTON ST		[
CHICAGO, IL 60602				100,000
CHICAGO FIRE FOUNDATION TOYOTA PARK	NONE	PC	GENERAL SUPPORT	
7000 S HARLEM AVE		1		1
BRIDGEVIEW, IL 60455				100,000
	TOTAL	DC.	GENERAL SUPPORT	
COLLEGE POSSIBLE INC 755 PRIOR AVE N SUITE 210	NONE	PC	GENERAL SUFFORI	
ST. PAUL, MN 55104				100,000
COMMERCIAL CLUB FOUNDATION	NONE	PC	GENERAL SUPPORT	
21 SOUTH CLARK ST, SUITE 4301				60 500
CHICAGO, IL 60603			-	68,500
EVERYTOWN FOR GUN SAFETY SUPPORT FUND	NONE	PC	GENERAL SUPPORT	
INC				
PO BOX 4184				
NEW YORK, NY 10163			-	100,000
			GUNERAL GURRORE	
FERNWOOD BOTANICAL GARDENS 13988 RANGE LINE RD	NONE	PC	GENERAL SUPPORT	
NILES, MI 49120				25,000
Total from continuation sheets				4,706,915

MANSUETO FOUNDATION
Part:XV₃ Supplementary Information

Part:XV, Supplementary Information	n			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
FRANCISCAN OUTREACH	NONE	PC	GENERAL SUPPORT	
717B W. 18TH ST.				
CHICAGO, IL 60616		<u> </u>		50,000.
HEARTLAND ALLIANCE FOR HUMAN NEEDS	NONE	PC	GENERAL SUPPORT	
AND RIGHTS				
208 S LASALLE ST STE 1300				100.000
CHICAGO, IL 60604	-	 		100,000.
HIGH JUMP	NONE	PC	GENERAL SUPPORT	1
59 W NORTH BLVD				
CHICAGO, IL 60610				50,000.
INSTITUTE FOR NONVIOLENCE CHICAGO	NONE	PC	GENERAL SUPPORT	
819 NORTH LEAMINGTON AVENUE	100.2			
CHICAGO, IL 60651				20,000.
JUNIOR ACHIEVEMENT OF CHICAGO	NONE	PC	GENERAL SUPPORT	
651 W WASHINGTON BLVD. SUITE 404				
CHICAGO, IL 60661	-		-	20,000.
LINCOLN PARK ZOOLOGICAL SOCIETY	NONE	PC	GENERAL SUPPORT	
2001 N CLARK ST				
CHICAGO, IL 60614				75,000.
MAYO CLINIC	NONE	PC	GENERAL SUPPORT	
200 FIRST ST SW	10112			
ROCHESTER, MN 55902		ł		75,000.
AGRAGIES EDWALDEN FOR TOWN THE			CENTRAL CURRORS	
MUNSTER EDUCATION FOUNDATION INC PO BOX 3046	NONE	PC	GENERAL SUPPORT	
MUNSTER, IN 46321				400,000.
			-	1
NATIONAL SHRINE OF ST FRANCES XAVIER	NONE	PC	GENERAL SUPPORT	
2520 N LAKEVIEW AVE				
CHICAGO, IL 60614	<u> </u>	 	 	2,000.
		1		1
NEW LEADERS CHICAGO	NONE	PC	GENERAL SUPPORT	
17 N STATE ST		1		
CHICAGO, IL 60602		<u></u>		20,000.
Total from continuation sheets				<u> </u>

MANSUETO FOUNDATION

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to **Amount** any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient NEWS LITERACY PROJECT INC NONE GENERAL SUPPORT ÞС 5335 WISCONSIN AVE. NW, SUITE 440 WASHINGTON, DC 20015 25,000. NORTHWESTERN MEMORIAL HEALTHCARE NONE PC GENERAL SUPPORT 541 N FAIRBANKS CT RM 1630 CHICAGO, IL 60611 400,000. ONE GOAL NONE PC GENERAL SUPPORT 180 N WABASH AVE, SUITE 800 CHICAGO, IL 60601 50,000. OUNCE OF PREVENTION FUND NONE ₽C GENERAL SUPPORT 33 WEST MONROE STREET SUITE 1200 CHICAGO, IL 60603 40,000. PRO PUBLICA INC NONE GENERAL SUPPORT 155 AVENUE OF THE AMERICAS, 13TH NEW YORK, NY 10013 50,000. FLOOR PURPOSE WORKFORCE SOLUTIONS NONE NC GENERAL SUPPORT 1 W MONROE ST 4TH FLOOR CHICAGO, IL 60603 100,000. RENAISSANCE SOCIETY AT THE UNIVERSITY NONE GENERAL SUPPORT OF CHICAGO 5811 S ELLIS AVE BERGMAN GALLERY COBB HALL 418 CHICAGO, IL 60637 110,000. SAMAHAN SA BARYO NFP NONE GENERAL SUPPORT 9407 KILREA DR ORLAND PARK, IL 60462 1,000. SHIRLEY RYAN ABILITY LAB PC GENERAL SUPPORT NONE 355 E ERIE ST 300,000. CHICAGO, IL 60611 STEPPENWOLF THEATRE COMPANY NONE GENERAL SUPPORT 1700 N HALSTED ST CHICAGO, IL 60614 50,000. Total from continuation sheets

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y		-	- 	
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		
PEACH FOR AMERICA INC.	NONE	₽C	GENERAL SUPPORT	
25 BROADWAY 12TH FLOOR				
NEW YORK, NY 10004			<u>-</u>	1,000,00
THE WALDEN WOODS PROJECT	NONE	₽C	GENERAL SUPPORT	
THE THOREAU INSTITUTE AT WALDEN				
WOODS, 44 BAKER FARM RD. LINCOLN, MA				
01773		ļ		600,00
UNITED WAY OF METROPOLITAN CHICAGO	NONE	PC	GENERAL SUPPORT	
INC.				
333 S. WABASH AVE., 30TH FLOOR				
CHICAGO, IL 60604				50,00
JRBAN INITIATIVES INC.	NONE	PC	GENERAL SUPPORT	
550 W LAKE ST STE 340			1	
CHICAGO, IL 60661		<u> </u>		15,00
		-		
JILLA CESARE EVENTS	NONE	NC	GENERAL SUPPORT	
900 EAGLE RIDGE DRIVE				
SCHERERVILLE, IN 46375				1,00
WBEZ/CHICAGO PUBLIC MEDIA	NONE	PC PC	GENERAL SUPPORT	
348 E GRAND AVE, NAVY PIER			†	
CHICAGO, IL 60611	-			50,00
S TENNIS AND EDUCATION FOUNDATION	NONE	PC	GENERAL SUPPORT	
5336 S. STATE STREET				
CHICAGO, IL 60609				324,41
	-		-	
	-			
			,	
Total from continuation sheets		-	- -	

FOITH 990-PF (2019)	MANSOETO FOUN.	DATION				. 103
Part-XVI-A	Analysis of Income-Prod	lucing Activiti	es			
Enter gross amounts unless otherwise indicated.		Unrelated	business income	Excluded by	section 512, 513, or 514	
Enter gross amounts	ariida otiibi wida iiialdatea.	(a)		_(c)	(d)] _R ,

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ided by section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue;	code	Amount	sion	Amount	function income
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments		l	14	1,025.	
4 Dividends and interest from securities	_		14	1,025. 525,785.	
5 Net rental income or (loss) from real estate:	77.74				7/11/22/11/11 AND
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	-1,327.	
8 Gain or (loss) from sales of assets other			T -		
than inventory	1		18	6,311,694.	
9 Net income or (loss) from special events		-	-		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			<u> </u>		
	1		ľ		
a					
c			T		<u> </u>
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	12+5-201142	0.		6,837,177.	0.
13 Total. Add line 12, columns (b), (d), and (e)	2- 5(300 200 mm)3 .27.		120007000	13	
(See worksheet in line 13 instructions to verify calculations.)					
	. 46 - 4			Disconnection	.
Part XVI-B Relationship of Activities to	o the Acco	mplishment of Exe	empt	Purposes	
Line No. Explain below how each activity for which income	me is reported	in column (e) of Part XVI-A	contrib	uited importantly to the accor	nnlishment of
the foundation's exempt purposes (other than it	•		00111112	otto importantly to the about	inproduction of
N/A	.,,				-
	. <u>.</u>				
 					
	-	<u> </u>			-
					
		· · · · · ·			
					
					
					
					
					
					
				-	
				·····	
					
					
- 					
				· · · · · · · · · · · · · · · · · · ·	

(312) 486-1000 Form 990-PF (2019)

Firm's EIN ► 86-1065772

Phone no.

Preparer

Use Only

Firm's name ► DELOITTE TAX LLP

Firm's address ▶ 111 SOUTH WACKER DRIVE

CHICAGO, IL 60606

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2019

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

M	ANSUETO FOUNDATION	27-1895175				
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
•	is covered by the General Rule or a Special Rule.	o. Con motimistican				
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	s See instructions				
General Rule						
- · ·	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special Rules						
sections 509(a)(1) any one contribute	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, cor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount, line 1 Complete Parts I and II	or 16b, and that received from				
year, total contribi	in described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educative to children or animals. Complete Parts I, II, and III					
year, contributions is checked, enter purpose Don't co	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section section section section of the section	ore than \$1,000 If this box s, charitable, etc ,				
but it must answer "No" or	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo i Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo 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.

Name of organization

Employer identification number

MANSUETO FOUNDATION

27-1895175

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOSEPH D. MANSUETO 400 NORTH MICHIGAN AVE, SUITE 350 CHICAGO, IL 60611	- \$\$	Person X Payroll
(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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Oncash 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)

Employer identification number

MANSUETO FOUNDATION

27-1895175

Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	28,000 SHS MORNINGSTAR, INC		
		\$ 4,398,800.	11/29/19
(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. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	9		90, 990-EZ, or 990-PF) (20

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization **Employer identification number** MANSUETO FOUNDATION 27-1895175 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year Part III from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enterthis info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

	_								
FORM 990-PF	GAIN OR	(LOSS)	FROM S	ALE C	F ASSE	TS		ST	ATEMENT 1
(A) DESCRIPTION OF PRO	PERTY				MANN ACQUI		DA'		DATE SOLD
138552 100 SHS MOR	NINGSTAR INC	•					VARIO	OUS	VARIOUS
(B) GROSS SALES PRI	(C VALUI CE TIME OI	E AT	EXPE	D) NSE C ALE		(E) EPREC	С.	GAI	(F) 1 OR LOSS
18,907,	646. 12,5	95,952			0.		0.		6,311,694.
CAPITAL GAINS DIVI			\				=		0. 6,311,694.
FORM 990-PF INTER	EST ON SAVING	GS AND	TEMPOR	ARY C	ASH IN	VESTM	MENTS	ST	ATEMENT 2
SOURCE			(A) REVENUE R BOOK		NET IN	(B) VESTM COME	1ENT		(C) ADJUSTED ET INCOME
INTEREST FROM PASS INTEREST ON TEMP I TOVALA ACCRUED INT	NVESTMENTS		1,0	21. 4. 0.		1,0 93,8	021. 4. 808.		
TOTAL TO PART I, L	INE 3		1,0	25.		94,8	333.		
FORM 990-PF	DIVIDENDS	AND IN	TEREST	FROM	SECUR	ITIES	= 5	STA	ATEMENT 3
SOURCE	GROSS AMOUNT	CAPI GAI DIVID	:NS	REV	A) ENUE BOOKS		(B) INVES		(C) ADJUSTED NET INCOME
DIVIDEND FROM PASS-THROUGHS MORNINGSTAR INC.	144,675. 381,110.		0.		4,675. 1,110.		.44,67 881,11		
TO PART I, LINE 4	525,785.		0.	52	5,785.	5	525,78	35.	
								= =	

FORM 990-PF	OTHER	INCOME		STATEMENT 4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
OTHER INCOME FROM PASS-THROUGH	GHS -	-1,327.	-1,327.	
TOTAL TO FORM 990-PF, PART I, LINE 11		-1,327.	-1,327.	
FORM 990-PF	LEGA	L FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
HARRISON & HELD	9,728	. 4,864	•	4,864.
TO FM 990-PF, PG 1, LN 16A	9,728	4,864	•	4,864.
FORM 990~PF	ACCOUNT	ING FEES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DELOITTE TAX LLP	9,450	. 4,725.	•	4,725.
TO FORM 990-PF, PG 1, LN 16B	9,450	4,725	•	4,725.
				
ORM 990-PF OTHER EXPENSES				STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
IL ANNUAL REPORT FILING FEE	25	. 0.	•	25.
OTHER EXPENSES FROM PASS-THROUGHS	175,555	. 175,555.	•	0.
TO FORM 990-PF, PG 1, LN 23	175,580	175,555.	,	25.
		- 		

FORM 990-PF	CORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
MORNINGSTAR INC COMMON STOCK	•	17,247,159.	28,542,471.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	17,247,159.	28,542,471.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BDT CAPITAL PARTNERS FUND 3	COST	6,339,142.	6,339,143.
TOTAL TO FORM 990-PF, PART II,	LINE 13	6,339,142.	6,339,143.