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2020

OMB No. 1545-0052

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2020, or tax year beginning 01-01-20	)20 , aı	nd er	nding 12-31	-2020	
		indation MANSFIELD CHARITABLE FOUNDATION			A Employer id	lentification numbe	r
FC	LET & P	MANSFIELD CHARLIABLE FOUNDATION			27-0557246		
		l street (or P.O. box number if mail is not delivered to street address) QUETTE AVE STE 1200	Room/suite		<b>B</b> Telephone n	umber (see instruction	ns)
					(612) 338-878	8	
		ı, state or province, country, and ZIP or foreign postal code IS, MN 55401			<b>C</b> If exemption	application is pendin	g, check here
<b>G</b> Cl	neck al	I that apply:	former public charity		<b>D 1.</b> Foreign o	ganizations, check he	ere
		☐ Final return ☐ Amended return				rganizations meeting	
		$\square$ Address change $\square$ Name change				ck here and attach co	· —
		rpe of organization: Section 501(c)(3) exempt private				undation status was t on 507(b)(1)(A), chec	
			e private foundation		-		
of	year (f	xet value of all assets at end room Part II, col. (c),  ▶\$ 19,478  J Accounting method:  □ Other (specify)  (Part I, column (d) must	Cash Accru	ıal		ation is in a 60-montl on 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	/h)	Not investment	(a) Adjusted not	(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(D)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	21,662				
	2	Check $ ightharpoonup$ if the foundation is <b>not</b> required to attach					
	3	Sch. B Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
	5a	Gross rents					
	ь	Net rental income or (loss)	-				
Reverue	6a	Net gain or (loss) from sale of assets not on line 10					
	b	Gross sales price for all assets on line 6a	-				
	7	Capital gain net income (from Part IV, line 2)			(	)	
	8	Net short-term capital gain					
	10a	Gross sales less returns and allowances					
	ь	Less: Cost of goods sold	<u></u>				
	c	Gross profit or (loss) (attach schedule)	<u>-</u>				
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	21,662		(	)	
	13	Compensation of officers, directors, trustees, etc.	0		(	)	0
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits					
E	16a	Accounting fees (attach schedule)	1,575			1	1,575
Operating and Administrative Expenses	b c	Other professional fees (attach schedule)	1,3/3			1	1,3/3
ĭve	17	Interest					
trat	18	Taxes (attach schedule) (see instructions)					
inis	19	Depreciation (attach schedule) and depletion				1	
<del>d</del>	20	Occupancy					
φp	21	Travel, conferences, and meetings					
an	22	Printing and publications					
ing	23	Other expenses (attach schedule)	269		(	)	269
<u>e</u> rat	24	Total operating and administrative expenses.					
ope.	25	Add lines 13 through 23	1,844 37,225		(	,	1,844 37,225
_	26	Contributions, gifts, grants paid  Total expenses and disbursements. Add lines 24 and	37,225				37,225
		25	39,069		C		39,069
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	-17,407				
	ь	Net investment income (if negative, enter -0-)			(		
	С	Adjusted net income (if negative, enter -0-)				<u> </u>	200 27 12 12 1
ror	raper¹	work Reduction Act Notice, see instructions.			Cat. No. 11289	x For	m <b>990-PF</b> (2020)

Form 990-PF (2020)

Net Assets

27

28

29 30

Part III

2

3

4

5

Paid-in or capital surplus, or land, bldg., and equipment fund

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

**Analysis of Changes in Net Assets or Fund Balances** 

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

		should be for end of year amounts only. (See instructions.)	(a)	book value	(D) BOOK Value	(C) Fair Market Value
	1	Cash—non-interest-bearing		23,110	19,478	19,478
	2	Savings and temporary cash investments				
	3	Accounts receivable				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts ▶				
Ś	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis >				
		Less: accumulated depreciation (attach schedule)				
	15	Other assets (describe >)				
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item I)		23,110	19,478	19,478
	17	Accounts payable and accrued expenses				
	18	Grants payable				
Liabilities	19	Deferred revenue				
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons				
jab	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe )	9	50	13,825	
	23	Total liabilities(add lines 17 through 22)		50	13,825	
Balances		Foundations that follow FASB ASC 958, check here ▶ □ and complete lines 24, 25, 29 and 30.				
alai	24	Net assets without donor restrictions				
ä	25	Net assets with donor restrictions				
or Fund		Foundations that do not follow FASB ASC 958, check here  and complete lines 26 through 30.				
0.5	26	Capital stock, trust principal, or current funds		0	0	

23,060

23,060

23,110

5,653

5,653

19,478

23,060

-17,407

5,653 0

5,653 Form **990-PF** (2020)

0

1

2

3

4

5

6

	(e) Gross sales price Depreciation allowed (or allowable) p  Complete only for assets showing gain in column (h) and owned by the four (i) Adjusted basis as of 12/31/69 column (b) as of 12/31/69 column (c) (d) Adjusted basis as of 12/31/69 column (d)						How acqu P—Purch D—Donat	(d) Date sold (mo., day, yr.)		
1a	1						5 50114			
	-									
•										
	(a)		(f)				(g)		(	h)
							other basis			r (loss)
			(or allow	/able)		plus expe	ense of sale		(e) plus (f	) minus (g)
a										
<u>b</u>										
c d										
е										
	Complete only for assets	show	ing gain in column (	(h) and ow	ned hy	the foundation (	nn 12/31/69			I)
		311000			nied by		(k)		Gains (Col. (	<b>l)</b> h) gain minus
			Adjusted	basis		Excess	of col. (i)		col. (k), but not	less than -0-) or
	1.M.V. as of 12/31/03		as of 12/	31/69		over col.	. (j), if any		Losses (fr	om col.(h))
a										
b										
<u> </u>										
d										
е										
				(	If ani	a also enter in D	ort I line 7	- , 1		
2	Capital gain net income	or (ne	et capital loss)	{		s), enter -0- in P		- }		
	, ,	•	, ,	ţ	,	,,	•	_ /	2	
3	Net short-term capital o				-					
	If gain, also enter in Pa in Part I, line 8	rt I, lir			-		-	l l	3	
	iii rait I, iiile o							. [ [		
Part	V Qualification U	Jndei	Section 4940(	e) for Re	educe	d Tax on Net	Investme	nt Inc	ome	
ECT	ION 4940(e) REPEA	LED	ON DECEMBER 2	20, 2019	- DO	NOT COMPLE	TE			
	Reserved			•						
	(a)		(b)			(c)			(d)	
	Reserved		Reserved			Reserved			Reserved	
2	Reserved							2		
3	Reserved							3		
4	Reserved							4		
5	Reserved							5		
	Reserved							6		
-	Reserved							7		
	Reserved ,									
o	neserved , i i i i							8		

Form	1 990-PF (2020)							F	Page <b>6</b>
Pa	rt VII-B Statements Re	garding	<b>Activities for Which</b>	Form 4720 May Be	Required (continued	d)			
5a	During the year did the founda	tion pay o	r incur any amount to:					Yes	No
	(1) Carry on propaganda, or o	therwise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes	✓ No			
	(2) Influence the outcome of a	ny specifi	c public election (see sec	tion 4955); or to carry	□ les	E NO			
	on, directly or indirectly, a	ny voter r	egistration drive?		· · 🔲 Yes	✓ No			
	(3) Provide a grant to an indiv	idual for t	ravel, study, or other sim	ilar purposes?	☐ Yes	▼ No			
	(4) Provide a grant to an orga	nization of	ther than a charitable, etc	, organization described					
	in section 4945(d)(4)(A)?	See instru	ctions		· · ✓ Yes	□ No			
	(5) Provide for any purpose of	her than r	eligious, charitable, scien	ous, charitable, scientific, literary, or					
			•	tion of cruelty to children or animals?					
b	If any answer is "Yes" to 5a(1)				ceptions described in	<b>✓</b> No			
	Regulations section 53.4945 or		= =			•	5b	Yes	
	Organizations relying on a curr		-		•				
С	If the answer is "Yes" to quest			•					
	tax because it maintained expe If "Yes," attach the statement		· · · · · · · · · · · · · · · · · · ·	_ •	· · • Yes	☐ No			
6a	Did the foundation, during the	year, rece	ive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?.				·     Vac	✓ No			
b	Did the foundation, during the	year, pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.								
7a	At any time during the tax yea				⊔ res	✓ No			
b	If "Yes", did the foundation red		,		ne transaction?	•	7b		
8	Is the foundation subject to the		1 / ( )						
	excess parachute payment dur	ing the ye	ar?		· · 🗌 Yes	✓ No			
Pa	rt VIII Information Abo and Contractors		ers, Directors, Trus	tees, Foundation Ma	anagers, Highly Paid	d Emplo	yees,	,	
1	List all officers, directors, tr								
	(a) Name and address	'	<b>(b)</b> Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans deferred compensation	and (e	) Exper other a		
See	Additional Data Table		,	,					
_2	Compensation of five highes	t-paid er	nployees (other than t	hose included on line :			enter "	NONE	<u>."                                    </u>
(a)	Name and address of each empl	oyee paid	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e)	Expen		
	more than \$50,000		devoted to position	(-,,	plans and deferred compensation	0	ther al	lowanc	es
NON	E								
			1						
			1						
			1						
			1						
Tota	al number of other employees pa	id over \$5	0,000	·	· <b>•</b>				0
	·					Fo	rm <b>99</b>	0-PF	(2020)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO	ONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
<b>-</b>	
All other program-related investments. See instructions.	
3	4
	$\dashv$
Total. Add lines 1 through 3	0
	5 000 PE (2020)

2a |

2b

691

691

691

691

39,069

39,069

39,069

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O

2c

3

4

5

6

7

1a 1b

2

За 3h

4

5

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

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

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Tax on investment income for 2020 from Part VI, line 5. . . . . .

Income tax for 2020. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

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1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2021. Subtract

10 Analysis of line 9: a Excess from 2016.

**b** Excess from 2017.

c Excess from 2018.

d Excess from 2019.

e Excess from 2020.

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Part XIII	Undistributed Income (see instruc	ctions)			
		(a)	(b)	(c)	(d)

		Corpus	Years prior to 2019	2019	2020
1	Distributable amount for 2020 from Part XI, line 7	227,640			691
2	Undistributed income, if any, as of the end of 2020:				
а	Enter amount for 2019 only			0	
b	Total for prior years: 20, 20		0		
3	Excess distributions carryover, if any, to 2020:				
а	From 2015	3			
b	From 2016	2			
С	From 2017	2			
d	From 2018 94,62	<b>_</b>			
е	From 2019	7			
f	Total of lines 3a through e	474,115			
4	Qualifying distributions for 2020 from Part				
	XII, line 4: ▶ \$				
а	Applied to 2019, but not more than line 2a			0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2020 distributable amount				691
е	Remaining amount distributed out of corpus	38,378			
5	Excess distributions carryover applied to 2020.	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as	1			

	(Election required—see instructions)			
С	Treated as distributions out of corpus (Election required—see instructions)	0		
d	Applied to 2020 distributable amount			691
е	Remaining amount distributed out of corpus	38,378		
5	Excess distributions carryover applied to 2020.	0		0
	(If an amount appears in column (d), the same amount must be shown in column (a).)			
6	Enter the net total of each column as indicated below:			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	512,493		
L-	Duine vanue/ un distribute d'in source. Cubtus et			

d	Applied to 2020 distributable amount			691
е	Remaining amount distributed out of corpus	38,378		
5	Excess distributions carryover applied to 2020.	0		0
	(If an amount appears in column (d), the same amount must be shown in column (a).)			
6	Enter the net total of each column as indicated below:			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	512,493		
b	Prior years' undistributed income. Subtract line 4b from line 2b		0	
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0	
d	Subtract line 6c from line 6b. Taxable amount —see instructions		0	

lines 4d and 5 from line 1. This amount must be distributed in 2020			0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0		
<b>8</b> Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions)	113,213		
<b>9 Excess distributions carryover to 2021.</b> Subtract lines 7 and 8 from line 6a	399,280		

97,492 134,002

94,621

34,787

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

c Any submission deadlines:

factors:

		_

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Part XV Supplementary Informa	ation (continued)			
3 Grants and Contributions Paid	d During the Year or Appro	oved for Futur	e Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
<b>a</b> Paid during the year See Additional Data Table				
Total		<del></del>	▶ 3a	37,225
<b>b</b> Approved for future payment				,
,				
l				
Total			▶ 3b	0

Enter gross	s amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
<b>1</b> Progran	n service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
	<u>_</u>					
		<del>                                     </del>				
	and contracts from government agencies					
	ership dues and assessments					
3 Interes	st on savings and temporary cash nents					
	nds and interest from securities					
	ntal income or (loss) from real estate:					
	-financed property.					
	lebt-financed property	<u> </u>				
	nvestment income.					
	r (loss) from sales of assets other than					
invento	pry					
9 Net inc	come or (loss) from special events:					
	profit or (loss) from sales of inventory					
11 Other	revenue: a					
			0		0	0
13 Total.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	<b>.</b>	0
(See w	orksheet in line 13 instructions to verify calcu	llations.)				
Part XV	<u>.                                      </u>	_		· · ·		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's expression of the second sec					•
	instructions.)					

orm	990-PF	` '									Pa	ge <b>13</b>
	rt XVII	Exempt Organi	zations						nships With Nonc			
		ganization directly or in than section 501(c)(3)								501	Yes	No
аΤ	ransfers	from the reporting foun	dation to a n	oncha	ritable exe	empt organizat	tion o	f:				
(	<b>1)</b> Cash									1a(1)		No
(	2) Othe	r assets								. 1a(2)		No
<b>b</b> 0	ther trar	nsactions:										
(	1) Sales	s of assets to a nonchari	itable exempt	t orga	nization.					. 1b(1)		No
(	2) Purch	hases of assets from a r	oncharitable	exem	npt organiz	ation				. 1b(2)		No
(:	3) Rent	al of facilities, equipmer	nt, or other as	ssets.						. 1b(3)		No
(4	<b>4)</b> Reim	bursement arrangemen	ts							1b(4)		No
(!	<b>5)</b> Loan	s or loan guarantees.					•			. 1b(5)		No
-	•	rmance of services or m			_					1b(6)		No
	_	f facilities, equipment, n								1c		No
or ir	f the goo any tra	wer to any of the above ods, other assets, or ser nsaction or sharing arra	vices given b ngement, sho	y the ow in	reporting f column <b>(d</b>	oundation. If ) the value of	the fo	undation receiv	ed less than fair marke	t value		
(a) Li	ne No.	(b) Amount involved	(c) Name of	noncha	aritable exen	npt organization	1	(d) Description o	f transfers, transactions, a	nd sharing arra	ngemer	nts
							_					
							+-					
							+					
							-					
2a Is	the fou	ndation directly or indire	L activ affiliated	- with	or related	to one or m	ore ta	v-evemnt organ	izations			
		in section 501(c) (other	•		•	•			_	✓ No		
		complete the following s		. 501(	(0)(0)) 01 11							
D 11	163, 6	(a) Name of organization			(b	Type of organi	ization		(c) Description of	relationship		
		(,			,-	, .,,,			(-,			
c:_	of m	er penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co							ed on all info	rmatio	n of
Sig Her		*****				2021-03-06		*****		May the IRS d return	iscuss th	his
пеі	٠							_ )		with the prepa below	rer show	wn
	'	Signature of officer or t	rustee			Date		Title		(see instr.)	Yes [	□No
	1	Print/Type preparer's	name	Pren	arer's Sign	ature		Date	PT	TN		
		Transfer propares					ľ	Date	Check if self-		7602	
		LAWRENCE H MOH	ID CDA					2021 02 06	employed ▶ □	P0044	/603	
Pai	d	LAWKLINCE IT MOR	II. CI A					2021-03-06				
	parer		ER TILLY US	LLP					Fir	m's EIN ▶39	-08599	910
USE	Only		5 S 6TH ST 2	2300								
					FF402				Ph	one no. (612	3) 876-	4500
	MINI			MIN 2	55402				1	(		-

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred compensation

PRESIDENT

**DIRECTOR** 1.00

KYLE MANSFIELD

ROBERT BRUMMOND

250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401

250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401	1.00			
KARL HEINZERLING	VICE PRESIDENT	0	0	0
250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401	1.00			
PETER TORSETH	SECRETARY	0	0	0

250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401	1.00			
PETER TORSETH	SECRETARY	0	0	
250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401	1.00			

MINNEAPOLIS, MN 55401				
PETER TORSETH	SECRETARY	0	0	
250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401	1.00			
THOMAS PAHL	DIRECTOR	0	0	

PETER TORSETH	SECRETARY	0	0	0
250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401	1.00			
THOMAS PAHI	DIRECTOR	0	0	0

250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401	1.00	J J	J	0
THOMAS PAHL	DIRECTOR	0	0	0

250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401	1.00			
THOMAS PAHL	DIRECTOR	0	0	0
SEC MARQUETTE AVE C CTE 1300	1.00			

1111112) (1 0213,1111 33 101				
THOMAS PAHL	DIRECTOR	0	0	0
250 MARQUETTE AVE S STE 1200	1.00			

THOMAS PAHL	DIRECTOR	l o	l o	١
250 MARQUETTE AVE S STE 1200 MINNEAPOLIS, MN 55401	1.00			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

ALZHEIMER'S ASSOCIATION 225 N MICHIGAN AVE FL 17 CHICAGO, IL 60601	PC	DONATION IN MEMORY OF CLINTON ZOST	250
AMERICAN LIVER SOCIETY	PC	CONTRIBUTION TO AMERICAN	100

CHICAGO, IL 60601			
AMERICAN LIVER SOCIETY 39 BROADWAY SUITE 2700 NEW YORK, NY 10006	PC	CONTRIBUTION TO AMERICAN LIVER SOCIETY - IN MEMORY OF NHAN TO	100
BAR ASSOCIATION OF METROPOLITAN ST LOUIS 555 WASHINGTON AVENUE SUITE 100	NC	BAMSL SPONSORSHIP FOR WELL BEING POSTCARD	500

NEW YORK, NY 10006		NHAN TO	
BAR ASSOCIATION OF METROPOLITAN ST LOUIS 555 WASHINGTON AVENUE SUITE 100 ST LOUIS, MO 63101	NC	BAMSL SPONSORSHIP FOR WELL BEING POSTCARD	500

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

ST LOUIS, MO 63143

Total .

a Paid during the year			
BE THE MATCH300 E MILLER CT CASTLE ROCK, CO 80104	PC	2019 HEALING LITTLE HEARTS GALA	8,370
BOYS HOPE GIRLS HOPE 12120 STATE LINE RD 104	PC	BOYS HOPE GIRLS HOPE OF KANSAS CITY TRIVIA NIGHT	304

12120 STATE LINE RD 104 LEAWOOD, KS 66209		KANSAS CITY TRIVIA NIGHT	304
CASS COMMUNITY SOCIAL SERVICES INC	PC	2020 BLUE JEAN BALL	1,850

12120 STATE LINE RD 104 LEAWOOD, KS 66209		KANSAS CITY TRIVIA NIGHT	
CASS COMMUNITY SOCIAL SERVICES INC 2708 SUTTON BLVD	PC	2020 BLUE JEAN BALL	1,85

▶ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor			
a Paid during the year				
COATED IN LOVE		PC	GENERAL OPERATING GRANT	3,655

11500 LAKEVIEW LANE WEST MINNETONKA, MN 55305			
COMMUNITY ACTION PARTNERSHIP	PC	RAFFLE FOR GOOD	500

COMMUNITY ACTION PARTNERSHIP 1020 19TH STREET NW WASHINGTON, DC 20036	PC	RAFFLE FOR GOOD	500
EDWARDSVILLE NAACPPO BOX 12	PC	IL NAACP BLACK HISTORY ART	1.000

1020 19TH STREET NW WASHINGTON, DC 20036		NATTE FOR GOOD	300
EDWARDSVILLE NAACPPO BOX 12	PC	IL NAACP BLACK HISTORY ART	1,000

WASHINGTON, DC 20036			
EDWARDSVILLE NAACPPO BOX 12 EDWARDSVILLE, IL 62025	PC	IL NAACP BLACK HISTORY ART CONTEST	1,000

37,225

EDWARDSVILLE NAACPPO BOX 12	PC	IL NAACP BLACK HISTORY ART	1,00
EDWARDSVILLE, IL 62025		CONTEST	

EDWARDSVILLE, IL 62025		CONTEST	
EDWARDSVILLE NAACPPO BOX 12	PC	IL NAACP BLACK HISTORY ART	1

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year			
FARESTART700 VIRGINIA ST SEATTLE, WA 98101	PC	PROVIDE MEALS TO THOSE IN NEED & JOB TRAINING	125

111LE, WA 98101		NEED & JOB TRAINING
DING AMERICA NORTH CLARK STREET SUITE 700	PC	GENERAL OPERATING GRANT

or substantial contributor

Total .

FEEDING AMERICA 161 NORTH CLARK STREET SUITE 700 CHICAGO, IL 60601	PC	GENERAL OPERATING GRANT	

CHICAGO, IL 60601			
FOOD BACKPACKS 4 KIDSPO BOX 173	PC	PROVIDE MEALS TO FAMILIES	125

10,000

CHICAGO, IL 60001			
FOOD BACKPACKS 4 KIDSPO BOX 173	PC	PROVIDE MEALS TO FAMILIES	12
GIG HARBOR, WA 98335		OF FOUR	

FOOD BACKPACKS 4 KIDSPO BOX 173 GIG HARBOR, WA 98335	PC	PROVIDE MEALS TO FAMILIES OF FOUR	125

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
FOOTHILL UNITY CENTER 790 E CHESTNUT AVE	PC	GENERAL OPERATING GRANT	1,025

MONROVIA, CA 91016			
HENNEPIN COUNTY BAR FOUNDATION THIRD FLOOR CITY CENTER 600 NICOLLET MALL SUITE 380 MINNEAPOLIS, MN 55402	PC	SPONSORSHIP OF HCBF BAR BENEFIT	400

THIRD FLOOR CITY CENTER 600 NICOLLET MALL SUITE 380 MINNEAPOLIS, MN 55402		BENEFIT	
JESSIE'S HEART FOUNDATION 1217 KENSINGTON AVE GROSSE POINT PARK, MI 48230	PC	EMPTY BOWLS DETROIT - HEARTY SOUP SPONSOR	100

NICOLLET MALL SUITE 380 MINNEAPOLIS, MN 55402		BENEFII	
JESSIE'S HEART FOUNDATION 1217 KENSINGTON AVE GROSSE POINT PARK, MI 48230	PC	EMPTY BOWLS DETROIT - HEARTY SOUP SPONSOR	100

MINNEAPOLIS, MN 55402			ı
JESSIE'S HEART FOUNDATION 1217 KENSINGTON AVE GROSSE POINT PARK, MI 48230		EMPTY BOWLS DETROIT - HEARTY SOUP SPONSOR	100

Total		<b>.</b>	27.225
1217 KENSINGTON AVE		HEARTY SOUP SPONSOR	100

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

▶ 3a

37,225

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

Name and address (home or business)

CONCORD, CA 94520

a Paid during the year			
MAKE-A-WISH 7600 GRAND RIVER AVENUE SUITE 175 BRIGHTON, MI 48114	PC	DONATION TO MICHIGAN CHAPTER	575
MINNEAPOLIS SOUTHSIDE SINGERS 4029 28TH AVENUE S	PC	SHOW CHORUS GRANT	1,000

BRIGHTON, MI 40114			
MINNEAPOLIS SOUTHSIDE SINGERS 4029 28TH AVENUE S MINNEAPOLIS, MN 55406	PC	SHOW CHORUS GRANT	1,000
MONUMENT CRISIS CENTER 1990 MARKET STREET	PC	GENERAL OPERATING GRANT	725

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
NEW SHINING LIGHT COMMUNITY OUTREACH 740 BROADWAY		PC	CHRISTMAS GIVEAWAY, BENEFITTING A MADISON COUNTY COMMUNITY IN NEED	704

VENICE, IL 62090			
QUARTERBACKING CHILDREN'S HEALTH FOUNDATION 2019 4TH AVENUE NORTH SUITE 101 BIRMINGHAM, AL 35203	PC	MONDAY MORNING QUARTERBACK CLUB 2020 CAMPAIGN (JOHN SMYTH III)	250

QUARTERBACKING CHILDREN'S HEALTH FOUNDATION 2019 4TH AVENUE NORTH SUITE 101 BIRMINGHAM, AL 35203	-	MONDAY MORNING QUARTERBACK CLUB 2020 CAMPAIGN (JOHN SMYTH III)	25
PONALD MODONALD HOUSE CHARITIES	PC	DONATION MADE WITH SOURER	25

FOUNDATION 2019 4TH AVENUE NORTH SUITE 101 BIRMINGHAM, AL 35203		QUARTERBACK CLUB 2020 CAMPAIGN (JOHN SMYTH III)	
RONALD MCDONALD HOUSE CHARITIES 110 N CARPENTER ST	PC	DONATION MADE WITH SOUPER BOWL FUNDS	257

BIRMINGHAM, AL 35203		CAPITATON (JOHN SPITTITI)	
RONALD MCDONALD HOUSE CHARITIES 110 N CARPENTER ST CHICAGO. IL 606072101	PC	DONATION MADE WITH SOUPER BOWL FUNDS	257

▶ 3a

37,225

•			
RONALD MCDONALD HOUSE CHARITIES 110 N CARPENTER ST CHICAGO, IL 606072101	PC	DONATION MADE WITH SOUPER BOWL FUNDS	25

RUNALD MICDUNALD HOUSE CHARITIES	PC	DONATION MADE WITH SOUPER	
110 N CARPENTER ST		BOWL FUNDS	
CHICAGO, IL 606072101			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

37,225

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
SHERWOOD FOREST CAMP INC 3900 N LEAVITT ST	PC	2020 GALA - MAROON SPONSORSHIP	1,910

CHICAGO, IL 60618		ST STORESTEE	
ST PAUL BICYCLE RACING CLUB 1938 GRAND AVE ST PAUL, MN 55105	NC	SPONSORSHIP OF SPBRC JUNIORS FOR 2020	

1938 GRAND AVE ST PAUL, MN 55105	NC	JUNIORS FOR 2020	1,500
ST BENEDICT PREPARATORY SCHOOLS	PC	2020 GALA - MAROON	800

1938 GRAND AVE ST PAUL, MN 55105		JUNIORS FOR 2020	,
ST BENEDICT PREPARATORY SCHOOLS	PC	2020 GALA - MAROON	8

ST PAUL, MN 55105			
ST BENEDICT PREPARATORY SCHOOLS 500 N 5TH ST	PC	2020 GALA - MAROON SPONSORSHIP	800
MINNEAPOLIS MN 55401			

ST BENEDICT PREPARATORY SCHOOLS 500 N 5TH ST MINNEAPOLIS, MN 55401	2020 GALA - MAROON 800 SPONSORSHIP
--	---------------------------------------

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient

If recipient is an individual, show any relationship to status of contribution

Recipient

Recipient

Amount

37,225

▶ 3a

any foundation manager

or substantial contributor

Name and address (home or business)

KANSAS CITY, MO 64116

a Paid during the year			
ST LOUIS CHILDREN'S HOSPITAL FOUNDATION PO BOX 955423 ST LOUIS, MO 631955423	PC	KIDSTRUCTION WEEK	150
THE O'CONNOR HOUSEPO BOX 1061 CARMEL, IN 46082	PC	DONATION TO PROVIDE FOOD/SHELTER FOR WOMEN IN NEED	350
TWA MUSEUM INC10 RICHARDS RD 110	PC	GENERAL OPERATING GRANT	100

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

100

37,225

a Paid during the year			
UNITED WAY30 LAUREL STREET HARTFORD, CT 06106	PC	GOLD SPONSORSHIP	250

any foundation manager

or substantial contributor

Name and address (home or business)

801 S SPOEDE ROAD ST LOUIS, MO 631312699			
SCHOOL SCHOOL	' -	FORD	
I VILLA DUSCHESNE AND OAK HILL	I PC	I DONATION IN MEMORY OF ANNE I	

SCHOOL 801 S SPOEDE ROAD ST LOUIS, MO 631312699		FORD	
WI HUMANE SOCIETY	PC	GENERAL OPERATING GRANT	1

801 S SPOEDE ROAD ST LOUIS, MO 631312699		FORD	
WI HUMANE SOCIETY	PC	GENERAL OPERATING GRANT	1

801 S SPOEDE ROAD ST LOUIS, MO 631312699		

ST LOUIS, MO 631312699			
WI HUMANE SOCIETY	PC	GENERAL OPERATING GRANT	100

,			
WI HUMANE SOCIETY	PC	GENERAL OPERATING GRANT	100
4500 W WISCONSIN AVE			
MILWALKEE WI 53028			

WI HUMANE SOCIETY	PC	GENERAL OPERATING GRANT	
4500 W WISCONSIN AVE			
MILWAUKEE, WI 53028			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of

recinient

37,225

Name and address (home or business)	or substantial contributor	T COMPTONIC		
a Paid during the year				
WORLD CENTRAL KITCHEN		PC	PROVIDE MEALS TO THOSE IN	150

ORLD CENTRAL KITCHEN	PC	PROVIDE MEALS TO THOSE
5 NEW YORK AVE NW 6TH FLOOR		NEED IN AREAS AFFECTED
SHINGTON, DC 20001		NATURAL DISASTERS

any foundation manager

WASHINGTON, DC 20001		I	NATURAL DISASTERS	
655 NEW YORK AVE NW 6TH FLOOR	ľ		NEED IN AREAS AFFECTED BY	
WORLD CENTRAL KITCHEN	P	PC I	PROVIDE MEALS TO THOSE IN	

WORLD CENTRAL KITCHEN	I PC	١	PROVIDE MEALS TO THOSE IN	1
655 NEW YORK AVE NW 6TH FLOOR			NEED IN AREAS AFFECTED BY	
WASHINGTON, DC 20001			NATURAL DISASTERS	

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Da	ta - DLN: 93491068004211				
TY 2020 Accounting Fees Schedule							
Name: FOLEY & MANSFIELD CHARITABLE FOUNDATION EIN: 27-0557246							
Category	Amou	unt	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES		1,575		0	1,575		

Note: To capture the full content of this document, please select landscape mode (11" $ imes$ 8.5") when printing.										
TY 2020 Expenditure Responsibility Statement										
Name: FOLEY & MANSFIELD CHARITABLE FOUNDATION										
<b>EIN:</b> 27-0557246										
Grantee's Name	Grantee's Address	Grant Date	Grant	Grant Purpose	Amount Expended	Any Diversion By	Dates of Reports	Date of	Results of	

DLN: 93491068004211

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
THE BAR ASSOCIATION OF METROPOLITAN ST LOUIS	555 WASHINGTON AVENUE SUITE 100 ST LOUIS, MO 63101	2020-12-07	500	BAMSL SPONSORSHIP FOR WELL BEING POSTCARD	500	NONE	NONE		
SAINT PAUL BICYCLE RACING CLUB	1938 GRAND AVE ST PAUL, MN 55105	2020-02-24	1,500	SPONSORSHIP OF SPBRC JUNIORS FOR 2020	1,500	NONE	NONE		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491068004211				
TY 2020 Other Expenses Schedule								
Name:	Name: FOLEY & MANSFIELD CHARITABLE FOUNDATION							
EIN:	27-0557246							
Other Expenses Schedule				4				
Description	Revenue and	Net Investment	Adjusted Net	Disbursements for				

Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	218	0		218

**BUSINESS REGISTRATION FEES** 

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DI	LN: 93491068004211			
TY 2020 Other Liabilities Schedule							
Name: FOLEY & MANSFIELD CHARITABLE FOUNDATION EIN: 27-0557246							
Description		Beginning of Year - Book Value	End of Year - Book Value				
CHARITABLE FOUNDATION CREDIT CAR	D		50	13,825			

efile GRAPHIC print - De	O NOT PROCESS As Filed Data	-		DLN: 93491068004211		
Schedule B	Schee	dule of Contributors		OMB No. 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF. ► Go to <u>www.irs.gov/Form990</u> for the latest information.					
Name of the organization FOLEY & MANSFIELD CHAR	RITABLE FOUNDATION		Employer i	identification number		
Organization type (chec			27-0557246	5		
Organization type (onec	.k 0116).					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number	) organization				
	4947(a)(1) nonexempt ch	naritable trust <b>not</b> treated as a pr	ivate foundation			
	☐ 527 political organization					
Form 990-PF	✓ 501(c)(3) exempt private	foundation				
	4947(a)(1) nonexempt ch	naritable trust treated as a private	e foundation			
	☐ 501(c)(3) taxable private	foundation				
	tion filing Form 990, 990-EZ, or 990 property) from any one contributor.					
Special Rules						
under sections 50 received from any	on described in section 501(c)(3) fil 9(a)(1) and 170(b)(1)(A)(vi), that c y one contributor, during the year, t e 1h, or (ii) Form 990-EZ, line 1. Co	hecked Schedule A (Form 990 o otal contributions of the greater o	or 990-EZ), Part II, line 13	, 16a, or 16b, and that		
during the year, to	on described in section 501(c)(7), (otal contributions of more than \$1,0 he prevention of cruelty to children	000 <i>exclusively</i> for religious, char	ritable, scientific, literary,			
during the year, of If this box is check purpose. Don't co	on described in section 501(c)(7), (ontributions exclusively for religiou ked, enter here the total contribution implete any of the parts unless the lete, etc., contributions totaling \$5,00	s, charitable, etc., purposes, but ons that were received during the <b>General Rule</b> applies to this org	no such contributions tot year for an <i>exclusively</i> re panization because it rece	taled more than \$1,000. religious, charitable, etc., eived <i>nonexclusively</i>		
990-EZ, or 990-PF), but i	n that isn't covered by the General l t <b>must</b> answer "No" on Part IV, line art I, line 2, to certify that it doesn't r	e 2, of its Form 990; or check the	box on line H of its Form	ırm 990, ı 990-EZ		
For Paperwork Reduction Agency Form 990, 990-EZ, or 990	ct Notice, see the Instructions -PF.	Cat. No. 30613X	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2020)		

Employer identification number

pace is needed.	
(c) Total contributions	(d) Type of contribution
\$ 20,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(c) Total contributions	(d) Type of contribution
\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
	(c) Total contributions  (c) Total contributions