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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

2008

Department of the Treasury
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

For the 2008 calendar year, or tax year beginning Jul 1, 2008, and ending Jun 30, 2009

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending	Please use IRS label or print or type. See specific instructions.	C Name of organization Big Shoulders Fund		D Employer identification number 36-3490557
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 309 W. Washington 550		E Telephone number (312) 751-8337
		City, town or country State ZIP code + 4 Chicago IL 60606		G Gross receipts \$ 14,485,115.
		F Name and address of principal officer James J. O'Connor 309 W. Washington Chicago IL 60606		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☒ No If 'No,' attach a list (see instructions)
I Tax-exempt status ☒ 501(c) (3) (insert no) ☐ 4947(a)(1) or ☐ 527				
J Website: www.bigshouldersfund.org				
K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other				
L Year of formation 1986 M State of legal domicile IL				

Part I Summary																																																									
Activities & Governance	1 Briefly describe the organization's mission or most significant activities 1. Big Shoulders Fund provides funds to support Catholic schools who serve the poor and disadvantaged in the neediest parts of inner-city Chicago. Through strategic programs & investments, BSF ensures access to quality education for nearly 25,000 children, of whom 80% are minorities, 60% are living in poverty and a third are not Catholic. BSF provides funds for scholarships, capital and programmatic enhancements to improve the educational environment.																																																								
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets																																																								
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Revenue	5 Total number of employees (Part V, line 2a) 5 14																																																								
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Part II Signature Block	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
Sign Here Signature of officer James J. O'Connor	Date 2-10-2010
Type or print name and title James J. O'Connor Co-Chairman	

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed ☐	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4		EIN	Phone no
	BIG SHOULDERS FUND 309 W WASHINGTON ST STE 550 CHICAGO IL 60606-3206			

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☒ No

Part III Statement of Program Service Accomplishments (see instructions)**1** Briefly describe the organization's mission:

The Big Shoulders Fund is organized for the purpose of developing, managing,
and distributing funds for the educational system of the Archdiocese of Chicago.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If 'Yes,' describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code _____) (Expenses \$ 4,903,070. including grants of \$ 5,222,517.) (Revenue \$ 0.)

Administer over 30 distinct scholarship programs that include
mentoring, enrichment and other support activities.
Scholarships were awarded to 4643 students at 118 schools to
enable them to attend Catholic schools. - See supporting
schedule reconciling grant expenses and net expense.

4b (Code _____) (Expenses \$ 2,639,615. including grants of \$ 2,684,002.) (Revenue \$ 0.)

Distributed grants to 46 schools as part of the Patrons Program,
an adopt-a-school Program which pairs financial resources with
business expertise at over 63 schools. - See supporting
schedule reconciling grant expenses and net expense.

4c (Code _____) (Expenses \$ 3,806,164. including grants of \$ 4,233,581.) (Revenue \$ 0.)

Distribute grants and support to 93 inner-city Catholic schools to ensure schools can continue to operate effectively and
efficiently. Support includes operating grants that enable schools to continue to be accessible to students who are 80% minority,
nearly 60% living in poverty as measured by the federally-funded free and reduced lunch program and 32% are not Catholic. In
addition, Big Shoulders administers over 20 programs in 50 schools involving over 700 teachers to improve instruction and
learning through professional development, graduate level course work and access to new technology. Support innovative,
measurable outcomes in before and after school programming in 30 elementary schools whose participants have shown a one
three point improvement on standardized tests over counterparts not participating regularly in the program. Provide access to
hearing and vision screening for nearly 6,000 students and follow up care. Provide a variety of other needed capital and
programmatic support to ensure a safe, effective learning environment for nearly 25,000 students.
- See supporting schedule reconciling grant expenses and net expense.

4d Other program services (Describe in Schedule O.)

(Expenses \$ 1,639. including grants of \$ 594,873.) (Revenue \$ 0.)

4e Total program service expenses ► \$ 11,350,488. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		X
5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	X	
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U S ?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If 'Yes,' complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	X	
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	X	
23 Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,' go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I		X
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III		X

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Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If 'Yes,' complete Schedule L, Part IV</i>	28a	X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b	X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37	X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.		
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions).	X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
b If 'Yes,' enter the name of the foreign country: <u>Cayman Islands</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a Did the organization solicit any contributions that were not tax deductible?		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year.		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?		X
b Did the organization make any distribution to a donor, donor advisor, or related person?		X
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12.		
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11 Section 501(c)(12) organizations. Enter:		
a Gross income from other members or shareholders.		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.		

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Form 990 (2008)

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**Section A. Governing Body and Management**

For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body		
1b Enter the number of voting members that are independent		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?		X
14 Does the organization have a written document retention and destruction policy?		X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?	X	
b Other officers or key employees of the organization?	X	
Describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed ► Illinois

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► Joshua Hale 309 W. Washington, Suite 550, Chicago, IL 60606 (312) 751-8337

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) or more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Clarisol Duque Director	1.00	X						0.	0.	0.
Jennifer Fortner Director	1.00	X						0.	0.	0.
Robert Gordon Director	0.25	X						0.	0.	0.
Paul Bauch Director	0.25	X						0.	0.	0.
William Bax Director	0.25	X						0.	0.	0.
John Berzanskis Director	1.50	X						0.	0.	0.
Patricia Besser Director	2.75	X						0.	0.	0.
John Betterman Director	0.25	X						0.	0.	0.
Charles Bidwill Jr. Director	0.25	X						0.	0.	0.
Andrew Block Director	1.00	X						0.	0.	0.
Charles Bobrinskoy Director	0.25	X						0.	0.	0.
James Boris Director	0.25	X						0.	0.	0.
Terence Brennan Director	0.25	X						0.	0.	0.
John Buck II Director, Exec Committee	1.00	X						0.	0.	0.
James Burns Director	0.25	X						0.	0.	0.
Michael Cannizzaro Director	0.25	X						0.	0.	0.
Frank Clark Director	0.25	X						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont.)

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Elizabeth Cole Director	0.25	X						0.	0.	0.
Michael Colleran Director	1.00	X						0.	0.	0.
James Compton Director, Exec Committee	1.00	X						0.	0.	0.
Frank Considine Director, Exec Committee	1.75	X						0.	0.	0.
Thomas Gramatis Director	0.25	X						0.	0.	0.
Mary Brian Costello Director, Exec Committee	1.00	X						0.	0.	0.
Gary Coughlan Director	0.25	X						0.	0.	0.
Lori Dawson Director	1.75	X						0.	0.	0.
Lester Crown Director, Exec Committee	1.00	X						0.	0.	0.
Daniel Curley Director	0.25	X						0.	0.	0.
William Daley Director	0.25	X						0.	0.	0.
Craig Dean Director	0.25	X						0.	0.	0.
Thomas Demetrio Director	0.25	X						0.	0.	0.
1 b Total								158,243.	0.	17,524.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶ 1

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

	Yes	No
3		X
4	X	
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of Services	(C) Compensation
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶ 0		

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a 2,820.					
	b Membership dues	1b 0.					
	c Fundraising events	1c 455,270.					
	d Related organizations	1d 0.					
	e Government grants (contributions)	1e 0.					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 10,004,469.					
	g Noncash contribns included in lns 1a-1f	\$ 454,028.					
	h Total. Add lines 1a-1f		10,462,559.				
PROGRAM SERVICE REVENUE	Business Code						
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f							
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		461,816.	0.	0.	461,816.	
	4 Income from investment of tax-exempt bond proceeds		0.	0.	0.	0.	
	5 Royalties		0.	0.	0.	0.	
	6a Gross Rents	(i) Real 0. (ii) Personal 0.					
	b Less rental expenses	0. 0.					
	c Rental income or (loss)	0. 0.					
	d Net rental income or (loss)		0.	0.	0.	0.	
	7a Gross amount from sales of assets other than inventory	(i) Securities 4,085,274. (ii) Other					
	b Less cost or other basis and sales expenses	4,505,738.					
	c Gain or (loss)	-420,464.					
	d Net gain or (loss)		-420,464.	0.	0.	-420,464.	
	8a Gross income from fundraising events (not including \$ 455,270. of contributions reported on line 1c) See Part IV, line 18	a 256,304.					
	b Less: direct expenses	b 172,425.					
	c Net income or (loss) from fundraising events		83,879.	0.	0.	83,879.	
	9a Gross income from gaming activities See Part IV, line 19	a 42,295.					
	b Less: direct expenses	b 16,899.					
	c Net income or (loss) from gaming activities		25,396.	0.	0.	25,396.	
	10a Gross sales of inventory, less returns and allowances	a 0.					
	b Less: cost of goods sold	b 0.					
	c Net income or (loss) from sales of inventory		0.	0.	0.	0.	
	Miscellaneous Revenue		Business Code				
	11a Agency collections	900099	-823,133.	-823,133.	0.	0.	
	b						
c							
d All other revenue							
e Total. Add lines 11a-11d		-823,133.					
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		9,790,053.	-823,133.	0.	150,627.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	7,462,088.	7,462,088.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	5,272,885.	5,272,885.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0.	0.		
4 Benefits paid to or for members	0.	0.		
5 Compensation of current officers, directors, trustees, and key employees	190,717.	75,025.	37,512.	78,180.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))	0.	0.	0.	0.
7 Other salaries and wages	576,926.	318,242.	185,143.	73,541.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	15,891.	9,090.	4,647.	2,154.
9 Other employee benefits	51,007.	27,889.	16,648.	6,470.
10 Payroll taxes	52,975.	27,363.	15,518.	10,094.
11 Fees for services (non-employees)				
a Management	0.	0.	0.	0.
b Legal	2,994.	0.	2,994.	0.
c Accounting	46,318.	0.	46,318.	0.
d Lobbying	0.	0.	0.	0.
e Prof fundraising svcs. See Part IV, In 17	0.			0.
f Investment management fees	102,741.	0.	102,741.	0.
g Other	178,718.	121,209.	36,463.	21,046.
12 Advertising and promotion	42,453.	27,953.	0.	14,500.
13 Office expenses	131,128.	22,866.	26,693.	81,569.
14 Information technology	38,067.	11,732.	12,785.	13,550.
15 Royalties	0.	0.	0.	0.
16 Occupancy	83,659.	43,213.	24,506.	15,940.
17 Travel	29,474.	18,597.	7,454.	3,423.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.	0.	0.	0.
19 Conferences, conventions, and meetings	14,434.	0.	14,314.	120.
20 Interest	0.	0.	0.	0.
21 Payments to affiliates	0.	0.	0.	0.
22 Depreciation, depletion, and amortization	14,418.	5,207.	1,100.	8,111.
23 Insurance	6,682.	3,452.	1,957.	1,273.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>Credit Card Fees</u>	15,492.	0.	0.	15,492.
b <u>Bad Debts</u>	49,197.	0.	49,197.	0.
c <u>Food & Meals</u>	43,302.	14,715.	19,228.	9,359.
d <u>Agency Expenses</u>	-2,116,596.	-2,111,149.	-5,447.	0.
e <u>Miscellaneous</u>	6,089.	111.	4,405.	1,573.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	12,311,059.	11,350,488.	604,176.	356,395.
26 Joint Costs. Check here ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

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Form 990 (2008)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing	34,453.	1	50,440.
	2 Savings and temporary cash investments	9,511,421.	2	6,841,495.
	3 Pledges and grants receivable, net	6,062,259.	3	6,289,279.
	4 Accounts receivable, net	0.	4	0.
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	0.	5	0.
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0.	6	0.
	7 Notes and loans receivable, net	0.	7	0.
	8 Inventories for sale or use	0.	8	0.
	9 Prepaid expenses and deferred charges	954.	9	1,478.
	10a Land, buildings, and equipment — cost basis	10a 89,190.		
	b Less accumulated depreciation. Complete Part VI of Schedule D	10b 25,713.	10c	63,477.
	11 Investments — publicly-traded securities	15,018,661.	11	11,401,366.
	12 Investments — other securities. See Part IV, line 11	22,715,386.	12	17,667,233.
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	8,660.	15	3,253.
16 Total assets. Add lines 1 through 15 (must equal line 34)	53,396,821.	16	42,318,021.	
LIABILITIES	17 Accounts payable and accrued expenses	58,531.	17	69,449.
	18 Grants payable	4,833,624.	18	3,667,903.
	19 Deferred revenue	269,895.	19	292,855.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties		23	0.
	24 Unsecured notes and loans payable	0.	24	0.
	25 Other liabilities. Complete Part X of Schedule D	0.	25	
	26 Total liabilities. Add lines 17 through 25	5,162,050.	26	4,030,207.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets	31,533,161.	27	18,295,243.
	28 Temporarily restricted net assets	12,211,608.	28	14,847,782.
	29 Permanently restricted net assets	4,490,002.	29	5,144,789.
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances.	48,234,771.	33	38,287,814.
	34 Total liabilities and net assets/fund balances	53,396,821.	34	42,318,021.

Part XI Financial Statements and Reporting

- 1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If 'Yes,' did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

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Form 990 (2008)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)	6,484,443.	8,781,465.	9,657,457.	12,492,401.	10,462,559.	47,878,325.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf	0.	0.	0.	0.	0.	0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.	0.	0.	0.	0.	0.	0.
4 Total. Add lines 1-3	6,484,443.	8,781,465.	9,657,457.	12,492,401.	10,462,559.	47,878,325.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						5,391,857.
6 Public support. Subtract line 5 from line 4						42,486,468.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	6,484,443.	8,781,465.	9,657,457.	12,492,401.	10,462,559.	47,878,325.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	836,448.	1,646,137.	2,101,645.	875,237.	461,816.	5,921,283.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	22,210.	50,695.	384.	120,046.	109,275.	302,610.
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						54,102,218.
12 Gross receipts from related activities, etc. (see instructions)					12	0.

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	78.53%
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	76.26%

16a 33-1/3 support test – 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☒

b 33-1/3 support test – 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐

17a 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ☐

b 10%-facts-and-circumstances test – 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33-1/3 support tests – 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization. ► ☐

b 33-1/3 support tests – 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization. ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ► ☐

Part IV	Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)
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[illegible]

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements****Attach to Form 990. To be completed by organizations that
answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**

OMB No 1545-0047

2008**Open to Public
Inspection**

Name of the organization

Big Shoulders Fund

Employer identification number

36-3490557

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if
the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		☐ Yes ☐ No

Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or pleasure)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of certified historic structure
☐ Preservation of open space	

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets
Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Trust, Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV

Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	32,017,149.				
b Contributions	39,824.				
c Investment earnings or losses	-6,205,517.				
d Grants or scholarships	412,714.				
e Other expenditures for facilities and programs	1,214,798.				
f Administrative expenses	0.				
g End of year balance	24,223,944.				

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ 69.00 %
 b Permanent endowment ▶ 31.00 %
 c Term endowment ▶ 0.00 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land	0.	0.		0.
b Buildings	0.	0.	0.	0.
c Leasehold improvements	0.	0.	0.	0.
d Equipment	0.	89,190.	25,713.	63,477.
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c))				63,477.

BAA

Schedule D (Form 990) 2008

Part VII	Investments—Other Securities See Form 990, Part X, line 12.
-----------------	--

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Private Advisors Stable Value Fund	3,049,080.	FMV
Raptor Private Holdings	338,857.	FMV
Wellington CTF Research Equity	6,610,609.	FMV
Davidson Kempner Inst Partners	2,096,574.	FMV
Cambrian Capital	612,405.	FMV
Palo Alto Healthcare	876,470.	FMV
Viking Global Equities	2,161,056.	FMV
Newport Asia Inst Fund	943,194.	FMV
Pequot Endowment Fund	978,988.	FMV
Total. (Column (b) should equal Form 990 Part X, col (B) line 12.)	17,667,233.	

Part VIII Investments—Program Related (See Form 990, Part X, line 13)

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. <i>Column (b) (should equal Form 990, Part X, Col (B) line 13.)</i> ▶		

Part IX	Other Assets (See Form 990, Part X, line 15)
----------------	---

(a) Description	(b) Book value
Accrued Interest Income	3,253.
Miscellaneous Receivables	0.
Total. <i>Column (b) Total (should equal Form 990, Part X, col (B), line 15)</i>	3,253.

Part X	Other Liabilities (See Form 990, Part X, line 25)
---------------	--

(a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. Column (b) Total (should equal Form 990, Part X, col. (B) line 25)	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	9,790,053.
2	Total expenses (Form 990, Part IX, column (A), line 25)	12,311,059.
3	Excess or (deficit) for the year Subtract line 2 from line 1	-2,521,006.
4	Net unrealized gains (losses) on investments	-7,425,951.
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net). Add lines 4-8	-7,425,951.
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	-9,946,957.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	2,241,450.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-7,425,951.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-7,425,951.
3	Subtract line 2e from line 1	3	9,667,401.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	102,741.
b	Other (Describe in Part XIV)	4b	19,911.
c	Add lines 4a and 4b	4c	122,652.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	9,790,053.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	12,188,407.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	12,188,407.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	102,741.
b	Other (Describe in Part XIV)	4b	19,911.
c	Add lines 4a and 4b	4c	122,652.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	12,311,059.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Pt V Line 4 Donor endowment funds are used as instructed by the donor, which includes scholarships, programs, and other expenses as needed by the Fund. Earnings on funds designated by the Board to act as endowments are used to pay the Fund's administrative expenses, which may include program, management, or fund-raising expenses.

Pt X Not applicable

Pt XII Line 4b Fund-raising expenses netted against revenue on financial statements

Pt XIII Line 4b Fund-raising expenses netted against revenue on financial statements

Part XIV Supplemental Information *(continued)*

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1 Golf Outing (event type)	(b) Event #2 Social Event (event type)	(c) Other Events 2 (total number)	(d) Total Events (Add col. (a) through col. (c))
1	Gross receipts	618,362.	44,183.	46,351.	708,896.
2	Less: Charitable contributions	385,797.	29,983.	37,771.	453,551.
3	Gross revenue (line 1 minus line 2)	232,565.	14,200.	8,580.	255,345.
DIRECT EXPENSES	4	Cash prizes	0.	0.	0.
	5	Non-cash prizes	0.	0.	0.
	6	Rent/facility costs	0.	5,875.	5,875.
	7	Other direct expenses	142,126.	23,753.	165,879.
	8	Direct expense summary Add lines 4- through 7 in column (d)			171,754.
	9	Net income summary Combine lines 3 and 8 in column (d)			83,591.

Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
1	Gross revenue	0.	0.	42,295.	42,295.
DIRECT EXPENSES	2	Cash prizes	0.	16,504.	16,504.
	3	Non-cash prizes	0.	0.	0.
	4	Rent/facility costs	0.	0.	0.
	5	Other direct expenses	0.	395.	395.
	6	Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☒ No	
	7	Direct expense summary Add lines 2 through 5 in column (d)			16,899.
	8	Net gaming income summary Combine lines 1 and 7 in column (d)			25,396.

9 Enter the state(s) in which the organization operates gaming activities: Illinois

a Is the organization licensed to operate gaming activities in each of these states?

b If 'No,' Explain

YES NO

9a X

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If 'Yes,' Explain

10a X

11 Does the organization operate gaming activities with nonmembers?

11 X

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

12 X

13 Indicate the percentage of gaming activity operated in**a** The organization's facility**13a** 0.00 %**b** An outside facility**13b** 100.00 %**14** Provide the name and address of the person who prepares the organization's gaming/special events books and recordsName ▶ Joshua HaleAddress: ▶ 309 W. Washington, Suite 550 Chicago, IL 60606**15a** Does the organization have a contact with a third party from whom the organization receives gaming revenue?**15a**

X

b If 'Yes,' enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____**c** If 'Yes,' enter name and address

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?**17a**

X

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year. ▶ \$ _____

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

Big Shoulders Fund

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<u>Academy of Our Lady</u>							
<u>510 Grand Ave</u>							
<u>Waukegan IL 60085</u>	<u>47-0955784</u>	<u>501c3</u>	<u>30,000.</u>				<u>OP</u>
<u>Academy of St Benedict</u>							
<u>6020 S Laflin</u>							
<u>Chicago IL 60636</u>	<u>36-2171119</u>	<u>501c3</u>	<u>197,410.</u>				<u>OP PP ED</u>
<u>Annunciata School</u>							
<u>3750 E 112th St</u>							
<u>Chicago IL 60617</u>	<u>36-2170752</u>	<u>501c3</u>	<u>119,283.</u>				<u>OP PP LD</u>
<u>Chicago Jesuit Academy</u>							
<u>5058 W Jackson Blvd</u>							
<u>Chicago IL 60644</u>	<u>20-2091040</u>	<u>501c3</u>	<u>25,855.</u>				<u>OP HC</u>
<u>Children of Peace/Holy Tr</u>							
<u>1900 W Taylor St</u>							
<u>Chicago IL 60612</u>	<u>36-2212711</u>	<u>501c3</u>	<u>140,788.</u>				<u>OP PP LD</u>
<u>Christ the King Jesuit</u>							
<u>5058 W Jackson Blvd</u>							
<u>Chicago IL 60644</u>	<u>26-0556958</u>	<u>501c3</u>	<u>25,000.</u>				<u>OP</u>
<u>Christo Rey High School</u>							
<u>1852 W 22nd Place</u>							
<u>Chicago IL 60608</u>	<u>36-4067306</u>	<u>501c3</u>	<u>17,855.</u>				<u>CAP PD OP</u>
<u>Epiphany School</u>							
<u>4223 W 25th St</u>							
<u>Chicago IL 60623</u>	<u>36-2412597</u>	<u>501c3</u>	<u>196,696.</u>				<u>OP PD LD</u>

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

83
0

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

TEEA3901 12/19/08

Schedule I (Form 990) 2008

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization		Employer identification number					
Big Shoulders Fund		36-3490557					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Hales Franciscan High Sch 4930 S Cottage Grove Ave Chicago IL 60615	36-3885315	501c3	84,000.				OP PD CAP
Holy Angels School 750 E 40th St Chicago IL 60653	36-2747560	501c3	32,106.				OP CAP MAR
Holy Trinity High School 1443 W Division St Chicago IL 60642	36-2171703	501c3	127,500.				OP PD
Immaculate Conception Sch 8739 S Exchange Chicago IL 60617	36-3310936	501c3	51,145.				OP LD ED
Josephinum Academy 1501 N Oakley Chicago IL 60622	36-2167764	501c3	25,125.				PD ED MAR
Maria High School 6727 S California Ave Chicago IL 60629	36-2229651	501c3	58,005.				OP PD MAR
Maternity BVM School 1537 N Lawndale Chicago IL 60651	36-2171722	501c3	100,122.				OP PP HC
Mount Carmel High School 6410 S Dante Avenue Chicago IL 60637	36-2171161	501c3	5,800.				OP PD MAR
Nativity BVM School 6820 S Washtenaw Ave Chicago IL 60629	36-2170879	501c3	79,845.				OP PD LD
2 Enter total number of Section 501(c)(3) and government organizations							
3 Enter total number of other organizations							

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization		Employer identification number					
Big Shoulders Fund		36-3490557					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Notre Dame High School fo 3000 N Mango Ave Chicago IL 60634	36-2235162	501c3	29,000.				OP PD MAR
Our Lady of Grace School 2446 N Ridgeway Ave Chicago IL 60647	36-2170886	501c3	137,999.				OP PP HC
Our Lady of Guadalupe Sch 9050 S Burley Ave Chicago IL 60617	36-2743254	501c3	116,167.				OP PP LD
Our Lady of Tepeyac Elem 2235 S Albany Chicago IL 60623	36-3409095	501c3	101,561.				OP ED PP
Our Lady of the Gardens 13300 S Langley Chicago IL 60827	not avl	501c3	26,442.				OP
Our Lady of the Snows Sch 4810 S Leamington Ave Chicago IL 60638	36-2401758	501c3	60,577.				OP PP HC
St Agatha Catholic Academ 3151 W Douglas Blvd Chicago IL 60623	36-2358084	501c3	162,491.				OP PP PD
San Miguel School 1949 W 48th St Chicago IL 60609	36-4378726	501c3	133,602.				ED PP PD
Santa Lucia School 3017 S Wells Chicago IL 60616	36-2171069	501c3	44,647.				PP ED
2 Enter total number of Section 501(c)(3) and government organizations							
3 Enter total number of other organizations							

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Big Shoulders Fund

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St Agnes of Bohemia School 2643 S Central Park Ave Chicago IL 60623	36-3552287	501c3	111,632.				OP LD HC
St Ailbe School 9037 S Harper Ave Chicago IL 60619	36-2170926	501c3	36,192.				OP
St Angela School 1332 N Massasoit Avenue Chicago IL 60651	36-4091553	501c3	208,583.				OP LD PP
St Ann School 2211 W 18th Pl Chicago IL 60608	36-2284297	501c3	103,544.				OP, PP, HC
St Barbara School 2867 S Throop St Chicago IL 60608	36-2170943	501c3	24,832.				OP, PD, ED
St Bartholomew School 4941 W Patterson Ave Chicago IL 60641	36-2170946	501c3	16,964.				OP
St Benedict High School 3900 N Leavitt St Chicago IL 60618	36-2251918	501c3	20,500.				OP PD
St Bruno School 4839 S Harding Ave Chicago IL 60632	36-2170961	501c3	25,655.				OP HC
St Catherine of Siena, St 27 Washington Oak Park IL 60302	36-2170969	501c3	144,178.				OP PP PD

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

▶ Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

36-3490557

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Big Shoulders Fund

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I.)

► Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

Employer identification number

36-3490557

OMB No 1545-0047

2008

Open to Public
Inspection

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St Columbanus School 7120 S Calumet Ave Chicago IL 60619	36-2170979	501c3	154,352.				OP PP
St Dorothy School 7740 S Eberhart Ave Chicago IL 60619	36-2249880	501c3	118,317.				PP ED MAR
St Elizabeth School 4052 S Wabash Ave Chicago IL 60653	36-2170991	501c3	90,044.				OP PP ED
St Ethelreda School 8734 S Paulina Chicago IL 60620	36-2182112	501c3	78,745.				PP
St Ferdinand School 3131 N Mason Ave Chicago IL 60634	36-2192835	501c3	59,953.				PD HC
St Florian School 13110 S Baltimore Ave Chicago IL 60633	36-2170998	501c3	63,447.				OP HC
St Francis DeSales High S 10155 S Ewing Ave Chicago IL 60617	36-2435876	501c3	258,393.				OP MAR PP
St Gabriel School 607 W 45th St Chicago IL 60609	36-2707503	501c3	45,620.				PP HC
St Gall School 5515 S Sawyer Ave Chicago IL 60629	36-2704905	501c3	79,693.				PP HC MAR

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization		Employer identification number					
Big Shoulders Fund		36-3490557					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St Genevieve School 4854 W Montana St Chicago IL 60639	36-2171008	501c3	105,898.				OP PP LD
St Gregory High School 1677 W Bryn Mawr Ave Chicago IL 60660	36-2349616	501c3	141,724.				OP MAR
St Helen School 2347 W Augusta Blvd Chicago IL 60622	36-2373447	501c3	165,930.				OP PP LD
St Helena of the Cross Sc 10115 S Parnell Ave Chicago IL 60628	36-2811215	501c3	42,375.				OP PP
St Hyacinth School 3640 W Wolfram St Chicago IL 60618	36-2171020	501c3	75,718.				OP PP
St John Berchmans School 2511 W Logan Blvd Chicago IL 60647	36-2171034	501c3	197,565.				OP PP LD
St John DeLaSalle Academy 10212 S Vernon Ave Chicago IL 60628	36-2171032	501c3	102,473.				OP PP LD
St Ladislaus School 3330 N Lockwood Ave Chicago IL 60641	36-2171059	501c3	52,510.				PP HC
St Malachy School 2252 W Washington Blvd Chicago IL 60612	36-4091553	501c3	123,961.				OP PP LD
2 Enter total number of Section 501(c)(3) and government organizations 3 Enter total number of other organizations							

SCHEDULE I-1
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization		Employer identification number					
Big Shoulders Fund		36-3490557					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St Margaret of Scotland S 9833 S Throop St Chicago IL 60643	36-2367986	501c3	167,002.				PP PD ED
St Mary of Czestochowa 3010 S 48th Ct Cicero IL 60804	36-2171075	501c3	10,000.				OP
St Martin DePorres High S 501 S Martin Luther King Waukegan IL 60085	42-1597059	501c3	25,000.				OP
St Mary of the Angels Sch 1810 N Hermitage Chicago IL 60622	36-2171072	501c3	98,010.				OP PP ED
St Mary of the Lake Schoo 1026 W Buena Ave Chicago IL 60613	36-2171076	501c3	43,768.				PP PD ED
St Matthias/Transfigurati 4910 N Claremont Chicago IL 60625	36-2171089	501c3	48,798.				OP PP ED
St Michael School 8231 S Shore Drive Chicago IL 60617	36-2171093	501c3	53,772.				OP
St Nicholas of Tolentine 3741 W 62nd St Chicago IL 60629	36-2182132	501c3	18,623.				LD HC ED
St Nicholas Ukrainian Cat 2200 W Rice St Chicago IL 60622	13-1026995	501c3	35,555.				PP

2 Enter total number of Section 501(c)(3) and government organizations
3 Enter total number of other organizations

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization		Employer identification number					
Big Shoulders Fund		36-3490557					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St Paul/Our Lady of Vilna 2114 W 22nd Pl Chicago IL 60608	36-2258528	501c3	121,900.				OP PP HC
St Philip Neri School 2110 E 72nd St Chicago IL 60649	36-2171115	501c3	94,129.				OP PP PD
St Pius V School 1919 S Ashland Ave Chicago IL 60608	36-2240477	501c3	120,322.				OP PP ED
St Procopius School 1625 S Allport St Chicago IL 60608	36-3352367	501c3	75,943.				OP LD ED
St Rita of Cascia High Sc 7740 S Western Ave Chicago IL 60620	36-2171753	501c3	56,500.				CAP MAR
St Sabina School 7801 S Throop St Chicago IL 60620	36-2171123	501c3	30,918.				OP HC
St Scholastica Academy 7416 N Ridge Blvd Chicago IL 60645	36-3716438	501c3	20,000.				PD
St Stanislaus Kostka Scho 1255 N Noble St Chicago IL 60642	36-2171128	501c3	171,242.				OP PP PD
St Sylvester School 3027 W Palmer Sq Chicago IL 60647	36-2488067	501c3	107,770.				OP PP ID
2 Enter total number of Section 501(c)(3) and government organizations							
3 Enter total number of other organizations							

**SCHEDULE I-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

▶ Attach to Form 990 to list additional information for
Part II and Part III, Schedule I (Form 990).

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the organization		Employer identification number					
Big Shoulders Fund		36-3490557					
Part I Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part I.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St Symphorosa School							
6125 S Austin Ave	36-2171135	501c3	12,500.				LD
Chicago IL 60638							
St Therese School							
247 W 23rd St	36-2240479	501c3	135,100.				LD ED SPG
Chicago IL 60616							
St Thomas of Canterbury S							
4827 N Kenmore Ave	36-2240480	501c3	54,047.				LD ED PD
Chicago IL 60640							
St Thomas the Apostle Sch							
5467 S Woodlawn Ave	36-2171144	501c3	25,208.				PP HC
Chicago IL 60615							
St Turibius School							
4120 W 57th St	36-2430761	501c3	80,922.				OP PP ED
Chicago IL 60629							
St Viator School							
4140 W Addison St	36-2171148	501c3	17,253.				OP ED PD
Chicago IL 60641							
St Walter School							
11741 S Western Ave	36-2337889	501c3	36,866.				PP MAR
Chicago IL 60643							
Visitation School							
900 W Garfield Blvd	36-3648506	501c3	210,901.				OP ED PP
Chicago IL 60609							
DePaul University							
2320 N Kenmore	36-2167048	501c3	8,980.				BUS
Chicago IL 60614							

2 Enter total number of Section 501(c)(3) and government organizations

3 Enter total number of other organizations

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Scholarships to elementary and high school students	4,643	5,222,517.			
Scholarships to teachers - leadership development	9	31,459.			
Scholarships to teachers - general	1	2,250.			
Teacher stipends - professional development	121	12,100.			
Teacher dues & subscriptions - professional development	41	4,559.			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Pt I Line 2 Procedures for monitoring the use of grant funds differ based on the type of grant awarded. Schools eligible for support are

Pt I Line 2 reviewed each year to ensure they meet outlined criteria (in City of Chicago, student population has over 20% qualify for free or

Pt I Line 2 reduced lunch and participate in Title I programs). Overall schools report annually on a number of indicators including financial

Pt I Line 2 viability, enrollment, student academic performance, and demographic characteristics of students served. Renewable

Pt I Line 2 scholarship awards often include regular progress monitoring and reporting by the individual schools on students. Patrons

Pt I Line 2 Program funds are only distributed upon signed agreement of Patron, principal and Big Shoulders and requires substantiation

Pt I Line 2 through receipting or accounting of use of funds. Programmatic and capital support requires a minimum of annual reports

Pt I Line 2 on use of funds and demonstrated measurable objectives met through the funding. Operating grants are distributed to the

Pt I Line 2 schools via the Archdiocese of Chicago and a quarterly report is submitted with actual use of the grants by category. Big Shoulders

Pt I Line 2 Fund staff members regularly visit (at least 2-5 times each year) schools and meet with leadership to ensure schools are using

See Schedule I (Form 990) - Part IV - Supplemental Information (Continuation Sheet)

BAA

Schedule I (Form 990) 2008

Schedule I (Form 990) - Part IV - Supplemental Information (continued)

Schedule I (Form 990) - Part IV - Supplemental Information (Continuation Sheet)

Pt I Line 2	funds as indicated by the requirements of each type of support.
Pt II Line 1a	Key for grant purpose - column (h)
	OP - Operating Grant
	PP - Patrons Program
	ED - Extended Day Program
	HC - Health Care Program
	LD - Leadership Award Program
	CAP - Capital Grant
	MAR - Marketing Grant
	PD - Professional Development Program
	SPG - Special Program Grant
	BUS - Bus for tutors for reading program
	EC - Professional Development-Early Childhood Program
	SR - Summer Reading Program

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information****For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees****Attach to Form 990. To be completed by organizations that
answered 'Yes' to Form 990, Part IV, line 23.**

OMB No 1545-0047

2008**Open to Public
Inspection**

Name of the organization

Big Shoulders Fund

Employer identification number

36-3490557

Part I Questions Regarding Compensation**1 a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

- | | |
|---|---|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☒ Travel for companions | ☐ Payments for business use of personal residence |
| ☒ Tax indemnification and gross-up payments | ☒ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e g , maid, chauffeur, chef) |

b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?**3** Indicate which, if any, of the following organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

- | | |
|---|---|
| ☐ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☒ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a**a** Receive a severance payment or change of control payment?**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?**c** Participate in, or receive payment from, an equity-based compensation arrangement?

If 'Yes' to any of 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of**a** The organization?**b** Any related organization?

If 'Yes' to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of**a** The organization?**b** Any related organization?

If 'Yes' to line 6a or 6b, describe in Part III.

7 For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If 'Yes,' describe in Part III**Yes No****1 b****X****2****X****4 a****X****4 b****X****4 c****X****5 a****X****5 b****X****6 a****X****6 b****X****7****X****8****X****BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.**

Schedule J (Form 990) 2008

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Pt I Line 1b Travel expense for one trip for Mr. Hale's spouse was paid by the organization, but was included in taxable wages

Pt I Line 1b The amount of taxable spousal travel was grossed up and included in Mr. Hale's taxable wages

Pt I Line 1b Dues to a social club are paid on behalf of the executive director in order to have a place to conduct off-site board meetings and meetings with donors.

Pt I Line 1b No written policy existed for spousal travel because the situation had never arisen before. The organization is working on preparing such a policy.

Pt I Line 1b Personal use of a car is allowed for the honorary president who does not receive any other salary.

Because this income is reported on a 1099, a small stipend is also paid to cover any taxes which might be incurred.

Pt I Line 7 Annual bonus is paid depending upon reaching various targeted goals during the year

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

Employer Identification number

Big Shoulders Fund

36-3490557

Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Mary Dempsey ----- Director	0.25	X						0.	0.	0.
William Devers Jr. --- Director, Exec Committee	1.75	X						0.	0.	0.
Daniel Doherty ----- Director	1.00	X						0.	0.	0.
Thomas Donahoe ----- Director	0.25	X						0.	0.	0.
James Dowdle ----- Director	0.25	X						0.	0.	0.
Kevin Dowdle ----- Director	0.25	X						0.	0.	0.
William Doyle ----- Director	0.25	X						0.	0.	0.
David Dury ----- Director	2.00	X						0.	0.	0.
Melissa Sage Fadim --- Director	0.25	X						0.	0.	0.
William Farley ----- Director	0.25	X						0.	0.	0.
W. James Farrell ----- Director	0.25	X						0.	0.	0.
Michael Ferro Jr. ---- Director, Exec Committee	1.00	X						0.	0.	0.
Dennis FitzSimons --- Director	0.25	X						0.	0.	0.
Cyrus Freidheim Jr. --- Director	0.25	X						0.	0.	0.
Susan Fullman ----- Director	0.25	X						0.	0.	0.
Robert Gallagher, Jr. - Director	0.25	X						0.	0.	0.
Christina Gidwitz ---- Director	3.25	X						0.	0.	0.
Sue Gin McGowan ----- Director	0.25	X						0.	0.	0.
Armando Gomez ----- Director	0.25	X						0.	0.	0.
William Goodyear ----- Director	0.25	X						0.	0.	0.
Alan Gordon ----- Director	0.25	X						0.	0.	0.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

Employer Identification number

Big Shoulders Fund

36-3490557

Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<u>James Gordon</u> Director, Exec Committee	1.00	X						0.	0.	0.
<u>Melvin Gray</u> Director	0.25	X						0.	0.	0.
<u>David Grumhaus</u> Director	1.00	X						0.	0.	0.
<u>Thomas Grusecki</u> Director	0.25	X						0.	0.	0.
<u>H. Patrick Hackett, Jr.</u> Director	0.25	X						0.	0.	0.
<u>Sondra Healy</u> Director	0.25	X						0.	0.	0.
<u>Richard Heise Sr.</u> Director	0.25	X						0.	0.	0.
<u>James Hoeg</u> Director	1.00	X						0.	0.	0.
<u>Travis Hook</u> Director	1.00	X						0.	0.	0.
<u>Peter Huizenga</u> Director, Exec Committee	2.75	X						0.	0.	0.
<u>Mary Ann Hynes</u> Director	0.25	X						0.	0.	0.
<u>Robert Jank</u> Director	0.25	X						0.	0.	0.
<u>Mary Sullivan Josephs</u> Director	1.00	X						0.	0.	0.
<u>Leigh-Anne Kazma</u> Director	0.25	X						0.	0.	0.
<u>Bryant Keil</u> Director	0.25	X						0.	0.	0.
<u>John Keller</u> Director	0.25	X						0.	0.	0.
<u>Christine Kelly</u> Director, Exec Committee	2.75	X						0.	0.	0.
<u>Gerald Kelly</u> Director	0.25	X						0.	0.	0.
<u>Michael Kennelly</u> Director	0.25	X						0.	0.	0.
<u>Martin Koldyke</u> Director	0.25	X						0.	0.	0.
<u>Harry Kraemer</u> Director	0.25	X						0.	0.	0.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)Department of the Treasury
Internal Revenue Service**Continuation Sheet for Form 990****Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.**

OMB No 1545-0047

2008**Open to Public
Inspection**

Name of the Organization

Big Shoulders Fund

Employer identification number

36-3490557

Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
William Lagoni Director	1.50	X						0.	0.	0.
Thomas Lanctot Director, Exec Committee	1.00	X						0.	0.	0.
Joan Lavezzorio Director	0.25	X						0.	0.	0.
M. James Leider Director	0.25	X						0.	0.	0.
David Lies Director	1.00	X						0.	0.	0.
Harold Lifvendahl Director	0.25	X						0.	0.	0.
Homer Livingston, Jr. Director	0.25	X						0.	0.	0.
John Long Director	1.50	X						0.	0.	0.
William Lynch Jr. Director, Exec Committee	3.50	X						0.	0.	0.
Anthony Mandolini Director, Exec Committee	1.75	X						0.	0.	0.
Robert Mariano Director	0.25	X						0.	0.	0.
Larry Martin Director	0.25	X						0.	0.	0.
Michael McCaskey Director	0.25	X						0.	0.	0.
Patrick McDonnell Director	0.25	X						0.	0.	0.
James McDonough Director	0.25	X						0.	0.	0.
Joseph McInerney Director	0.25	X						0.	0.	0.
William McIntosh Director	0.25	X						0.	0.	0.
Lester McKeever Jr. Director	1.00	X						0.	0.	0.
Andrew McKenna, Jr. Director	0.25	X						0.	0.	0.
Mark Masseur Director	1.00	X						0.	0.	0.
Robert McNeill Director	1.00	X						0.	0.	0.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

Employer Identification number

Big Shoulders Fund

36-3490557

Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Albert Miller _____ Director	0.25	X						0.	0.	0.
Loren Miller III _____ Director	0.25	X						0.	0.	0.
Patrick Moore _____ Director	0.25	X						0.	0.	0.
Terry Moritz _____ Director	0.25	X						0.	0.	0.
Raymond Mota _____ Director	0.25	X						0.	0.	0.
Michael Murphy _____ Director, Exec Committee	1.00	X						0.	0.	0.
Daniel Murray _____ Director	0.25	X						0.	0.	0.
Alan Myers _____ Director, Exec Committee	4.75	X						0.	0.	0.
Joseph Nolan _____ Director	2.00	X						0.	0.	0.
Fred O'Connor _____ Director	1.00	X						0.	0.	0.
James O'Connor Jr. _____ Director	0.25	X						0.	0.	0.
Philip O'Connor _____ Director	0.25	X						0.	0.	0.
Kevin O'Hara _____ Director	1.00	X						0.	0.	0.
Richard O'Malley Jr. _____ Director	1.00	X						0.	0.	0.
Thomas Patrick _____ Director	0.25	X						0.	0.	0.
James Perry Jr. _____ Director	0.25	X						0.	0.	0.
Donald Petkus _____ Director	1.00	X						0.	0.	0.
Ernest Purcell _____ Director	0.25	X						0.	0.	0.
Thomas Quinn _____ Director	0.25	X						0.	0.	0.
Thomas Reedy _____ Director	0.25	X						0.	0.	0.
Robert Reilly Jr. _____ Director	0.25	X						0.	0.	0.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

Employer Identification number

Big Shoulders Fund

36-3490557

Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<u>J. Christopher Reyes</u> Director	0.25	X						0.	0.	0.
<u>Thomas Reynolds III</u> Director, Exec Committee	2.75	X						0.	0.	0.
<u>James Riley</u> Director	0.25	X						0.	0.	0.
<u>Philip Rooney</u> Director	0.25	X						0.	0.	0.
<u>Joseph Rubinelli Jr.</u> Director	0.25	X						0.	0.	0.
<u>Patrick Ryan Jr.</u> Director	0.25	X						0.	0.	0.
<u>Patrick Ryan Sr.</u> Director	0.25	X						0.	0.	0.
<u>Patrick Sackley</u> Director	1.00	X						0.	0.	0.
<u>John Sandner</u> Director	0.25	X						0.	0.	0.
<u>Pamela Scholl</u> Director	2.00	X						0.	0.	0.
<u>Elaine Schuster</u> Director	0.25	X						0.	0.	0.
<u>Joseph Shenton</u> Director	0.25	X						0.	0.	0.
<u>Matthew Smith</u> Director	1.00	X						0.	0.	0.
<u>William Smithburg</u> Director	0.25	X						0.	0.	0.
<u>C. Edwin Starr</u> Director	2.00	X						0.	0.	0.
<u>Phil Stefani</u> Director	0.25	X						0.	0.	0.
<u>F. Quinn Stepan</u> Director	0.25	X						0.	0.	0.
<u>Richard Strup</u> Director	0.25	X						0.	0.	0.
<u>Andrew Studdert</u> Director	0.25	X						0.	0.	0.
<u>Richard Terry</u> Director	0.25	X						0.	0.	0.
<u>Peter Thompson</u> Director	0.25	X						0.	0.	0.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

**Open to Public
Inspection**

Name of the Organization

Employer Identification number

Big Shoulders Fund

36-3490557

Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
<u>Raymond Tower</u> Director	0.25	X						0.	0.	0.
<u>Eugene Tracy</u> Director	0.25	X						0.	0.	0.
<u>James Tracy</u> Director	1.00	X						0.	0.	0.
<u>Thomas Tully</u> Director	0.25	X						0.	0.	0.
<u>Giancarlo Turano</u> Director, Exec Committee	2.25	X						0.	0.	0.
<u>James Tyree</u> Director	0.25	X						0.	0.	0.
<u>Christopher Valenti</u> Director, Exec Committee	1.00	X						0.	0.	0.
<u>Arthur Velasquez</u> Director, Exec Committee	1.00	X						0.	0.	0.
<u>Kenneth Viellieu</u> Director	1.50	X						0.	0.	0.
<u>Michael Wallace</u> Director	0.25	X						0.	0.	0.
<u>Dia Weil</u> Director	0.25	X						0.	0.	0.
<u>Robert Wilmouth</u> Director	0.25	X						0.	0.	0.
<u>Michael Winn</u> Director	0.25	X						0.	0.	0.
<u>Lorraine Wolfe</u> Director	0.25	X						0.	0.	0.
<u>Justin Zubrod Sr.</u> Director	0.25	X						0.	0.	0.
<u>Kreg Jackson</u> Director	1.00	X						0.	0.	0.
<u>John Livingston</u> Director	0.25	X						0.	0.	0.
<u>Marsha Masloski</u> Director	0.25	X						0.	0.	0.
<u>Brian Norkett</u> Director	1.00	X						0.	0.	0.
<u>John Podjasek</u> Director	1.00	X						0.	0.	0.
<u>Bruce White</u> Director	0.25	X						0.	0.	0.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2008

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Non-Cash Contributions

► To be completed by organizations that answered 'Yes'
on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

Big Shoulders Fund

Employer identification number

36-3490557

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	35	454,028.	Avg of high/low sell price
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (Misc donations-fund-raising events)	X	121	0.	N/A
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

0.

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If 'Yes,' describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If 'Yes,' describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

	Yes	No
30a		X
31	X	
32a		X
33		

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2008

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

25 Big Shoulders receives various items from local vendors
and individuals which are used as prizes or give-aways
at fund-raising events. Due to the nature of these
gifts, no revenue is recorded at the time of receipt.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

► **Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization

Big Shoulders Fund

Employer identification number

36-3490557

Pt VI-A, Line 1a The Board of Directors has 162 members. The
organization is actually governed by the Executive
Committee, which consists of 25 members.

Pt VI-A, Line 2 Family & Business Relationships:
John A. Canning, John Podjasek - family relationship
John A. Canning, Michael Ferro - business relationship
John A. Canning, James Perry - business relationship
Mary Dempsey, Philip Corboy - family relationship
Albert Miller, Loren Miller - family relationship
James J. O'Connor Sr, James J. O'Connor Jr - family relationship
James J. O'Connor Sr, Fred O'Connor - family relationship
James J. O'Connor Sr, Elizabeth Cole - family relationship
Fred O'Connor, James J. O'Connor Jr - family relationship
Elizabeth Cole, James J. O'Connor Jr - family relationship
Elizabeth Cole, Fred O'Connor - family relationship
James McDonough, Daniel Curley - family relationship
Robert Gallagher Jr, Richard O'Malley Jr - family relationship
James Dowdle, Kevin Dowdle - family relationship
Thomas Reynolds III, Thomas Lanctot - family relationship
Harold Lifvendahl, C Edwinn Starr - family relationship
Andrew McKenna Sr, Andrew McKenna Jr - family relationship
Patrick Ryan Sr, Patrick Ryan Jr - family relationship
Patrick Moore, James O'Connor Sr - business relationship
Patrick Moore, William Lynch - business relationship
Patrick Moore, Thomas Reynolds - business relationship
Patrick Moore, William Smithburg - business relationship

Name of the organization

Employer identification number

Big Shoulders Fund

36-3490557

----- Patrick Moore, William Boris - business relationship -----

Pt VI-B, Line 15 The Co-Chairmen and Executive Committee determine

----- the compensation for the Executive Director after -----

----- reviewing his performance by using comparative data -----

----- for other non-profit organizations. This was last -----

----- done in October 2008. -----

Pt VI-C, Line 19 Governing documents, policies and financial

----- information is made available on a discretionary -----

----- basis to those with valid reasons for requesting -----

----- the information. -----

Pt VI-A, Line 10 The tax return is reviewed by the Executive

----- Director and Co-Chairman and distributed to -----

----- the Executive Committee prior to filing. -----

Pt VI-B, Line 12c The Board of Directors fills out an annual

----- questionnaire disclosing any potential conflicts of -----

----- interest. -----

Pt VI-B, Lin 13 Although the Fund did not have a written

----- whistleblower policy in force during the year ended -----

----- June 30, 2009, a policy was adopted subsequently on -----

----- October 13, 2009. -----

Pt VI-B, Lin 14 Although the Fund did not have a written

----- document retention and destruction policy in force -----

----- during the year ended June 30, 2009, a policy was -----

----- adopted subsequently on October 13, 2009. -----

Name of the organization

Employer identification number

Big Shoulders Fund

36-3490557

Pt VIII, Lin 11a Under generally accepted accounting principles, non-profit organizations must report agency transactions in a specific manner. Agency transactions include contributions received for which the donor has designated the use for a specific beneficiary. As required, the Big Shoulders Fund reports these as liabilities when received by recording them as gross contribution revenue, with a corresponding contra-revenue amount resulting in net revenue of zero. Line 11a shows the total amount of these agency contributions received during the year.

Pt IX, Lin 24d As described above, agency receipts are not included in income, and correspondingly, agency expenditures are not included in expenses. Line 24d shows the total of agency expenditures included in the detail expense lines 1 and 2.

Schedule O (Form 990), Supplemental Information to Form 990
Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

•
•

Schedule O (Form 990), Supplemental Information to Form 990
Form 990, Page 2, Part III, Line 4d (continued)

4d Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

Code: _____	Description: <u>Grants to schools as designated by donors -</u>
Expenses <u>1,639.</u>	<u>agency (pass-through) transactions. - See</u>
Grants Of <u>594,873.</u>	<u>supporting schedule reconciling grant expenses</u>
Revenue <u>0.</u>	<u>and net expense.</u>

Supporting Statement of:

Form 990 p 2/Line 4a Expenses

Description	Amount
Total Grant Payments	5,222,517.
Less: Agency Payments	-566,548.
Net Grant Expense 4,655,969	
Other Expenses	247,101.
Net program expense:	
Total	<u>4,903,070.</u>

Supporting Statement of:

Form 990 p 2/Line 4b Expenses

Description	Amount
Total Grant Payments	2,684,002.
Less: Agency Payments	-314,607.
Net Grant Expense 2,369,395	
Other Expense	270,220.
Net Program Expense:	
Total	<u>2,639,615.</u>

Supporting Statement of:

Form 990 p 2/Line 4c Expenses

Description	Amount
Total Grant Payments	4,233,581.
Less: Agency Payments	-635,121.
Net Grant Expense 3,598,460	
Other Expenses	207,704.
Net Program Expense:	
Total	<u>3,806,164.</u>

Supporting Statement of:

Form 990 p 2/Other Expenses-1

Description	Amount
Total Grant Payments	594,873.
Less: Agency Payments	-594,873.
Net Grant Expense 0	
Other Expenses	1,639.
Net Program Expense:	

Continued

Supporting Statement of:

Form 990 p 2/Other Expenses-1

Description	Amount
Total	<u>1,639.</u>