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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)

2009

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 2009 calendar year, or tax year beginning Jul 1, 2009, and ending Jun 30, 2010

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 addr) 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 \$ 18,167,329.
		F Name and address of principal officer James J. O'Connor 309 W. Washington Chicago IL 60606		
I Tax-exempt status ☒ 501(c) (3) (insert no) ☐ 4947(a)(1) or ☐ 527				
J Website: ▶ www.bigshouldersfund.org				
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶				
L Year of Formation 1986 M State of legal domicile IL				

Part I Summary

Activities & Governance Expenses	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, 61% 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.	
	3 Number of voting members of the governing body (Part VI, line 1a)	3 25
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4 25
	5 Total number of employees (Part V, line 2a)	5 13
	6 Total number of volunteers (estimate if necessary)	6 985
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a 0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b
	8 Contributions and grants (Part VIII, line 1h)	Prior Year 10,462,559. Current Year 11,727,973.
	9 Program service revenue (Part VIII, line 2g)	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	41,352. -279,421.	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-713,858. -919,075.	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	9,790,053. 10,529,477.	
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	12,734,973. 11,748,959.	
14 Benefits paid to or for members (Part IX, column (A), line 4)	0. 0.	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	887,516. 1,027,366.	
16a Professional fundraising fees (Part IX, column (A), line 11e)	0. 0.	
b Total fundraising expenses (Part IX, column (A), line 25)	349,425.	
17 Other expenses (Part IX, column (A), lines 11a-14, 16, 17, 24)	-1,311,430. -243,583.	
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	12,311,059. 12,532,742.	
19 Revenue less expenses. Subtract line 18 from line 12	-2,521,006. -2,003,265.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year 42,318,021. End of Year 43,276,650.
	21 Total liabilities (Part X, line 26)	4,030,207. 3,324,785.
	22 Net assets or fund balances Subtract line 21 from line 20	38,287,814. 39,951,865.

Part II Signature Block

Sign Here	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.	
	Signature of officer James J. O'Connor	Date 12-3-2011
Paid Preparer's Use Only	Preparer's signature BIG SHOULDERS FUND	Date 12-3-2011
	Firm's name (or yours if self-employed), address, and ZIP + 4 309 W WASHINGTON ST STE 550 CHICAGO IL 60606-3206	Check if self-employed ☐
	Preparer's identifying number (see instructions) EIN Phone no	Co-Chairman

May the IRS discuss this return with the preparer shown above? (see instructions)

☐ Yes ☒ No

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0101 07/20/09 Form 990 (2009)

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Part III Statement of Program Service Accomplishments

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.

See Form 990, Page 2, Part III, Line 1 (continued)

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 \$ 4,900,600. including grants of \$ 4,750,023.) (Revenue \$ 0.)

Administer over 30 distinct scholarship programs that include mentoring, enrichment and other support activities.

Scholarships were awarded to 5604 students at 124 schools to enable them to attend Catholic schools. - See supporting schedule reconciling grant expenses and net expense.

4b (Code _____) (Expenses \$ 3,073,725. including grants of \$ 3,137,469.) (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 64 schools. - See supporting schedule reconciling grant expenses and net expense.

4c (Code _____) (Expenses \$ 3,302,846. including grants of \$ 3,300,903.) (Revenue \$ 0.)

Distribute grants and support to 88 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 61% 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 500 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 24,000 students. - See supporting schedule reconciling grant expenses and net expense.

4d Other program services (Describe in Schedule O)

(Expenses \$ 2,558. including grants of \$ 560,564.) (Revenue \$ 0.)

4e Total program service expenses ▶ 11,279,729.

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 similar funds or 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, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	X	
11 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI		
• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII		
• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		
• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X		
12 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	X	
12A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional	Yes	No
		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 United States?		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 United States? 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 a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities 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

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d 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? <i>If 'Yes,' complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</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? <i>If 'Yes,' complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If 'Yes,' complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
28a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		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>		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>		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>		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>		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>		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>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

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Form 990 (2009)

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.	1a 19	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b 1	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c 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.	2a 13	
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).	2b X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O.	3b	
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)?	4a 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?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year.	7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?	9a	
b Did the organization make any distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter		
a Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11 Section 501(c)(12) organizations. Enter		
a Gross income from other members or shareholders.	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year.	12b	

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

	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	
9 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 (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a 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?		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990		
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 of key employees of the organization	X	
If 'Yes' to line 15a or 15b, 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**

1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of 'key employees.'
- 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) of 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 current officer, director, or trustee

(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	1.25	X						0.	0.	0.
Jennifer Fortner Director	1.25	X						0.	0.	0.
Robert Gordon Director	0.25	X						0.	0.	0.
John Buck III 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 Collieran 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.
Scott Etzler 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	2.00	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.
1b Total								184,576.	0.	20,431.

2 Total number of individuals (including but not limited to those listed above) 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 but not limited to those listed above) 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	1 a Federated campaigns	1 a 6,785.				
	b Membership dues	1 b 0.				
	c Fundraising events	1 c 640,536.				
	d Related organizations	1 d 0.				
	e Government grants (contributions)	1 e 13,050.				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 11,067,602.				
	g Noncash contribns included in lns 1a-1f.	\$ 904,804.				
h Total. Add lines 1a-1f		11,727,973.				
PROGRAM SERVICE REVENUE	Business Code					
	2 a _____					
	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)		432,034.	0.	0.	432,034.
	4 Income from investment of tax-exempt bond proceeds		0.	0.	0.	0.
	5 Royalties		0.	0.	0.	0.
	6 a 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.
	7 a Gross amount from sales of assets other than inventory	(i) Securities 6,575,879. (ii) Other 0.				
	b Less cost or other basis and sales expenses	7,287,334. 0.				
	c Gain or (loss)	-711,455. 0.				
	d Net gain or (loss)		-711,455.	0.	0.	-711,455.
	8 a Gross income from fundraising events (not including \$ 640,536. of contributions reported on line 1c)					
	See Part IV, line 18	a 310,591.				
	b Less direct expenses	b 331,789.				
	c Net income or (loss) from fundraising events		-21,198.	0.	0.	-21,198.
	9 a Gross income from gaming activities See Part IV, line 19	a 39,130.				
	b Less direct expenses	b 18,729.				
	c Net income or (loss) from gaming activities		20,401.	0.	0.	20,401.
	10 a 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				
11 a Agency collections - see Sch O	900099	-918,278.	-918,278.	0.	0.	
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d		-918,278.				
12 Total revenue. See instructions			10,529,477.	-918,278.	0.	-280,218.

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	6,921,404.	6,921,404.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	4,827,555.	4,827,555.		
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	260,500.	102,580.	51,290.	106,630.
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	631,272.	370,210.	191,862.	69,200.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	17,771.	10,691.	4,994.	2,086.
9 Other employee benefits	60,112.	35,592.	17,537.	6,983.
10 Payroll taxes	57,711.	30,867.	15,880.	10,964.
11 Fees for services (non-employees)				
a Management	0.	0.	0.	0.
b Legal	3,355.	0.	3,355.	0.
c Accounting	37,000.	0.	37,000.	0.
d Lobbying	0.	0.	0.	0.
e Prof fundraising svcs. See Part IV, ln 17	0.			0.
f Investment management fees	101,233.	0.	101,233.	0.
g Other	148,202.	125,360.	4,210.	18,632.
12 Advertising and promotion	26,139.	21,554.	0.	4,585.
13 Office expenses	94,465.	24,592.	31,807.	38,066.
14 Information technology	37,555.	370.	14,503.	22,682.
15 Royalties	0.	0.	0.	0.
16 Occupancy	82,571.	44,163.	22,720.	15,688.
17 Travel	40,162.	26,587.	8,551.	5,024.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.	0.	0.	0.
19 Conferences, conventions, and meetings	2,175.	0.	2,081.	94.
20 Interest	0.	0.	0.	0.
21 Payments to affiliates	0.	0.	0.	0.
22 Depreciation, depletion, and amortization	15,270.	5,736.	1,048.	8,486.
23 Insurance	7,168.	3,834.	1,972.	1,362.
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>	13,974.	0.	0.	13,974.
b <u>Bad Debts</u>	376,000.	0.	376,000.	0.
c <u>Food & Meals</u>	57,502.	17,220.	15,499.	24,783.
d <u>Agency Exp - see Sch O</u>	-1,295,972.	-1,289,972.	-6,000.	0.
e <u>Miscellaneous</u>	9,618.	1,386.	8,046.	186.
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	12,532,742.	11,279,729.	903,588.	349,425.
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				

BAA

Form 990 (2009)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash — non-interest-bearing	50,440.	1	65,647.
	2 Savings and temporary cash investments	6,841,495.	2	4,115,159.
	3 Pledges and grants receivable, net	6,289,279.	3	6,856,599.
	4 Accounts receivable, net	0.	4	0.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 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	1,478.	9	48,294.
	10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10a 89,190.		
	b Less accumulated depreciation	10b 40,983.	10c	48,207.
	11 Investments — publicly-traded securities	11,401,366.	11	8,910,413.
	12 Investments — other securities See Part IV, line 11	17,667,233.	12	23,226,115.
	13 Investments — program-related See Part IV, line 11	0.	13	0.
	14 Intangible assets	0.	14	0.
	15 Other assets See Part IV, line 11	3,253.	15	6,216.
16 Total assets Add lines 1 through 15 (must equal line 34)	42,318,021.	16	43,276,650.	
LIABILITIES	17 Accounts payable and accrued expenses	69,449.	17	91,116.
	18 Grants payable	3,667,903.	18	2,952,644.
	19 Deferred revenue	292,855.	19	281,025.
	20 Tax-exempt bond liabilities	0.	20	0.
	21 Escrow or custodial 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	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25 Other liabilities Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	4,030,207.	26	3,324,785.
	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		18,295,243.	27	18,781,934.
28 Temporarily restricted net assets		14,847,782.	28	15,988,966.
29 Permanently restricted net assets		5,144,789.	29	5,180,965.
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		38,287,814.	33	39,951,865.
34 Total liabilities and net assets/fund balances		42,318,021.	34	43,276,650.

BAA

Form 990 (2009)

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other

If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O

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 line 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?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

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

BAA

Form 990 (2009)

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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants'.)	8,781,465.	9,657,457.	12,492,401.	10,462,559.	11,727,973.	53,121,855.
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-through 3	8,781,465.	9,657,457.	12,492,401.	10,462,559.	11,727,973.	53,121,855.
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)						6,096,254.
6 Public support. Subtract line 5 from line 4						47,025,601.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	8,781,465.	9,657,457.	12,492,401.	10,462,559.	11,727,973.	53,121,855.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,646,137.	2,101,645.	875,237.	461,816.	432,034.	5,516,869.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	50,695.	384.	120,046.	109,275.	0.	280,400.
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						58,919,124.
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 2009 (line 6, column (f) divided by line 11, column (f))	14	79.81%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	78.53%
16a 33-1/3 support test – 2009. 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 – 2008. 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 – 2009. 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 – 2008. 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. ▶ ☐		

BAA

Schedule A (Form 990 or 990-EZ) 2009

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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 through 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 amount on line 13 for the year						
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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 on 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 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%
19a 33-1/3 support tests – 2009. 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 – 2008. 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 explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

Other Addl Info: Agency transactions are recorded as contributions

but are deducted from gross revenue - see Schedule O

for a detailed explanation

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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	0.25	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.

9AA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J-2 (Form 990) 2009

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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> <u>Director, Exec Committee</u>	1.00	X						0.	0.	0.
<u>Melvin Gray</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>David Grumhaus</u> <u>Director</u>	1.00	X						0.	0.	0.
<u>Thomas Grusecki</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>H. Patrick Hackett, Jr.</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>Sondra Healy</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>Richard Heise Sr.</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>James Hoeg</u> <u>Director</u>	1.25	X						0.	0.	0.
<u>Travis Hook</u> <u>Director</u>	1.00	X						0.	0.	0.
<u>Peter Huizenga</u> <u>Director, Exec Committee</u>	2.75	X						0.	0.	0.
<u>Mary Ann Hynes</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>Robert Jank</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>Mary Sullivan Josephs</u> <u>Director</u>	1.25	X						0.	0.	0.
<u>Leigh-Anne Kazma</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>Bryant Keil</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>John Keller</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>Christine Kelly</u> <u>Director, Exec Committee</u>	2.75	X						0.	0.	0.
<u>Gerald Kelly</u> <u>Director</u>	2.00	X						0.	0.	0.
<u>Michael Kennelly</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>Martin Koldyke</u> <u>Director</u>	0.25	X						0.	0.	0.
<u>Harry Kraemer</u> <u>Director</u>	0.25	X						0.	0.	0.

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2009

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

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>William Lagoni</u> Director	1.50	X						0.	0.	0.
<u>Thomas Lanctot</u> Director, Exec Committee	1.00	X						0.	0.	0.
<u>Nicholas Lavezzorio</u> Director	0.25	X						0.	0.	0.
<u>M. James Leider</u> Director	0.25	X						0.	0.	0.
<u>David Lies</u> Director	1.00	X						0.	0.	0.
<u>Harold Lifvendahl</u> Director	0.25	X						0.	0.	0.
<u>Homer Livingston, Jr.</u> Director	0.25	X						0.	0.	0.
<u>John Long</u> Director	1.50	X						0.	0.	0.
<u>William Lynch Jr.</u> Director, Exec Committee	2.75	X						0.	0.	0.
<u>Anthony Mandolini</u> Director, Exec Committee	1.75	X						0.	0.	0.
<u>Robert Mariano</u> Director	0.25	X						0.	0.	0.
<u>Larry Martin</u> Director	0.25	X						0.	0.	0.
<u>Michael McCaskey</u> Director	0.25	X						0.	0.	0.
<u>Patrick McDonnell</u> Director	0.25	X						0.	0.	0.
<u>James McDonough</u> Director	0.25	X						0.	0.	0.
<u>Joseph McInerney</u> Director	0.25	X						0.	0.	0.
<u>Christopher Murphy</u> Director	0.25	X						0.	0.	0.
<u>Lester McKeever Jr.</u> Director	1.00	X						0.	0.	0.
<u>Andrew McKenna, Jr.</u> Director	0.25	X						0.	0.	0.
<u>Mark Masseur</u> Director	1.00	X						0.	0.	0.
<u>Robert McNeill</u> Director	1.00	X						0.	0.	0.

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2009

Department of the Treasury
Internal Revenue Service

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

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>Albert Miller</u> Director	0.25	X						0.	0.	0.
<u>Loren Miller III</u> Director	0.25	X						0.	0.	0.
<u>Patrick Moore</u> Director	0.25	X						0.	0.	0.
<u>Terry Moritz</u> Director	0.25	X						0.	0.	0.
<u>Raymond Mota</u> Director	0.25	X						0.	0.	0.
<u>Michael Murphy</u> Director, Exec Committee	1.00	X						0.	0.	0.
<u>Daniel Murray</u> Director	0.25	X						0.	0.	0.
<u>Alan Myers</u> Director, Exec Committee	5.00	X						0.	0.	0.
<u>Joseph Nolan</u> Director	0.25	X						0.	0.	0.
<u>Fred O'Connor</u> Director	0.25	X						0.	0.	0.
<u>James O'Connor Jr.</u> Director	0.25	X						0.	0.	0.
<u>Philip O'Connor</u> Director	0.25	X						0.	0.	0.
<u>Kevin O'Hara</u> Director	1.00	X						0.	0.	0.
<u>Richard O'Malley Jr.</u> Director	1.25	X						0.	0.	0.
<u>Thomas Patrick</u> Director	0.25	X						0.	0.	0.
<u>James Perry Jr.</u> Director	0.25	X						0.	0.	0.
<u>Donald Petkus</u> Director	1.00	X						0.	0.	0.
<u>Ernest Purcell</u> Director	0.25	X						0.	0.	0.
<u>Thomas Quinn</u> Director	0.25	X						0.	0.	0.
<u>Thomas Reedy</u> Director	0.25	X						0.	0.	0.
<u>Robert Reilly Jr.</u> Director	0.25	X						0.	0.	0.

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2009

Department of the Treasury
Internal Revenue Service

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

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	1.00	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	1.25	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.

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No 1545-0047

2009

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

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			
Raymond Tower Director	0.25	X						0.	0.	0.
Eugene Tracy Director	0.25	X						0.	0.	0.
James Tracy Director	1.00	X						0.	0.	0.
Thomas Tully Director	0.25	X						0.	0.	0.
Giancarlo Turano Director, Exec Committee	2.25	X						0.	0.	0.
James Tyree Director	0.25	X						0.	0.	0.
Christopher Valenti Director, Exec Committee	1.00	X						0.	0.	0.
Arthur Velasquez Director, Exec Committee	1.00	X						0.	0.	0.
Kenneth Viellieu Director	1.50	X						0.	0.	0.
Michael Wallace Director	1.50	X						0.	0.	0.
Dia Weil Director	0.25	X						0.	0.	0.
Robert Wilmouth Director	0.25	X						0.	0.	0.
Michael Winn Director	0.25	X						0.	0.	0.
Lorraine Wolfe Director	0.25	X						0.	0.	0.
Justin Zubrod Sr. Director	0.25	X						0.	0.	0.
Kreg Jackson Director	1.25	X						0.	0.	0.
John Livingston Director	0.25	X						0.	0.	0.
Marsha Masloski Director	0.25	X						0.	0.	0.
Brian Norkett Director	1.25	X						0.	0.	0.
John Podjasek Director	2.50	X						0.	0.	0.
Bruce White Director	0.25	X						0.	0.	0.

Continuation Sheet for Form 990

OMB No. 1545-0047

2009

Open to Public Inspection

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

Name of the Organization

Employer Identification number

Big Shoulders Fund

36-3490557

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

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

Name of the Organization

Employer Identification number

Big Shoulders Fund

36-3490557

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

[illegible]

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Financial Statements

- Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

OMB No 1545 0047

2009**Open to Public
Inspection**

Employer identification number

Big Shoulders Fund

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 for any other purpose conferring 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 through 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 tax 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, handling of violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation 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.

1 a 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, 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 acquisition 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 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.

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

2 a 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
1 a Beginning of year balance	24,223,944.	32,017,149.			
b Contributions	36,176.	39,824.			
c Net Investment earnings, gains, and losses	2,669,180.	-6,205,517.			
d Grants or scholarships	317,990.	412,714.			
e Other expenditures for facilities and programs	1,131,095.	1,214,798.			
f Administrative expenses	0.	0.			
g End of year balance	25,480,215.	24,223,944.			

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

- a Board designated or quasi-endowment ▶ 68.00 %
 b Permanent endowment ▶ 32.00 %
 c Term endowment ▶ 0.00 %

3 a 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) Accumulated Depreciation	(d) Book Value
1 a Land	0.	0.		0.
b Buildings	0.	0.	0.	0.
c Leasehold improvements	0.	0.	0.	0.
d Equipment	0.	89,190.	40,983.	48,207.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				48,207.

BAA

Schedule D (Form 990) 2009

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)	10,529,477.
2	Total expenses (Form 990, Part IX, column (A), line 25)	12,532,742.
3	Excess or (deficit) for the year Subtract line 2 from line 1	-2,003,265.
4	Net unrealized gains (losses) on investments	3,667,316.
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 through 8	3,667,316.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	1,664,051.

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	14,083,125.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	3,667,316.
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	3,667,316.
3	Subtract line 2e from line 1	3	10,415,809.
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	101,233.
b	Other (Describe in Part XIV)	4b	12,435.
c	Add lines 4a and 4b	4c	113,668.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	10,529,477.

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

1	Total expenses and losses per audited financial statements	1	12,419,074.
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	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	12,419,074.
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	101,233.
b	Other (Describe in Part XIV)	4b	12,435.
c	Add lines 4a and 4b	4c	113,668.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	12,532,742.

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, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

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 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

Pt X The following is the text of the financial statement note pertaining to uncertain tax positions:

Part XIV Supplemental Information (continued)

Pt X The Fund has received a determination letter from the IRS indicating that the Fund is exempt from income tax under Section 501(c)(3) of the Internal Revenue Code of 1986 and, except for taxes pertaining to unrelated business income, is exempt from federal and state income taxes. The Fund is classified as a public charity under Section 509(a)(1) and Section 170(b)(1)(A)(vi), an organization that normally receives a substantial part of its support from direct or indirect contributions from the general public. No provision has been made for income taxes in the accompanying financial statements as the Fund had no material unrelated business income in fiscal years 2010 and 2009.

The Fund adopted guidance issued by the FASB with respect to accounting for uncertainty in income taxes as of July 1, 2009. A tax position is recognized as a benefit only if it is "more likely than not" that the tax position would be sustained in a tax examination, with a tax examination being presumed to occur. The amount recognized is the largest amount of tax benefit that is greater than 50% likely of being realized on examination. For tax positions not meeting the "more likely than not" test, no tax benefit is recorded. The adoption had no effect on the Fund's financial statements. The Fund does not expect the total amount of unrecognized tax benefits to significantly change in the next 12 months.

The Fund has applied this criterion to all tax positions for which the statute of limitations remains open. Tax years open to examination by tax authorities under the statute of limitations include fiscal years ending June 2006 through 2009. The Fund recognizes interest and penalties related to unrecognized tax benefits in interest and income tax expense, respectively. The Fund has no amounts accrued for interest or penalties as of June 30, 2010 and 2009. The Fund has determined that its tax provisions satisfy the more likely than not criterion and that no provision for income taxes is required at June 30, 2010.

**Schedule F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► **Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.**
► **Attach to Form 990. ► See separate instructions.**

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

Big Shoulders Fund

Employer identification number

36-3490557

Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b.

1 For grantmakers. 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? ☐ Yes ☐ No

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

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Central America	0	0	investments	n/a	10,608,015.
Totals	0	0			10,608,015.

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

Schedule F (Form 990) (2009)

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information

Area with horizontal dashed lines for supplemental information.

Department of the Treasury
Internal Revenue Service

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

2009

Open to Public Inspection

Employer identification number

36-3490557

Part I

Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17
Form 990EZ filers are not required to complete this part

- ☐ Mail solicitations
- ☐ Internet and email solicitations
- ☐ Phone solicitations
- ☐ In-person solicitations

- ☐ Solicitation of non-government grants
☐ Solicitation of government grants
☐ Special fundraising events

- ☐
- Yes
- ☐
- No

- b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

- 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

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	783,365.	117,698.	50,064.	951,127.
	2 Less: Charitable contributions	533,717.	68,170.	38,649.	640,536.
	3 Gross income (line 1 minus line 2)	249,648.	49,528.	11,415.	310,591.
DIRECT EXPENSES	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	1,130.	4,125.	940.	6,195.
	7 Food and beverages	45,031.	21,041.	10,289.	76,361.
	8 Entertainment		975.		975.
	9 Other direct expenses	206,386.	27,452.	14,420.	248,258.
	10 Direct expense summary Add lines 4 through 9 in column (d)				331,789.
	11 Net income summary Combine lines 3, column (d) and line 10				-21,198.

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))
DIRECT EXPENSES	1 Gross revenue			39,130.	39,130.
	2 Cash prizes			14,128.	14,128.
	3 Non-cash prizes			4,271.	4,271.
	4 Rent/facility costs			0.	0.
	5 Other direct expenses			330.	330.
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☒ No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				18,729.
	8 Net gaming income summary Combine lines 1, column (d) and line 7				20,401.

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

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

b If 'Yes,' explain

11 Does the organization operate gaming activities with nonmembers?

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?

	YES	NO
9a	X	
10a		X
11	X	
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** Enter the name and address of the person who prepares the organization's gaming/special events books and records:Name: ▶ 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 of the third party

Name: ▶ _____

Address: ▶ _____

16 Gaming manager informationName: ▶ Joshua HaleGaming manager compensation: ▶ \$ 250.Description of services provided: ▶ Executive Director☐ 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 to be 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

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

Big Shoulders Fund

Employer identification number

36-3490557

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?

☒ Yes ☐ No

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' to 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
Academy of Our Lady 510 Grand Ave Waukegan IL 60085	47-0955784	501c3	134,457.				OP PP ED
Academy of St Benedict 6020 S Laflin Chicago IL 60636	36-2171119	501c3	91,091.				SPG PP ED
Annunciata School 3750 E 112th St Chicago IL 60617	36-2170752	501c3	70,444.				PP PD
Bridgeport Catholic Acade 3700 S Lowe Avenue Chicago IL 60609	36-3377611	501c3	21,250.				PD SPG
Children of Peace/Holy Tr 1900 W Taylor St Chicago IL 60612	36-2212711	501c3	106,586.				PP CG EX
Christ the King Jesuit 5088 W Jackson Blvd Chicago IL 60644	26-0556958	501c3	21,000.				OP PD
Christo Rey High School 1852 W 22nd Place Chicago IL 60608	36-4067306	501c3	30,700.				PD SPG
Epiphany School 4223 W 25th St Chicago IL 60623	36-2412597	501c3	133,302.				OP LD
2 Enter total number of section 501(c)(3) and government organizations							72
3 Enter total number of other organizations							0

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

TEEA3901 02/10/10

Schedule I (Form 990) 2009

**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
Schedule I (Form 990), Part II and Part III.

OMB No. 1545-0047

2009

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 United States (Schedule I (Form 990), Part I.)							
(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
Gordon Tech High School 3633 N California Chicago IL 60618	36-2182169	501c3	12,500.				SPG
Hales Franciscan High Sch 4930 S Cottage Grove Ave Chicago IL 60615	36-3885315	501c3	25,000.				SPG
Holy Angels School 750 E 40th St Chicago IL 60653	36-2747560	501c3	6,390.				ED SPG
Holy Trinity High School 1443 W Division St Chicago IL 60642	36-2171703	501c3	102,600.				SPG
Immaculate Conception Sch 8739 S Exchange Chicago IL 60617	36-3310936	501c3	12,355.				LD
Josephinum Academy 1501 N Oakley Chicago IL 60622	36-2167764	501c3	15,000.				CG ED SPG
Leo High School 7901 S Sangamon St Chicago IL 60620	36-2182061	501c3	45,000.				OP SCH
Maria High School 6727 S California Ave Chicago IL 60629	36-2229651	501c3	23,000.				SPG
Nativity BVM School 6820 S Washtenaw Ave Chicago IL 60629	36-2170879	501c3	38,250.				ED PD

**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
Schedule I (Form 990), Part II and Part III.

OMB No. 1545-0047

2009

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 United States (Schedule I (Form 990), Part I.)								
(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	
Our Lady of Grace School 2446 N Ridgeway Ave Chicago IL 60647	36-2170886	501c3	22,255.				PP LD SPG	
Our Lady of Guadalupe Sch 9050 S Burling Ave Chicago IL 60617	36-2743254	501c3	39,855.				ED PP LD	
Our Lady of Tepeyac Elem 2235 S Albany Chicago IL 60623	36-3409095	501c3	42,901.				PP SPG	
Our Lady of Tepeyac High 2228 S Whipple St Chicago IL 60623	36-4202108	501c3	13,762.				SPG	
Our Lady of the Snows Sch 4810 S Leamington Ave Chicago IL 60638	36-2401758	501c3	35,724.				PP	
St Agatha Catholic Academ 3151 W Douglas Blvd Chicago IL 60623	36-2358084	501c3	35,008.				PP IE SPG	
Pope John Paul II 4325 S Richmond Chicago IL 60632	36-2170859	501c3	164,582.				PP LD SPG	
Sacred Heart School 2906 E 96th Street Chicago IL 60617	36-2171734	501C3	12,355.				LD	
San Miguel School 1949 W 48th St Chicago IL 60609	36-4378726	501c3	6,000.				ED SPG	

**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
Schedule I (Form 990), Part II and Part III.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

Big Shoulders Fund

Employer identification number

36-3490557

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

(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
Santa Lucia School 3017 S Wells Chicago IL 60616	36-2171069	501c3	13,629.				PP SPG
St Agnes of Bohemia School 2643 S Central Park Ave Chicago IL 60623	36-3552287	501c3	5,800.				ED SPG
St Angela School 1332 N Massasoit Avenue Chicago IL 60651	36-4091553	501c3	157,623.				PP LD SPG
St Ann School 2211 W 18th Pl Chicago IL 60608	36-2284297	501c3	181,866.				PP LD SPG
St Barbara School 2867 S Throop St Chicago IL 60608	36-2170943	501c3	92,502.				PP ED CG
St Bartholomew School 4941 W Patterson Ave Chicago IL 60641	36-2170946	501c3	43,835.				SPG
St Bede the Venerable Sch 4440 W. 83rd Street Chicago IL 60652	36-4055633	501c3	5,350.				ED SPG
St Catherine of Siena, St 27 Washington Oak Park IL 60302	36-2170969	501c3	110,605.				PP ED SPG
St Columbanus School 7120 S Calumet Ave Chicago IL 60619	36-2170979	501c3	71,422.				PP

**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
Schedule I (Form 990), Part II and Part III.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization		Employer identification number					
Big Shoulders Fund		36-3490557					
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(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
St Dorothy School 7740 S Eberhart Ave Chicago IL 60619	36-2249880	501c3	73,396.				PP ED
St Elizabeth School 4052 S Wabash Ave Chicago IL 60653	36-2170991	501c3	146,083.				PP LD ED
St Ethelreda School 8734 S Paulina Chicago IL 60620	36-2182112	501c3	92,067.				PP ED SPG
St Francis DeSales High S 10155 S Ewing Ave Chicago IL 60617	36-2435876	501c3	333,500.				PP CG
St Gall School 5515 S Sawyer Ave Chicago IL 60629	36-2704905	501c3	71,142.				PP
St Genevieve School 4854 W Montana St Chicago IL 60639	36-2171008	501c3	75,650.				PP LD
St Gregory High School 1677 W Bryn Mawr Ave Chicago IL 60660	36-2349616	501c3	12,500.				PD SPG
St Helen School 2347 W Augusta Blvd Chicago IL 60622	36-2373447	501c3	14,355.				ED LD
St Hyacinth School 3640 W Wolfram St Chicago IL 60618	36-2171020	501c3	95,095.				PP

**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
Schedule I (Form 990), Part II and Part III.

OMB No. 1545-0047

2009

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 United States (Schedule I (Form 990), Part I.)							
(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
St John Berchmans School 2511 W Logan Blvd Chicago IL 60647	36-2171034	501c3	122,810.				PP LD SPG
St John DeLaSalle Academy 10212 S Vernon Ave Chicago IL 60628	36-2171032	501c3	71,741.				PP SPG
St Malachy School 2252 W Washington Blvd Chicago IL 60612	36-4091553	501c3	98,352.				PP ED LD
St Margaret of Scotland S 9833 S Throop St Chicago IL 60643	36-2367986	501c3	55,788.				PP ED SPG
St Mary of the Angels Sch 1810 N Hermitage Chicago IL 60622	36-2171072	501c3	64,908.				PP ED SPG
St Mary of the Lake Schoo 1026 W Buena Ave Chicago IL 60613	36-2171076	501c3	63,547.				PP ED
St Matthias/Transfigurati 4910 N Claremont Chicago IL 60625	36-2171089	501c3	18,074.				LD IE SPG
St Michael School 8231 S Shore Drive Chicago IL 60617	36-2171093	501c3	53,608.				PP
St Nicholas of Tolentine 3741 W 62nd St Chicago IL 60629	36-2182132	501c3	15,855.				ED LD

**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
Schedule I (Form 990), Part II and Part III.

OMB No. 1545-0047

2009

**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 United States (Schedule I (Form 990), Part I.)							
(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
St Paul/Our Lady of Vilna 2114 W 22nd Pl Chicago IL 60608	36-2258528	501c3	11,605.				SPG
St Philip Neri School 2110 E 72nd St Chicago IL 60649	36-2171115	501c3	55,481.				PP PD SPG
St Pius V School 1919 S Ashland Ave Chicago IL 60608	36-2240477	501c3	153,978.				PP ED SPG
St Procopius School 1625 S Allport St Chicago IL 60608	36-3352367	501c3	39,923.				PP LD ED
St Rita of Cascia High Sch 7740 S Western Ave Chicago IL 60620	36-2171753	501c3	11,900.				PD
St Sabina School 7801 S Throop St Chicago IL 60620	36-2171123	501c3	157,817.				PP SPG
St Scholastica Academy 7416 N Ridge Blvd Chicago IL 60645	36-3716438	501c3	18,250.				PD SPG
St Stanislaus Kostka Scho 1255 N Noble St Chicago IL 60642	36-2171128	501c3	12,642.				PP ED PD
St Sylvester School 3027 W Palmer Sq Chicago IL 60647	36-2488067	501c3	29,105.				PP ED LD

**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
Schedule I (Form 990), Part II and Part III.

OMB No. 1545-0047

2009

**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 United States (Schedule I (Form 990), Part I.)							
(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
St Therese School							
247 W 23rd St							
Chicago IL 60616	36-2240479	501c3	158,610.				PD PP LD
St Thomas of Canterbury S							
4827 N Kenmore Ave							
Chicago IL 60640	36-2240480	501c3	48,335.				PP PD LD
St Thomas the Apostle Sch							
5467 S Woodlawn Ave							
Chicago IL 60615	36-2171144	501c3	94,703.				PP
St Turibius School							
4120 W 57th St							
Chicago IL 60629	36-2430761	501c3	24,703.				PP ED
St Viator School							
4140 W Addison St							
Chicago IL 60641	36-2171148	501c3	14,425.				PP ED SPG
St Walter School							
11741 S Western Ave							
Chicago IL 60643	36-2337889	501c3	99,209.				PP
Visitation School							
900 W Garfield Blvd							
Chicago IL 60609	36-3648506	501c3	99,687.				PP ED SPG
DePaul University							
2320 N Kenmore							
Chicago IL 60614	36-2167048	501c3	94,023.				BUS SPG
Inner-City Teaching Corps							
300 N Elizabeth St, Suite							
Chicago IL 60607	36-3764476	501c3	97,250.				SR PD SPG

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

Open to Public Inspection

Employer identification number

36-3490557

Part I	Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)
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BAA	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	TEEA4001	01/30/10	Schedule 1-1 (Form 990) 2009
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Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and 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	5,604	4,750,023.			
Scholarships to teachers - leadership development	17	60,032.			
Scholarships to teachers - math/science	14	17,500.			

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 reviewed each year to ensure they meet outlined criteria (in City of Chicago, student population has over 20% qualify for free or reduced lunch and participate in Title I programs). Overall schools report annually on a number of indicators including financial viability, enrollment, student academic performance, and demographic characteristics of students served. Renewable scholarship awards often include regular progress monitoring and reporting by the individual schools on students. Patrons Program funds are only distributed upon signed agreement of Patron, principal and Big Shoulders and requires substantiation through receipting or accounting of use of funds. Programmatic and capital support requires a minimum of annual reports on use of funds and demonstrated measurable objectives met through the funding. Operating grants are distributed to the schools via the Archdiocese of Chicago and a quarterly report is submitted with actual use of the grants by category. Big Shoulders 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) 2009

SCHEDULE J
(Form 990)Department of the Treasury
Internal Revenue Service**Compensation Information****For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

- **Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.**
► **Attach to Form 990.** ► **See separate instructions.**

OMB No 1545-0047

2009**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
☐ Travel for companions
☒ Tax indemnification and gross-up payments
☐ Discretionary spending account

- ☐ Housing allowance or residence for personal use
☐ Payments for business use of personal residence
☒ Health or social club dues or initiation fees
☐ Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes on line 1a are 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 the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- ☒ Compensation committee
☐ Independent compensation consultant
☐ Form 990 of other organizations

- ☐ Written employment contract
☒ Compensation survey or study
☒ Approval by the board or compensation committee

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:

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 lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

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.

If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

9

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

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

Schedule J (Form 990) 2009

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 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. These dues are not included in the executive director's taxable income.
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 taxable stipend is also paid to cover any taxes which might be incurred.

Pt I Line 7 An annual bonus is paid to the executive director depending upon reaching various targeted goals during the year.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered 'Yes'**
on Form 990, Part IV, lines 29 or 30.
► **Attach to Form 990.**

OMB No 1545-0047

2009

**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	X		200.	sale of comp property
5 Clothing and household goods	X		1,145.	sale of comp property
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	30	679,837.	Avg high/low sale 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	X	13	1,622.	sale of comp property
19 Food inventory	X	3	419.	retail cost
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (prizes for fundraising events)	X	164	221,581.	sale of comp property
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) 2009

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.

[illegible]

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

Big Shoulders Fund

Employer identification number

36-3490557

Pt VI-A, Line 2 The Board of Directors has 170 members. The
organization is actually governed by the Executive
Committee, which consists of 25 members.

Pt VI-B, Line 12c The conflict of interest policy covers any director,
principal officer, or member of a committee with
authority to take action on behalf of the Board of
Directors. An annual notice is sent to the people
covered under the policy to remind them of their
duties regarding potential conflicts of interest.
Any such person is required to disclose any potential
conflict of interest to the Board prior to the
proposed transaction taking place. The Board
will then review all relevant information and decide
if a conflict of interest exists. If the Board decides
a conflict of interest exists, the person is prohibited
from participating in any discussion or vote on that
matter. All Board members are also required annually
to report any family & business relationships that
must be disclosed on Form 990.

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
John A. Canning, John Buck II - business relationship
John A. Canning, John Buck III - business relationship
John A. Canning, Harry Kraemer - business relationship

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John A. Canning, Robert Mariano - business relationship

John A. Canning, Larry Martin - 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

Patrick Moore, William Boris - business relationship

Frank Clark, Sue Gin McGowan - business relationship

Frank Clark, James Compton - business relationship

Frank Clark, Lester McKeever - business relationship

Michael Murphy, Christopher Murphy - business relationship

Richard Terry, Frank Clark - business relationship

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John Buck II, John Buck III - family 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 January 2010.

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-B, Line 11A The tax return is reviewed by the Executive

Director and Co-Chairman and distributed to

the Executive Committee prior to filing.

Part VIII, Line 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 which were deducted from

gross revenue.

Pt IX, Lin 24d As described above, agency receipts are not

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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>2,558.</u>	<u>agency (pass-through) transactions. - See</u>
Grants Of	<u>560,564.</u>	<u>supporting schedule reconciling grant expenses</u>
Revenue	<u>0.</u>	<u>and net expense.</u>

Schedule D, Supplemental Financial Statements

Part VII Investments - Other Securities

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Other:		
Pegot Endowment Fund	116,443.	FMV
Archstone Fund	2,007,619.	FMV
Berens Global Value Fund	1,570,287.	FMV
Capital Guardian	1,504,559.	FMV

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
	LD - Leadership Award Program
	CG - Capital 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
	SOP - Operating grant designated for schools
	IE - Inclusive Education Program
	SCH - Special scholarships

Supporting Statement of:

Form 990 p 2/Line 4a Expenses

Description	Amount
Total Grant/Assistance Payments	4,750,023.
Less: Agency payments	-81,748.
Net Grant Expense 4,668,275	
Other Expenses	232,325.
Net Program Expense:	
Total	<u>4,900,600.</u>

Supporting Statement of:

Form 990 p 2/Line 4b Expenses

Description	Amount
Total Grant/Assistance Payments	3,137,469.
Less: Agency payments	-325,717.
Net Grant Expense 2,811,752	
Other Expenses	261,973.
Net Program Expense:	
Total	<u>3,073,725.</u>

Supporting Statement of:

Form 990 p 2/Line 4c Expenses

Description	Amount
Total Grant/Assistance Payments	3,300,902.
Less: Agency payments	-321,943.
Net Grant Expense 2,978,959	
Other Expenses	323,887.
Net Program Expense:	
Total	<u>3,302,846.</u>

Supporting Statement of:

Form 990 p 2/Other Expenses-1

Description	Amount
Total Grant/Assistance Payments	560,564.
Less: Agency payments	-560,564.
Net Grant Expense 0	

Continued

Supporting Statement of:

Form 990 p 2/Other Expenses-1

Description	Amount
Other Expenses	2,558.
Net Program Expense:	
Total	<u>2,558.</u>