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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.irs.gov/form990.

OM	B F	W)	134	3-UU	47
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	_	_	_	_	

2013

<u> </u>	For the 2013 calen	<u> </u>	, 2013, and end	ng Jun			014	
В	Check if applicable	C Name of organization Big Shoulders Fund			D Emptoy	er Identificat	ion Number	
	Address change	Doing Business As				349055	7	
	Name change	Number and street (or P O box if mail is not delivered to street address)	Roon	√suite	E Telepho	ne number		
	Initial return	212 W Van Buren Street	900)	(31:	2) 751	-8337	
	Terminated	City or town, state or province, country, and ZIP or foreign postal code	•			·		
	Amended return	Chicago	IL 60607		G Gross re	eceipts \$ 2	5,572,883.	
	Application pending	F Name and address of principal officer	11 00007	_		for subordina		X
			IL 60607	1				Ħ,
	Tour our most atotus	Joshua Hale 212 W Van Buren, Suite 900 Chicago		If 'No,'	attach a list. (s	included? see instruction	ns)	Ш.
<u>. </u>	Tax-exempt status	11	7(a)(1) or 527	-}		_		
<u>J</u>		w.bigshouldersfund.org			exemption nui			
K	Form of organization	X Corporation Trust Association Other ►	L Year of forma	tion 198	5 M/s	itate of legal d	lomicile IL	
Pa								
	-	be the organization's mission or most significant activities.					support Cath	
رە		erve the poor and disadvantaged in the needlest parts of						
Activities & Governance		ss to quality education for nearly 24,000 children, of w						
١		BSF raises & provides funds for scholarships, capital and					tional environ	men
8		x I if the organization discontinued its operations or d				sets		
9		ting members of the governing body (Part VI, line 1a)				3		2
တ္မ		dependent voting members of the governing body (Part VI, I				4		2
쁥		of individuals employed in calendar year 2013 (Part V, line 2	,			5		2
흫		of volunteers (estimate if necessary)				6	4,	<u>33</u>
Ā		d business revenue from Part VIII, column (C), line 12				7a		0
\dashv	b Net unrelated	business taxable income from Form 990-T, line 34				7b		
					rior Year		Current Yea	
ا و		and grants (Part VIII, line 1h)			<u>,260,5</u>	90.	21,639,5	<u> 15</u>
로!	_	ice revenue (Part VIII, line 2g)			 			
Revenue		come (Part VIII, column (A), lines 3, 4, and 7d)			651,5		355,7	
۳ ا		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			-680,0		-1,005,2	<u> 280</u>
${}$	12 Total revenue	 add lines 8 through 11 (must equal Part VIII, column (A), 	, line 12)	- 21	,232,1	45.	20,989,9	<u> 166</u>
		milar amounts paid (Part IX, column (A), I ines 1-3)			,594,8	80.	18,656,4	<u> 190</u>
	14 Benefits paid	to or for members (Part X/column (A), line 4)				0.		0
_	15 Salaries, othe	er compensation, employee benefits (Part IX, column (A), line	es 5-10)	. 1	,559,9	88.	1,701,6	30
ě	16a Professional	fundrasing fees နုနartျသျှင္ချဖျက္မြာ (A) ပြုမှ 11e)				0.	55,0	000
Expenses								and the last
찗		1161						
ŀ	17 Other expens	es (Part IX, column (A) lines 11a-11d, 11f-24e)		• —	197,2		362,7	
		es Add-lines 13-17 (must equal Part IX, column (A), line 25)			<u>,352,1</u>		20,775,8	<u> 171</u>
امب	19 Revenue less	expenses Subtract line 18 from line 12		· 7	,879,9	84.	214,0	95
2 5				Beginnir	ng of Curren	t Year	End of Year	
Assets		Part X, line 16)			,088,4		72,222,1	
	21 Total liabilities	s (Part X, line 26)	<i></i> .	·2	,029,0	88.	6,282,0) <u>54</u>
S. P.	22 Net assets or	fund balances Subtract ine 21 from line 20	.	. 60	,059,3	81.	65,940,0	98
lea d	Signatu				,,,,,	:1		
			tatements and to the h	pet of my know	adoe and beli	of it is this o	orrant and	
comp	lete Declaration of prepar	dare that I have examined this return, including accompanying schedules and st er (other than officer) is based on all information of which preparer has any know	wledge	ood of my MIOW	aage ein beil	.,	ordu, and	
	.			· ·	ul	22/1/		
e:-	Signatu	re of officer		Da	te '/	//		
Sig He	յո լ ՝			Drogij	lont c a	hiof Po-	antino off	
nei		hua Hale		Presid	ient & C.	niei Exe	cutive Off	100
		reparer's name Preparer's signature	Date			T. PTIN		
	Printi i ype p	reparer 5 signature	Date		Check [┛"		
Pai	id				self-employe	d	_	
	parer Firm's name	BIG SHOULDERS FUND	·					
Us	e Only Firm's addre	ess V212 W VAN BUREN ST, SUITE 900			Firm's EIN	•		
		CHICAGO IL	60607		Phone no		_	
Mav	the IRS discuss thi	s return with the preparer shown above? (see instructions)					Yes X	No
<u> </u>		Reduction Act Notice, see the separate instructions.		EA0101 11/0	8/13		Form 990 (2	
				EA0101 11/0	8/13	1		

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Form	990 (2013) Big Shoulders Fund	36-3490557	Page 2
Pat	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	х
1	Bnefly describe the organization's mission		
	The Big Shoulders Fund is organized for the purpose of developin	g, managing,	
	and distributing funds for the educational system of the Archdio	cese of Chica	go.
			
2	Did the organization undertake any significant program services during the year which were not listed on the	prior	
	Form 990 or 990-EZ?	Ye:	s X 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	?	s 🗓 No
•	If 'Yes,' describe these changes on Schedule O		A
A	Describe the organization's program service accomplishments for each of its three largest program services,	as measured by expen	ises
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount others, the total expenses, and revenue, if any, for each program service reported	of grants and allocation	ons to
4 2	(Code.) (Expenses \$ 8,769,203. including grants of \$ 8,468,944.) (F	Revenue S	0.)
70		(CVC)IGC P	
	Administer over 80 distinct scholarship programs that include		-
	mentoring, enrichment and other support activities.		
	Scholarships were awarded to 6088 students at 117 schools to		
	enable them to attend Catholic schools.		
	See supporting schedule reconciling grant expenses and net expen	<u>se.</u>	_
	See also 2013/14 report attached on Schedule O.		
			_
4 b	(Code) (Expenses \$ 2,299,758. including grants of \$ 2,196,246.) (F	Revenue \$	0.)
	Distributed grants to 35 schools as part of the Patrons Program,		
	an adopt-a-school Program which pairs financial resources with		
	business expertise at over 61 schools.		
	See supporting schedule reconciling grant expenses and net expen	se.	
	See also 2013/14 report attached on Schedule O.	= =	
			
			-
			-
			
4 0	(Code) (Expenses \$ 7,989,441. including grants of \$ 7,372,051.) (F		0.)
	Distribute grants and support to over 90 inner-city Catholic schools to ensure schools can		
	and efficiently. Support includes operating grants that enable schools to continue to be	accessible to stu	idents. In_
	addition, Big Shoulders administers over 15 programs in 60 schools involving over 500 teach	ers to improve inst	ruction and
	learning through leadership and professional development, graduate level course work	and access to high	quality
	curricula with focus on math, science and literacy. Support innovative, measura	ble outcomes in b	pefore and
	after school programming in 30 elementary schools whose participants have shown a or		
	on standardized tests over counterparts not participating regularly in the program.		
	needed capital and programmatic support to ensure a safe, effective learning en		
	students.		_ =
	See supporting schedule reconciling grant expenses and net expen	se.	
	See also 2013/14 report attached on Schedule 0.		-
	bee also lots/11 lepoit accaoned on bonedate of		
-4	Other program services (Describe in Schedule O)		
	(Expenses \$ 1,770. including grants of \$ 619,249.) (Revenue \$	•).)
	Total program service expenses ► 19,060,172.		
BAA		Fo	m 990 (2013)

Big Shoulders Fund Form 990 (2013) Page 3 36-3490557 **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Х 3 Х 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Х 6 7 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes, X 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation Х 9 Х 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х 11 a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total Х 11 b X 11 c X 11 d X e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X... 11 e f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X. Х 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete X Schedule D. Parts XI, and XII . . . 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X X Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. 13 14a Did the organization maintain an office, employees, or agents outside of the United States?...... X 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, Х 14b Х 15 X 16 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 (see instructions) 17 X Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

X

Х

X

18

19

20

20 b

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'

20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H

٠			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts Land II	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22	х	
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? If 'Yes,' complete Schedule J	23	х	
24 a	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, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		х
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
t	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? If 'Yes,' complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
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)			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b	х	i
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
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? If 'Yes,' complete Schedule R, Part I	33		x
-	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36_		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	

BAA

Form 990 (2013) Big Shoulders Fund Statements Regarding Other IRS Filings and Tax Compliance

٠	Check if Schedule O contains a response or note to any line in this Part V			ىك
			Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	22.2
2 a	a 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		2	
ь	of at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	Ť
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	- 4		
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		х
	o If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	3 b		1
	At any time dunng 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, secunties account, or other financial account)?	4 a		х
b	olf 'Yes,' enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			<u> </u>
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
C	; If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	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 as charitable contributions?	6 a		x
b	of 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
,	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and		1	
a	services provided to the payor?	7 a	X	1 -
b	o If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	Х	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7 c		х
d	I If 'Yes,' indicate the number of Forms 8282 filed during the year	H		\vdash
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		x
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
2	as required?	7 g	L	
h	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7 h		
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		
ο.	Sponsoring organizations maintaining donor advised funds.	754	 22	<u>.</u>
3 _	sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9 a		EF-7
	Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		\vdash
	Section 501(c)(7) organizations. Enter	3.0	in the second	192
	Initiation fees and capital contributions included on Part VIII, line 12			
	o Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter			新
	a Gross income from members or shareholders	- C-45		
	o Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)		ES	
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Star Land	resis 3
	of Yes, enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.		外 ·维	1. Sept.
а	a Is the organization licensed to issue qualified health plans in more than one state?	13a	WA.LE	MARIE J.
_	Note. See the instructions for additional information the organization must report on Schedule O			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14 a	L	X
k	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	<u> </u>	

Form 990 (2013) Big Shoulders Fund 36-3490557 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

1 a	Enter the number of voting members of the governing body at the end of the tax year	接著		el Harris
b	Enter the number of voting members included in line 1a, above, who are independent 1b 27	-	1 - <u>1</u>	-
2	The state of the s			7
_	officer, director, trustee or key employee?	2	х	
•	Did the organization delegate control over management duties customanly performed by or under the direct supervision			
3	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more			
	members of the governing body?	7 a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
_	the following The governing body?	8 a	X -	
			X	
	Each committee with authority to act on behalf of the governing body?	8 b		
9	Is there any officer, director, 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	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode)	
	•		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10 a		Х
	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	401		
	operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Х
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	х	
13	Did the organization have a written whistleblower policy?	13	x	
	Did the organization have a written document retention and destruction policy?	14	X	
14	Did the process for determining compensation of the following persons include a review and approval by independent			
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	- 1	- 1	1
_	r The organization's CEO, Executive Director, or top management official	15a	X	$\vdash \vdash$
		\vdash		
I.	Other officers of key employees of the organization	15 b	X	<u> </u>
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)	-		-
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40		
	taxable entity during the year?	16a		X
ŧ	olf 'Yes,' did the organization follow 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	405	44	
	organization's exempt status with respect to such arrangements?	16 b		Щ.
	tion C. Disclosure			
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 inspection. Indicate how you make these available Check all that apply	for pu	blic	
	Own website			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year	de to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	n		
		 12) 1	753 - 8	8337
RΔΔ	TEFANIOR OZIOZIS			2013)

Part Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

X

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
- 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, if any. See instructions for definition of 'key employee.'
- 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 neither the organization	nor any rel	ated o	rgan	ızati	on c	ompe	nsate	ed any current officer, o	director, or trustee	
	(C)									
(A) Name and Title	(B) Average hours per week (list	one bo	a area area d		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation			
	any hours for related organiza- tions below dotted line)	Individual trustee or director			(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations			
_(1)_James_Compton	1.00									
Exec Committee		Х						0.	0.	0.
(2) Frank Considine	1.00									
Exec Committee		Х						0.	0.	0.
(3) Mary Brian Costello	1.00									
Exec Committee		Х						0.	0.	O.
(4) Lester Crown	1.00									
Exec Committee		х						0.	0.	0.
(5) Kent Dauten	1.75									
Exec Committee		х						0.	0.	0.
(6) Mary Dempsey	1.00									
Exec Committee		x						0.	0.	0.
(7) William Devers	1.75									
Exec Committee		Х						0.	0.	0.
(8) Daniel Doherty	1.50									
Exec Committee		Х						0.	0.	0.
(9) David Dury	1.00									
Exec Committee		Х						0.	0.	0.
(10) Michael W. Ferro	1.00									-
Exec Committee		Х						0.	0.	0.
(11) James A. Gordon	1.00									
Exec Committee		Х						0.	0.	0.
(12) Peter H. Huizenga	1.00							_		
Exec Committee		х					l	0.	0.	0.
(13) Leigh-Anne Kazma	1.00									
Exec Committee		х					l	0.	0.	0.
(14) Christine E. Kelly	2.50									
Exec Committee	L	Х						0.	0.	0.

•	(B)	(C)								
(A)	Average	Position Average (do not check more than one		(D)	(E)	(F)				
Name and title	hours box, unless person is per officer and a directo		or/trustee)		Reportable compensation from	Reportable compensation from	Estimated amount of other			
	week (list any	우 콧	JS.	皇	<u>~</u>	e E	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
	hours for	individual or director	탈	Officer	yen	Highest co	意	(,. —,	organization and related
	related organiza	individual trustee or director	nstitutional trustee	-	Key employee	8 8	ļ `			organizations
	- tions below] Z	2		/ee	🕏				0
	dotted line)	8	stee			isi				
						٦	l			
(15) Thomas E. Lanctot	1.00									
Exec Committee]	х						0.	C	0.
(16) William T. Lynch	2.80									
Exec Committee	l	х						0.	C	0.
(17) Anthony M. Mandolini	1.50									
Exec Committee]	Х						0.	C	0.
(18) Michael E. Murphy	1.00									
Exec Committee	1	х						0.	C	0.
(19) Alan F. Myers	3.25		П							
Exec Committee	1	Х						0.	C	0.
(20) Thomas A. Reynolds	1.00									
Exec Committee		Х						0.	C	0.
(21) Giancarlo Turano	2.50									
Exec Committee		Х			,			0.	C	0.
(22) Christopher Valenti	1.00									
Exec Committee		Х						0.	C	0.
(23) Arthur R. Velasquez	1.00									
Exec Committee		Х	Ш			<u> </u>	L	0.	C	0.
(24) Kenneth J. Velo	25.00									
<u>Co-Chairman</u>		Х	Ш	Х		<u></u>		4,425.	C	0.
(25) John A. Canning J. Jr.	15.00		l							
Co-Chairman		Х	نـــا	Х			Ļ	0.	C	0.
1 b Sub-total			٠.	• •	• •			4,425.	_	0.
c Total from continuation sheets to Part VII, Section					٠.			675,993.		77,852.
d Total (add lines 1b and 1c)								680,418.		77,852.
2 Total number of individuals (including but not limited to	o those I	isted	abo	ove)	who	rece	eive	d more than \$100,0	000 of reportable	compensation
from the organization 3										
										Yes No
3 Did the organization list any former officer, director, or		•				_	-	•		3 Y
on line 1a? If 'Yes,' complete Schedule J for such indi										1
4 For any individual listed on line 1a, is the sum of repo the organization and related organizations greater that	rtable ∞ n \$150 (mpe	nsat <i>If 'Y</i>	ion a	and	other nlete	. coi	mpensation from		
such individual			" .							4 X
5 Did any person listed on line 1a receive or accrue con	npensati	on fr	om a	any (unre	lated	org	anization or individ	lual	
for services rendered to the organization? If 'Yes,' cor	nplete S	ched	ule .	J for	suc	h per	rson			5 X
Section B. Independent Contractors										
Complete this table for your five highest compensated compensation from the organization. Report compens										vear
(A)						·		(B)		(C)
Name and business addres	s							Description o	f services	Compensation
Loyola University 820 N. Michigan Ave Cl	hicag	0		IL	. 6	5061	11	prof developmen	t for schools	256,529.
	nicag		_	IL		5063		prof developmen	1	232,628.
	hicag			IL	_			prof developmen		111,737.
Olympia Fields Country Club 2800 Country Club Drive Ol			lds	_	_	5046		golf outing		127,660.
	hicag			IL				prof developmen		217,215.
2 Total number of independent contractors (including bi	ut not lim	nited	to th	ose						1.2000年 (2000年) (2000
\$100,000 of compensation from the organization	5									THE STATE OF THE S
BAA		TEEAC	108	11/1	1/13					Form 990 (2013)

Form 990 (2013) Big Shoulders Fund Part VIII Statement of Revenue

	Check if Schedule O contains a response or note to any line in this Part VIII										
			-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514				
TS S	1 a	Federated campaigns	1a 28,497.								
폴톡		· -	1b 0.	1							
윤호		·	1c 10,858,002.	1	!						
દ્ર≅			4 1	1							
늉휰			<u> </u>	-							
ΣΞ	е	Government grants (contributions)	1e 0.								
흔띪	f	All other contributions, gifts, grants, and									
골됨		similar amounts not included above	1f 10,753,016.								
뜯읾	g	Noncash contributions included in lines 1a-1f	\$ 869,048.								
중종		Total. Add lines 1a-1f		21,639,515.							
Ē			Business Code	21,033,313.							
	2 a										
ğ	_ L			i							
핒	b						·				
ا≩	¢										
핑	d										
₹	е										
5	f	All other program service revenue .	·	ļ							
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	g	Total. Add lines 2a-2f									
\neg	3	Investment income (including dividen	ds interest and				·				
	•			364,151.	0.	0.	364,151.				
	4	Income from investment of tax-exemp	ot bond proceeds		-	•					
	5	Royalties	•								
	-	(i) Real	(ii) Personal								
ļ	6 2	Gross rents	(,,	1							
		- I					j				
- 1		Less rental expenses									
į		Rental income or (loss)									
ł	d	Net rental income or (loss)					,				
ĺ	7 a	Gross amount from sales of (1) Securitie	s (n) Other								
		assets other than inventory 3,843,9	86.		•						
	b	Less cost or other basis									
- 1	_	and sales expenses 3,852,4	06.								
1	С	Gain or (loss)8, 4		1							
		Net gain or (loss)		-8,420.	0.	0.	-8,420.				
		o , ,		-0,420.		<u>U.</u>	-0,420.				
REVENUE	8 а	Gross income from fundraising event (not including. $\frac{5}{10,858,002}$ of contributions reported on line 1c)	2.								
OTHER RE		See Part IV, line 18	· a 598,375.]	į						
冟	b	Less. direct expenses	. b 700,443.		į						
٦	C	Net income or (loss) from fundraising	events ►	102,068.		0.	-102,068.				
		Gross income from gaming activities See Part IV, line 19	107000								
	b	Less direct expenses	. b 30,068.								
1	C	Net income or (loss) from gaming act	ıvıtıes <u> ►</u>	40,012.	0.	0.	40,012.				
		Gross sales of inventory, less returns and allowances	. a								
		Less cost of goods sold									
	С	Net income or (loss) from sales of inv									
		Miscellaneous Revenue	Business Code	ļ							
	11 a	Agency collections - see Sch	0 900099	-946,555.	0.	0.	-946,555.				
	b		900099	3,331.	0.	0.	3,331.				
	С										
	d	All other revenue			-						
	е	Total. Add lines 11a-11d		-943,224.			<u> </u>				
		Total revenue. See instructions		20,989,966.	0.		-649 540				
				120,203,300.	<u> </u>	<u> </u>	<u>-649,549.</u>				

	rt IX Statement of Functional Expen		_							
_Sec	tion 501(c)(3) and 501(c)(4) organizations must co	mplete all columns All o	ther organizations must	complete column (A)	 					
	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(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 United States See Part IV, line 21	10,119,887.	10,119,887.							
2	Grants and other assistance to individuals in the United States See Part IV, line 22	8,536,603.	8,536,603.							
3	Grants and other assistance to governments, organizations, and individuals outside the United States. 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	532,641.	163,899.	220,906.	147,836.					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	0.	0.	0.	0.					
8	Pension plan accruals and contributions	963,506.	421,376.	308,125.	234,005.					
	(include section 401(k) and 403(b) employer contributions)	24,857.	14,895.	2,173.	7,789.					
9	Other employee benefits	88,350.	41,377.	28,973.	18,000.					
10	Payroll taxes	92,276.	37,029.	32,552.	22,695.					
11	Fees for services (non-employees)									
	Management	0.	0.	0.	0.					
	Legal	0.	Ò.	0.	0.					
	: Accounting	37,350.	0.	37,350.	0.					
	J Lobbying	0.	0.	0.	0.					
	Investment management fees	55,000.	0	50.000	55,000.					
	Other (If line 11g amt exceeds 10% of line 25, column	50,000.	0.	50,000.	0.					
	(A) amount, list line 11g expenses on Schedule O) L	438,745.	317,751.	89,648.	31,346.					
	Advertising and promotion	39,277.	17,943.	5,311.	16,023.					
13	Office expenses	212,526.	49,715.	50,889.	111,922.					
14	Information technology	33,946.	9,955.	17,943.	6,048.					
15	Royalties	0.	0.	0.	0.					
16 17	Travel	66,474. 99,587.	26,022. 67,445.	26,126. 16,034.	14,326.					
18	Payments of travel or entertainment expenses for any federal, state, or local	99,567.	07,445.	16,034.	16,108.					
	public officials	. 0.	0.	0.	0.					
19	Conferences, conventions, and meetings	5,913.	2,600.	3,313.	0.					
20	Interest	0.	0.	0.	0.					
21 22	Depreciation, depletion, and amortization	0. 57,509.	0.	17 156	0.					
23	Insurance	8,386.	23,679. 1,689.	17,156. 5,609.	16,674. 1,088.					
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	0,300.	1,005.	3,003.	1,000.					
	Credit Card Fees	33,699.	0.	0.	33,699.					
	Food & Meals	94.244.	23,212.	38,454.	32,578.					
	Agency Exp - see Sch O	-814,905	-814,905	0.	0_					
	All other expenses									
	Total functional expenses. Add lines 1 through 24e	20,775,871.	19,060,172.	950,562.	765,137.					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)									
BAA					Form 990 (2013)					

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	28,247.	1	589,064.
	2	Savings and temporary cash investments	8,013,523.	2	10,324,924.
ŀ	3	Pledges and grants receivable, net	15,773,257.	3	17,123,769.
- 1	4	Accounts receivable, net	0.	4	0.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			, i
		L	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoning organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0.	6	0.
Ą	7	Notes and loans receivable, net	0.	7	0.
S S E T	8	Inventones for sale or use	0.	8	0.
TS	9	Prepaid expenses and deferred charges	34,645.	9	70,979.
١"	•		31/013.		,,,,,,,,
	тиа	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
	b	Less accumulated depreciation	347,135.	10 c	289,626.
	11	Investments – publicly traded secunties	6,385,525.	11	6,098,044.
	12	Investments – other securities See Part IV, line 11	31,472,918.	12	37,714,410.
	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	33,219.	15	11,336.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	62,088,469.	16	72,222,152.
	17	Accounts payable and accrued expenses	189,387.	17	218,588.
	18	Grants payable	1,642,401.	18	5,881,116.
ı	19	Deferred revenue	192,300.	19	182,350.
L	20	Tax-exempt bond liabilities	0.	20	0.
Å	21	Escrow or custodial account liability Complete Part IV of Schedule D	5,000.	21	
A B I L I T	22	Loans and other 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.
1	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
E S	24	Unsecured notes and loans payable to unrelated third parties	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	5.	25	
l	26	Total liabilities. Add lines 17 through 25	2,029,088.	26	6,282,054.
NET		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.		, <u> </u>	= =
ASSETS	27	Unrestricted net assets	24,683,234.	27	27,731,457.
Ĕ	28	Temporanly restricted net assets	29,741,390.	28	32,243,884.
	29	Permanently restricted net assets	5,634,757.	29	5,964,757.
P F		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.	-		
F.020	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	1
Ļ	32	Retained earnings, endowment, accumulated income, or other funds		32	
BALAZCES	33	Total net assets or fund balances	60,059,381.	33	65,940,098.
Ĕ	34	Total liabilities and net assets/fund balances	62,088,469.	34	72,222,152.
DA.					Form 900 (2013)

Forn	n 990 (2013) Big Shoulders Fund 36-	<u> 3490</u>	<u>557</u>		Pa	ige 12
	Reconciliation of Net Assets					
_ •	Check if Schedule O contains a response or note to any line in this Part XI		· · · ·		<u></u>	. x
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	0,9	<u> 39,9</u>	966.
2	Total expenses (must equal Part IX, column (A), line 25)	2	_ 2	0,7	75,8	3-7-1
3	Revenue less expenses Subtract line 2 from line 1	3		2:	14,0	95.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6	0,0	59,3	81.
5	Net unrealized gains (losses) on investments	5		5,78	39,1	22.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-12	22,5	500.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B)).	10	6.	5,94	<u>10,0</u>	98.
Pa	成义道 Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. <u> </u>
			_		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_			
	If the organization changed its method of accounting from a pnor year or checked 'Other,' explain in Schedule O.					
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		[2 a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
ı	were the organization's financial statements audited by an independent accountant?			2 b	х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate		Γ			
	basis, consolidated basis, or both X Separate basis Consolidated basis Both consolidated and separate basis					
,	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audi	t	-			
	review, or compilation of its financial statements and selection of an independent accountant?		· ·	2 c	Х	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
3 a	a 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?		[3 a		_x_
ı	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required at	ıdıt				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b		
RΔΔ				-orm	990 (2	2013)

Form 990

Continuation Sheet for Form 990

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

36-3490557

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and

Highest Compensated Er	(B)			((;)			(D)	(E)	(F)		
Name and Title	` '	Posi	tion (_	-	at apply)	Reportable		Estimated		
Name and Tide	Average hours per week (list any hours for related organizations below dotted line)		Institutional trustee		Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	esumateo amount of other compensation from the organization and related organizations		
26 John Croghan Vice Chairman	1.00_	х		х				0.	0.	0.		
27 Andrew J. McKenna Vice Chairman	1.00	х		х				0.	0.	0.		
28 James J. O'Connor Co-Chairman	30.00	х		х				0.	0.	0.		
29 Joshua Hale President & CEO	70.00			х				366,922.	0.	26,469.		
30 Linda Rossi CFO	40.00			х				96,103.	0.	19,018		
31 Rebecca Lindsay-Ryan Sr Director, Academic Prgm	40.00					х		112,311.	0.	22,580		
	40.00					х		100,657.	0.	9,785		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspiration

Employer identification number

Schedule A (Form 990 or 990-EZ) 2013

Big	Sì	noulde											19055			
<u> </u>) L ₁	Reaso	n fo	r Pub	lic Charity	/ Status	(All organizations	must c	omplet	e this p	oart.) S	ee inst	ruction	IS.		
The o	rgai						is (For lines 1 through		•	,						
1	Ш						ition of churches describ		ction 17	O(b)(1)(۹)(i).					
2		A school	desc	ribed ın	section 170	(b)(1)(A)(ii). (Attach Schedule E.))								
3		A hospit	al or a	cooper	rative hospita	I service o	organization described is	n sectio r	n 170(b)	(1)(A)(iii).					
4	\Box	A medic	al rese	earch or	rganization o	perated in	conjunction with a hosp	oital desc	nbed in	section	170(b)(1)(A)(iii)	Enter th	ne hospital's	3	
		name, ci	•													
5		An organ	nizatio)(A)(i	n opera v). (Co	ited for the bi mplete Part I	enefit of a	college or university ow	vned or o	perated	by a gov	emmen	tal unit d	escribed	In section		
6	Ш				_	_	ernmental unit described		-		-					
7		ın sectio	n 170	(b)(1)(<i>l</i>	4)(vi) . (Com	plete Part			govern	mental u	nit or fro	m the ge	neral pu	ıblıc describ	ed	
8	Ц	A comm	unity t	rust des	scribed in se	ction 170	(b)(1)(A)(vi). (Complete	Part II)								
9		from acti investme June 30,	vities ent inc 1975	related ome an . See se	to its exempled unrelated to ection 509(a	t functions ousiness t)(2). (Con	nore than 33-1/3% of its - subject to certain exaxable income (less secondlete Part III)	ceptions, ction 511	and (2) tax) fror	no more n busine	than 33 sses ac	3-1/3% of	its supp	ort from gro	oss	
10	Ц	_		_	•		clusively to test for public	•								
11	Ш	more pu	blicly s	supporte	ed organızati	ons descr	clusively for the benefit on the discrimination sold in section 509(a)(1 nand complete lines 110) or section	on 509(a	functions a)(2) Sec	of, or o	arry out n 509(a)	the purp (3). Che	oses of one ck the box t	or that	
		а Ту	pe I	b	Type II	С	Type III - Function	nally integ	grated	•	# 🗍 :	Type III -	- Non-fu	inctionally in	ntegrat	ed
е		By check other that section 5	n four	ndation	I certify that i managers ar	the organi nd other th	zation is not controlled on nan one or more publicly	directly or support	r indirect ed orgar	ly by one	e or mor describ	e disqua ed in sec	lified per tion 509	rsons (a)(1) or		
f		If the org	anıza	tion rec			ination from the IRS that			e II or Ty	pe III su	pporting	organiza	ation,		. 🗌
g		Since Au	igust 1	17, 2006	6, has the on	ganızatıon	accepted any gift or co	ntributio	n from a	ny of the	followin	g persor	ıs?			
															Yes	No
		be	low, th	ne gove	ming body of	f the supp	trols, either alone or togorted organization?							. 11 g (i)		
		(ii) A 1	amıly	membe	er of a persor	describe	d ın (ı) above?							. 11 g (ii)		
		(iii) A	35% c	ontrolle	d entity of a	person de	scribed in (i) or (ii) above	e?						· 11 g (iii)		_
h		Provide 1	the fol	lowing i	information a	bout the s	supported organization(s	s)						1 3 ()	<u> </u>	
		(i) Name o organ	f suppor	ted	(II) EII	N	(iii) Type of organization (described on lines 1-9 above or IRC section (see Instructions))	(iv) is organiza column (i) your go docur	ation in } listed in	(v) Did you the organiz column (i) supp	zatron in	(vi) Is organiza colum organized U S	ition in n (f) f in the	(vii) Amoun sup	t of mone	atary
								Yes	No	Yes	No	Yes	No			
								Ī		,						
(A)					<u> </u>			1								
								_								
(B)																
(C)					_											
(D)																
_																
(E)														_		
Total									H	:						

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

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 or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	Section A. Public Support														
Cale: begi	ndar year (or fiscal year nning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total								
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	11,727,973.	11,513,475.	18,839,721.	21,260,590.	21,639,515.	84,981,274.								
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0.	0.	0.	0.	0.	0.								
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0.	0. 0. 0.		0.	0.									
4	Total. Add lines 1 through 3	11,727,973.	11,513,475.	18,839,721.	21,260,590.	21,639,515.	84,981,274.								
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)													13,878,601.	
6	Public support. Subtract line 5 from line 4														
Sec	from line 4														
Cale	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total								
7	Amounts from line 4	11,727,973.	11,513,475.	18,839,721.	21,260,590.	21,639,515.	84,981,274.								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	432,034.	246,044.	203,738.	458,432.	364,151.	1,704,399.								
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0.	0.	0.	91,133.	0.	91,133.								
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0.	2,840.	0.	0.	3,331.	6,171.								
11	Total support. Add lines 7 through 10						86,782,977.								
12	Gross receipts from related activities	es, etc (see instruc	ctions)			12									
13	First five years. If the Form 990 is organization, check this box and s	s for the organization top here	on's first, second, t	hird, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ □								
Sec	tion C. Computation of Pul	blic Support P	ercentage												
	Public support percentage for 2013	•	•				81.93 %								
15	Public support percentage from 20	112 Schedule A, Pa	art II, line 14	• • • • • • • • •		15	77.60 %								
16 a	33-1/3% support test — 2013. If the and stop here. The organization of	the organization di jualifies as a public	d not check the bo ly supported organ	x on line 13, and the	ne line 14 is 33-1/3	% or more, check	this box								
b	33-1/3% support test — 2012. If the and stop here. The organization of	he organization dic quatifies as a public	I not check a box of cly supported orga	on tine 13 or 16a, a nization	nd line 15 is 33-1/3	3% or more, check	this box								
17 a	10%-facts-and-circumstances te or more, and if the organization mets the 'facts-a	ets the 'facts-and-	·circumstances' tes	st, check this box a	ind stop here. Exp	lain in Part IV how	_								
	b 10%-facts-and-circumstances test — 2012. 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 organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or 1	17b, check this box	and see instruction	ons▶								

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
Calen	dar year (or fiscal yr beginning in) >	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include any unusual grants)						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any 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						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		<i>;</i>				
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support						
	dar year (or fiscal yr beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)				1		
	Total Support. (Add Ins 9,10c, 11 and 12.)						
	First five years. If the Form 990 is organization, check this box and s	top here		hird, fourth, or fifth	tax year as a sect	ion 501(c)(3)	▶ 🗍
	tion C. Computation of Pu					<u> </u>	
	Public support percentage for 2013		•				%
	Public support percentage from 20					16	*
	tion D. Computation of Inv					····	
17	Investment income percentage for			-		<u> </u>	*
18	Investment income percentage fro		•				<u>*</u>
	33-1/3% support tests — 2013. If is not more than 33-1/3%, check the 23-1/3% outport tests — 2013. If	nis box and stop h	ere. The organizat	tion qualifies as a p	publicly supported	organization	▶ [
	33-1/3% support tests — 2012. If line 18 is not more than 33-1/3%, or Private foundation. If the organiz	check this box and	stop here. The or	ganızatıon qualifie	s as a publicly sup	ported organization	า์ ▶ ∐
20 BAA	Filivate touridation. It the organization	ation did not dieck	TEEA0403				90 or 990-FZ) 2013

Schedule A (Form 990 or 990-EZ) 2013

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Big Shoulders Fund 36-3490557 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 Aggregate contributions to (during year) . . . Aggregate grants from (during year) Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 Tax Year 2 a 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year **>** \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) No and section 170(h)(4)(B)(ii)? In Part XIII, 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 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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), 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. 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 (ASC 958) relating to these items

Schodula B (Farm 000) 2040								`	_
Schedule D (Form 990) 2013 Big S	Shoulders Fun		orical	Tracurac	r Other	36-349		ontine	Page 2
Using the organization's acquisition items (check all that apply):									iea)
a Public exhibition b Scholarly research		d Loan e Other		ange programs					-
c Preservation for future genera	tions		· —				-		
Provide a description of the organi Part XIII.		nd explain how th	ey furth	er the organizatio	n's exemp	ot purpose in			
5 During the year, did the organization to be sold to raise funds rather that	on solicit or receive don to be maintained as	onations of art, hi part of the orgar	stoncal nization	treasures, or others collection?	er sımılar a	ssets	Yes	. [No
Part W Escrow and Custodia line 9, or reported an a	Il Arrangements mount on Form 9	. Complete if t 190, Part X, lin	the org ne 21.	janization ans	wered '\	es' to Form	990, 1	art IV	,
1 a Is the organization an agent, truste on Form 990, Part X?	ee, custodian, or othe	r intermediary for	contribu	utions or other as	sets not in	cluded	Yes	. [XNo
b If 'Yes,' explain the arrangement in	Part XIII and comple	te the following ta	able				ш	L	
-	-	_				1	Amoun	t	
c Beginning balance					. 1c				
d Additions during the year					1d				
e Distributions during the year					1e				
f Ending balance					1f				
2 a Did the organization include an am b if 'Yes,' explain the arrangement in	Part XIII Check here	o if the explantion	has be	en provided in Pa	ırt XIII		Yes	[No
Part V Endowment Funds. C	complete if the org	ganization ans	swerec				<u>0.</u>		
	(a) Current year	(b) Prior yea		(c) Two years back		hree years back		our year	
1 a Beginning of year balance	28,872,088.	 		28,256,96		,480,215		,223,	
b Contributions	330,000.	330,0	000.	93,59	2.	30,200	-	36,	<u> 176.</u>
c Net investment earnings, gains, and losses	4,665,596.	 	568.	-364,12	2. 4	,102,904	-	,719,	180.
d Grants or scholarships	363,286.	308,3	307.	335,59	3.	299,752	· ↓	317,	990.
e Other expenditures for facilities and programs	1,016,419.	 		956,58	4. 1	,006,603	. 1	,131,	095.
f Administrative expenses	50,000.	 	$\overline{}$	50,00		50,000		50,	000.
g End of year balance	32,437,979.			26,644,25	7. 28	,256,964	. 25	,480,	215.
2 Provide the estimated percentage	-	d balance (line 1	g, colum	nn (a)) held as					
a Board designated or quasi-endowr b Permanent endowment ▶		<u>6.00</u> %							
	18.00 %								
c Temporarily restricted endowment The percentages in lines 2a, 2b, ar									
3 a Are there endowment funds not in organization by	the possession of the	organization that	t are hel	d and administer	ed for the		[Yes	No
(i) unrelated organizations							. 3a(i)		х
(ii) related organizations							. 3a(ii)		Х
b If 'Yes' to 3a(II), are the related org.							. 3b		
4 Describe in Part XIII the intended in		on's endowment f	funds						
Part ¥4 Land, Buildings, and Complete if the organiz		Yes' to Form 9	990. P	art IV. line 11	a. See F	orm 990. Pa	art X. li	ne 10	
Description of property	(a) Cos	t or other basis	(b)	Cost or other	(c) Ac	cumulated		Book va	
		vestment)	D:	asis (other)	aepi	reciation			

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0.	0.		0
b Buildings	0.	0.	0.	0
c Leasehold improvements	0.	98,219.	40,925.	57,294
d Equipment	0.	0.	0.	
e Other	0.	341,537.	109,205.	232,332
otal. Add lines 1a through 1e (Column (d) must equa	al Form 990, Part X, colur	nn (B), line 10(c))		289,626

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Schedule **D** (Form 990) 2013

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
1) Financial derivatives		
(2) Closely-held equity interests	-	
(3) Other		
A) Berens Global Value Fund	1,911,413.	FMV
B) Davidson Kempner Inst Partners	3,193,575.	FMV
C) ESG Domestic Opportunity Fund	1,799,351.	FMV
D) Newport Asia Inst Fund	2,082,865.	FMV
(E) OZ Structured Products	2,581,530.	FMV
(F) Palo Alto Healthcare	2,232,780.	FMV
G) Private Advisors Stable Value Fund	3,450,516.	FMV
(H) Raptor Private Holdings	48,921.	FMV
(I) See Part VII Investments - Other Securities	-	
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)	37,714,410.	
Part VIII Investments — Program Related.		
Complete if the organization answered Y		Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(8)		
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) . > Part IX Other Assets.	es' to Form 990 F	Part IV line 11d. See Form 990. Part X, line 15.
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) . > Part IX Other Assets. Complete if the organization answered 'Y (a) Desc.		Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) . > Part IX Other Assets. Complete if the organization answered 'Y (a) Desc. (1) (2)		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) . > Part IX Other Assets. Complete if the organization answered 'Y (a) Desc (1) (2) (3)		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) . > Part IX Other Assets. Complete if the organization answered 'Y (a) Desc (1) (2) (3) (4)		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) . > Part IX Other Assets. Complete if the organization answered 'Y (a) Description (2) (3) (4) (5)		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answered 'Y (a) Description (2) (3) (4) (5) (6)		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) . > Part IX Other Assets. Complete if the organization answered 'Y (a) Desc (1) (2) (3) (4) (5) (6) (7)		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc. (1) (2) (3) (4) (5) (6) (7) (8)		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) . > Part IX Other Assets. Complete if the organization answered 'Y (a) Desc (1) (2) (3) (4) (5) (6) (7)		
(9) (10) Fotal. (Column (b) must equal Form 990, Part X, column (B) line 13) Part IX Other Assets. Complete if the organization answered 'Y (a) Desc. (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	cription	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc. (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line 13) .▶	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line 13) .▶ Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part X, column (B), line 13) .▶	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line 13) .▶ Part X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line 13) .▶ Part X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability (1) Federal income taxes	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line 13) .▶ Part X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Descention (b) must equal Form 990, Part X, column (B), line (Column (b) must equal Form 990, Pa	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line 13) .▶ Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 10 (a) Description of liability (1) Federal income taxes (2)	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Descention (b) must equal Form 990, Part X, column (B), line (B) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line (B) Part X Other Liabilities. Complete if the organization answered 'Yes' to Form (B) (a) Description of liability (1) Federal income taxes (2) (3) (4)	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc. (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line Part X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc. (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line Part X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc. (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line Part X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc. (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line Part X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	ne 15)	(b) Book value
(9) (10) Total. (Column (b) must equal Form 990, Part X, column (B) line 13) .▶ Part IX Other Assets. Complete if the organization answered 'Y (a) Desc. (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B), line Part X Other Liabilities. Complete if the organization answered 'Yes' to Form (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	me 15)	(b) Book value

Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Revenue per Audited Financial Statements With Revenue per Reconciliation of Reconciliation of Revenue per Reconciliation of Revenue per Reconciliation of Reconciliation of Revenue per Reconciliation of Reconcil	eturn.	
1 Total revenue, gains, and other support per audited financial statements	1	26,656,041.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		· · · · · · · · · · · · · · · · · · ·
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of pnor year grants		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	5,811,297.
3 Subtract line 2e from line 1	3	20,844,744.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		•
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII)		
c Add lines 4a and 4b	4 c	145,222.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	20,989,966.
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	20,775,324.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments		
c Other losses		
d Other (Describe in Part XIII)		
e Add lines 2a through 2d	2 e	<u>144,675.</u>
3 Subtract line 2e from line 1	3	20,630,649.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII)		1.15 000
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	4 c	145,222. 20,775,871.
Pan XIII Supplemental Information.		20,773,871.
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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any addition		ation
Pt_V_Line_4Donor endowment funds are used as instructed by the do		
which includes scholarships, programs, and other expenses	īsēs a	<u>s</u>
needed by the Fund. Earnings on funds designated		
by_the_Executive_Committee_to_act_as_endowments_are_us	<u>sed</u>	
to pay the Fund's administrative expenses, which may		
include_program,_management,_or_fund-raising_expenses		
Pt XI Line 4b Fund-raising expenses for events are netted against	-	
revenue on the financial statements but are reported	0-1-1	D (F 000) 0000
BAA	ocnedule	D (Form 990) 2013

Schedule Q (Form 990) 2013	Big Shoulders Fund	36-3490557	Page 5
Part XIII Supplement	al Information (continued)		
	as expenses on Form 990.		
Pt XII Line 2d	An allowance for doubtful pledges of \$12	2,500 was reported	. – – -
	as a loss on the financial statements, b	ut is not included	
	as an expense or loss on Form 990		. – – -
Pt_XII_Line_4b	Fund-raising expenses for events are net	ted_against	
	revenue on the financial statements, but	are reported	
	as expenses on Form 990.		. – – -
Pt X Line 2	The following is the text of the financial statement r	ote pertaining to uncertain tax posit	ions·
	The Fund has received a determination letter from the IRS i	ndicating that the Fund is exempt from in	icome_
	tax under Section 501(c)(3) of the Internal Revenue Co	de of 1986 and, except for taxes perta	<u>ining</u>
	to unrelated business income, is exempt from federal and st	ate income taxes. The Fund is classified	lasa
·	<pre>public_charity_under_Section_509(a) (1) and Section_170(b)</pre>)(1)(A)(vi), an organization that norm	ally_
	receives a substantial part of its support from direct	or indirect contributions from the ge	neral_
<u> </u>	<pre>public. No provision has been made for income taxes</pre>	in the accompanying financial state	m <u>ent</u> s
	as the Fund had no material unrelated business income in fi	scal years 2014 and 2013.	. – – -
			. – – -
	The Fund recognizes a tax position as a benefit onl	y if it is "more likely than not" the	<u>hat_</u> _
	the tax position would be sustained in a tax exa	mination, with a tax examination b	<u>eing</u>
	presumed to occur. The amount recognized is the	largest amount of tax benefit that	<u>it is</u>
	greater than 50% likely of being realized on examina	tion. For tax positions not meeting	<u>the</u> _
	"more likely than not" test, no tax benefit is recor	ded. The Fund does not expect the to	o <u>tal</u> _
	amount of unrecognized tax benefits to signification	ntly change in the next 12 months	·
	· 		. – – -
	The Fund has applied this criterion to all tax posit	ions for which the statute of limita	t <u>ions</u>
	remains open. Tax years open to examination by	tax authorities under the statute	o <u>f</u> _
	limitations include fiscal years ending June 20	11 through 2013. The Fund recogn	<u>iizes</u>
	interest and penalties related to unrecognized	tax benefits in interest and in	come
	tax expense, respectively. The Fund has no amounts	accrued for interest or nenalties as	e of

TEEA3305 07/01/13

Schedule **D** (Form 990) 2013

Schedule 1 (Form 990) 2013 Big Shoulders Fund	<u> 36-3490557</u>	Page 5
Supplemental Information (continued)		
June 30, 2014 and 2013. The Fund has determined that its tax	k provisions satisfy	the more
likely than not criterion and that no provision for income taxes	is required at June	30 <u>, 2014</u> .
		
		
	 	
·,		
· · · · · · · · · · · · · · · · · · ·		
	 	
·		
·		
,		
·		
		

Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

► Information about Schedule F (Form 990) and its instructions is

at www.irs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Employer Identification number

Big Shoulders Fund 36-3490557

General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection cnteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (d) Activities conducted in (b) Number of (a) Region (e) If activity listed in (f) Total offices in the region employees, region (by type) (e g , fundraising, program (d) is a program service, describe expenditures for agents, and and investments independent services, investments, specific type of in region grants to recipients contractors service(s) in region ın region located in the region) (1) Central America 0 0 investments n/a 15,936,757. (2) (3) (4) (5) (6) (7) (8) (9) (10)(11)(12)(13)(14)(15)(16)(17)3 a Sub-total 0 0 15,936,757 **b** Total from continuation sheets to Part I

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

C Totals (add lines 3a and 3b)

Schedule F (Form 990) 2013

15,936,757

Schedule F (Form 990) 2013 Big Shoulders Fund

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

(I) Method of valuation (book, appraisal, other)			:															Schedule F (Form 990) 2013
(h) Description of non-cash assistance													:				•	Schedule F
(g) Amount of non-cash assistance																	by the IRS, or for when the IRS, or for when the IRS, or for when the IRS is a second contract of the IRS is a second contract	
(f) Manner of cash disbursement																	ized as tax-exempt	
(e) Amount of cash grant														5			eign country, recogn	
(d) Purpose of grant														-			narities by the for	
(c) Region																	re recognized as chency letter	
(b) IRS code section and EIN (if applicable)																	ions listed above that a action 501(c)(3) equival	•
(a) Name of organization																	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the granitee or counsel has provided a section 501(c)(3) equivalency letter.	מייים וישוויסין כו כיייכו כו פתוויים כו פתוויים כו
-	ε	2	ල	4	<u>©</u>	(9)	ε	(8)	6	(10)	£)	(12)	(13)	(14)	(15)	(18)	2 Ente	۔ا

Page 3

Schedule F (Form 990) 2013 Big Shoulders Fund

Read III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)																			Schedule F (Form 990) 2013
(g) Description of non-cash assistance																			Schedule F
(f) Amount of non- cash assistance	ii.																		
(e) Manner of cash disbursement			6																
(d) Amount of cash grant			-																000000
(c) Number of recipients																			
(b) Region																1			
(a) Type of grant or assistance (b) Region (c) Number (d) A of recipients ca	(1)	(2)	(3)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	ВАА

	dule F. (Form 990) 2013 Big Shoulders Fund	36-3490557	Page 4
Je.	Foreign Forms		-
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	XYes	No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	· · · · · XYes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	_	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	· · · · · XYes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

TEEA3505 06/26/13

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Schedule **F** (Form 990) 2013

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities
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.

Employer identification number

Department of the Treasury Internal Revenue Service-Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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OMB No 1545-0047

Big	_Shoulders Fund					36-349055	7
Per					s' to Form 990, Part IV, li		
1	Indicate whether the organization raise				g activities Check all tha	at apply.	
а					X Solicitation of non-g		
b	H			f	Solicitation of govern		
	—			-	—	-	
С				g	X Special fundraising	events	
d	X In-person solicitations						
2 a	Did the organization have a written o employees listed in Form 990, Part V	r oral agreemen	t with any	ındıvıdual ((including officers, direct	ors, trustees or key	X Yes No
					-		
b	If 'Yes,' list the ten highest paid indivi	duais or entities organization	(tundrais	ers) pursua	nt to agreements under	which the fundraiser is to) be
	Name and address of individual	(ii) Activity	600 004	·	(iv) Gross receipts	(v) Amount paid to	(vi) Amount paid to
(1)	or entity (fundraiser)	(ii) Acavity		fundraiser dv or control	from activity	(or retained by)	(or retained by)
			of contr	dy or control	_	fundraiser listed in	organization
			Yes	T No		column (i)	
1							
	Patricia J. Hurley & Associates, Inc	consultant for award d.	ner X		10,502,526.	60,012.	10,442,514.
2							5
3					_		
4							
5		*	-				
6							
7						· ·	
8	-						
9							
10							
Total					10,502,526.	60,012.	10,442,514.
3	List all states in which the organization	n is registered o	or license	d to solicit c	contributions or has been	notified it is exempt fron	
	or licensing.						
	Illinois						
		. – – – – – -		. 		- 	
				. _		-	
				. _			
							
		. -		. -			

Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add column (a)
_			Award Dinner	Golf Outing	3	through column (c))
R			(event type)	(event type)	(total number)	
REVENU	1	Gross receipts	10,502,526.	776,188.	176,263.	11,454,977.
E	2	Less: Chantable contributions	10,303,077.	436,192.	117,993.	10,857,262.
	3	Gross income (line 1 minus line 2)	199,449.	339,996.	58,270.	597,715.
	4	Cash prizes	0.	0.	0.	0.
n	5	Noncash prizes	0.	8,372.	0.	8,372.
DIRECT	6	Rent/facility costs	4,276.	50,300.	8,403.	62,979.
	7	Food and beverages	123,902.	45,057.	64,565.	233,524.
E P E	8	Entertainment	45,091.	0.	850.	45,941.
EXPENSES	9	Other direct expenses	180,997.	155,143.	13,487.	349,627.
S	10	Direct expense summary Add lines 4 throu	=			700,443.
	11	Net income summary Subtract line 10 from				-102,728.
Par	<u>} []</u>	Gaming. Complete if the organizati \$15,000 on Form 990-EZ, line 6a.	on answered 'Yes'	to Form 990, Part IV	/, line 19, or reporte	d more than
REVEN			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
E N U E	1	Gross revenue			70,080.	70,080.
F	2	Cash prizes			26,400.	26,400.
DIRECT	3	Noncash prizes			3,230.	3,230.
C S T E S	4	Rent/facility costs			0.	0.
	5	Other direct expenses			438.	438.
	6	Volunteer labor	Yes %	Yes %	Yes %	<u> </u>
	7	Direct expense summary Add lines 2 through	gh 5 ın column (d)			30,068.
	8	Net gaming income summary Subtract line	7 from line 1, column (d) <u>.</u>		40,012.
	ls th	er the state(s) in which the organization operate organization licensed to operate gaming aco,' explain	ctivities in each of these	<u>Illinois</u> states?		لــا لـــا
		e any of the organization's gaming licenses r	evoked, suspended or te	erminated during the tax	year?	Yes XNo

Sche	dule G (Form 990 or 99	0-EZ) 201	3 Big Shoul	ders Fund		3	6-34905	57	Page 3
11	Does the organization	operate ga	aming activities with	nonmembers?				X Yes	No
12	Is the organization a gr administer charitable g	rantor, ber saming? .	neficiary or trustee o	f a trust or a me	mber of a partnership or o	ther entity formed to	· · · · · [Yes	_ XNo
42	Indicate the percentage		a catauti accepted :	_			1 1		
							133		0008
	=	-							0.00 % 0.00 %
14	•				ation's gamıng/special eve		<u>. </u>	100	<u></u>
	Name ► <u>Joshua</u> <u>I</u>	H <u>ale</u> _	-						
	Address ► <u>212 ₩</u>	Van Bı	uren, Suite	900 Chicac	go, IL 60607				
t	Does the organization I of Yes,' enter the amou of gaming revenue reta of Yes,' enter name and	int of gami ained by th	ing revenue receivene third party	d by the organiza	ne organization receives ga ation	aming revenue? and t	 he amount	Yes	ΧNο
	·		• •						
	Name •						- 		.
					- -				i
16	Gaming manager inform	mation							
	Name ► <u>Joshua</u> <u>F</u>	Hale_					_ -		
	Gaming manager comp	pensation	▶ \$	250.					
	Description of services	provided	► <u>Presiden</u>	t & CEO					
	Director/officer		X Employee		Independent contractor	or			
17	Mandatory distributions	6					,		
	state gaming license?				outions from the gaming pr			Yes	XNo
b				_	buted to other exempt orga	anizations or spent	in the		
Par	Supplement and Part III, li information (s	al Infori ines 9, 9	mation. Provide 9b, 10b, 15b, 15	the explanat	ions required by Part b, as applicable. Also	t I, line 2b, colur provide any ac	nns (iii) ar Iditional	nd (v),	
Lin	e 2b col(iii)	The f	undraising o	consultant	received some	donations di	<u>rect</u> ly		
					ver, they did no				
					r own account.		ns		
		were	forwarded to	our offi	ce for processi	ng.			
Lin	e 2b col(v)	The a	amount paid	o the fun	draiser include	d fees of S	5 000		
	.0_22 001(V)				2 for printing,		,,,,,,,,,,		
		etc.			tted separate i				
			ces for fee						 -
						 . ·			
	<u> </u>								
									

SCHEDULE I

(Form 99U)

Oepartment of the Treasury Internal Revenue Service

Name of the organization

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

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

2013

OMB No 1545-0047

2013

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► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer Identification number 36-3490557

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X Yes

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? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States General Information on Grants and Assistance Big Shoulders Fund हिन्द्री General Inform

Ratell 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. Part II can be duplicated if additional space is needed.

(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
(1) Most_Blessed_Trinity 510_Grand_Ave Waukedan_IL 60085	47-0955784	501c3	90,464.				SUU ao aa
<u>ict</u>	36-2171119	501c3	275,090.				4
<u>ic Acade</u> ue – – –	36-3377611	501c3	12,292.				
/Holy If	36-2212711	501c3	16,391.				E
<u>School </u>	36-4067306	501c3	14,500.				FR DDG
16) DePaul Academy	36-2182169	501c3	24,557.				SPG FR
(7) Epiphany_School	36-2412597	50103	168,203.				DDG'LA EC
(8) Hales Franciscan High Sch 4930 S Cottage Grove Aven Chicago IL 60615	36-3885315	50103	353,702.				Sas saa ao
	and government orga	anizations listed in the line 1 table	line 1 table				62
3 Enter total number of other organizations listed in the line 1 table.	s listed in the line 1	able				•	0

Schedule I (Form 990) (2013)

TEEA3901 07/12/13

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

Continuation Sheet for Schedule I (Form 990)

2013

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

Φ STEM STEM (h) Purpose of 7 grant or assistance SPG OP PP SPG FR SPG PP LA SPG PP ED SPG PP OP ED Continuation Page 1 ODG SPG SPG PP PD DDG DG FR CA ED Employer identification number Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) ይ 36-3490557 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 1,071,058 325,978 82,438 29,823 67,940 ,702 50,988 (d) Amount of cash 55,617 19,737 133,781 99 grant (c) IRC section if applicable 501c3 501c3 501c3 501c3 501c3 501c3 501c3 501c3501c336-2747560 36-2171703 36-3310936 36-2167764 36-2171722 36-3956710 36-2170886 36-3409095 36-2182061 36-2743254 (P) EIN Northside Catholic Academ Immaculate Conception Sch 1537 N_Lawndale Avenue Our Lady of Guadalupe Sch 7901 S.Sangamon St. . . . Our Lady of Grace School _2<u>2</u>35_g_Albany______ - 6216 N. Glenwood Avenue 2446 N.Ridgeway Ave ____ Holy Trinity High School Our Lady_of_Tepeyac_Elem (a) Name and address of organization or government _ 1443 W_Division_St___ Holy Angels School ... Josephinum_Academy__ Maternity_BVM_School 8739_S_Exchange___ _9050_S_Burley_Ave__ Leo High School _ _ __1501_N_Oakley___ Chicago IL 60660 Chicago IL 60653 Chicago IL 60622 Chicago IL 60620 Chicago IL 60642 Chicago IL 60617 Chicago IL 60647 Chicago IL 60617 Biq Shoulders Fund Chicago IL 60623 Chicago IL 60651 750 E 40th St Name of the organization

Schedule I Cont (Form 990) 2013

TEEA4001 07/12/13

Continuation Sheet for Schedule I (Form 990)

2013

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

Schedule I Cont (Form 990) 2013 œ STEM PP SPG (h) Purpose of grant or assistance ŏ LA SPG DDG IE STEM SPG DDG SPG PD OP ED SPG ΙE FR EC LA Continuation Page 2 Employer Identification number PP LA ED EC SPG ОР Park III Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II 딘 36-3490557 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 31,299 203,440 41,993 13,019 625 92,528 14,588 (d) Amount of cash grant 41.194 28,745 74,452 TEEA4001 07/12/13 (c) IRC section if applicable 501c3 36-4202108 36-2401758 36-2170859 36-2583566 36-2171734 36-4378726 36-2171069 36-2170926 36-2170923 36-3552287 (p) EIN <u> Santa Lucia Elementary Sc</u> <u>St_Agatha_Catholic_Academ</u> Our Lady of the Snows Sch 3151 W. Douglas Blvd. . . 2643 S Central Park Avenu Pope John Paul II School 3017 S. Wells Street ___ St_Agnes_of_Bohemia_Schoc M9037_S_Harper_Avenue__ 7130 S_Hamlin_Avenue___ Our Lady of Tepeyac High 4810 S Leamington Ave . (a) Name and address of organization or government Queen_of_the_Universe_ _ Sacred_Heart School_ 2906 E_96th_Street__ 1949 W 48th Street__ _2228_S_Whipple_St_ San Miguel School 4325 S_Richmond_ St_Ailbe_School_ Chicago IL 60629 Chicago IL 60609 Chicago IL 60616 Chicago IL 60619 Chicago IL 60623 Chicago IL 60638 Chicago IL 60632 Chicago IL 60617 Chicago IL 60623 Big Shoulders Fund Chicago IL 60623 Name of the organization

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.

Schedule I Cont (Form 990) 2013 œ (h) Purpose of grant or assistance 7 PP ED STEM CG DDG SPG A SPG ED SPG PD PP IE EC CG EC FR PP LA ED Continuation Page 3 DDG SPG FR PD Employer Identification number S Restite Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II. ED 36-3490557 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 19,789 12,079 6,670 973 145,822 84,233 96,346 (d) Amount of cash grant 36,721 132,082 TEEA4001 07/12/13 233, (c) IRC section if applicable 501c3 36-4091553 36-2284297 36-2170943 36-4055633 36-2251918 36-2170969 36-2170979 36-2170991 36-2170961 36-3965141 (b) EIN _St_Catherine_of_Siena,_St 1332 N_Massasoit Avenue 2867_S_Throop_St_____ _ 4440 W. 83rd Street ___ _ 4839_S_Harding_Avenue__ 3900 N.Leavitt_Street__ 4052 S_Wabash_Ave_____ (a) Name and address of organization or government St_Benedict High School St_Bede_the_Venerable_ St_Columbanus_School 7120 S_Calumet_Ave_ 5841 W. Strong_St__ St_Constance_School St_Elizabeth School Oak Park IL 60302 <u>St_Barbara_School</u> 27_W. Washington <u>St_Angela_School</u> Chicago IL 60608 Chicago IL 60608 Chicago IL 60652 Chicago IL 60618 St_Bruno_School_ Chicago IL 60619 Chicago IL 60630 Big Shoulders Fund Chicago IL 60651 Chicago IL 60653 Chicago IL 60632 _ 2211 W_18th Pl _ <u>St_Ann_School_</u> Name of the organization

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

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Continuation Page 4

Schedule I Cont (Form 990) 2013 (h) Purpose of grant or assistance PP STEM LA PP LA STEM PP OP SPG 띪 FR PP PD SPG SPG OG LA PP ED FR SPG SPG SPG Employer identification number STEM Raidin Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) БP Ы ቯ 36-3490557 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 120,444. 686,261 2,086,792 5,540 73,767 129,777 112,881 6,559 , 893 17,648 (d) Amount of cash grant (c) IRC section if applicable 501c3 36-2182112 36-2170998 36-2435876 36-2704905 36-2171008 36-2171020 36-2171032 36-2707503 36-2373447 36-2171034 (p) EIN 13110 S Baltimore Avenue St Francis DeSales High S <u>St John Berchmans School</u> St John DelaSalle Academy 10212_S_Vernon_Ave____ (a) Name and address of organization or government _2347_W_Augusta_Blvd___ __5515_S_Sawyer_Ave___ 8734 S_Paulina_____ <u>St_Ethelreda School </u> _ 607 W. 45th Street_ St_Genevieve_School _4854_W_Montana_St_ - St_Hyacinth_School 3640 W-Wolfram_St_ 10155_S_Ewing_Ave_ St_Gabriel_School_ 2511 W Logan Blvd <u> St_Florian_School.</u> <u>St_Gall_School__</u> St_Helen School_ Chicago IL 60620 Chicago IL 60633 Chicago IL 60609 Chicago IL 60639 Chicago IL 60622 Chicago IL 60618 Chicago IL 60647 Chicago IL 60628 Big Shoulders Fund Chicago IL 60617 Chicago IL 60629 Name of the organization

TEEA4001 07/12/13

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

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Continuation Page 5

2013

Schedule I Cont (Form 990) 2013 EC STEM SPG STEM SPG EC (h) Purpose of grant or assistance PP OP STEM EC STEM SPG OP PP LD ኧ ED PP ED G Employer Identification number ΓA PD PP LA Parall Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) 田田 36-3490557 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 339,126 146,431 11,940 573,297 ,205 72,328 24,032 37,971 80,212 (d) Amount of cash grant 75,337 (c) IRC section if applicable 501c3 501c3 501c3 501c3 501c3 501c3 501c3501c3501c3 501c3 36-2171059 36-2367986 36-2171076 36-2171089 13-1026995 36-4091553 36-2171066 36-2171072 36-2171093 36-2182132 (p) EIN _St_Margaret_of_Scotland_S. _St_Mary_of_the_Angels_Sch _St_Mary_of_the_Lake_Schoo <u>St_Nicholas_Unkrainian_Ca</u> 3330 N_Lockwood Avenue_ St Matthias/Transfigurati _8231_S_South_Shore_Dr__ 2252 W-Washington Blvd. St_Margaret_Mary_School St_Nicholas_of_Tolentine (a) Name and address of organization or government 7318 N. Oakley Ave .. 2200 W_Rice Street__ _St_Ladislaus_School_ _ 9833_S_Throop_St___ 3741 W-62nd St____ 1026 W_Buena Ave_ St_Malachy_School_ 1810 N Hermitage St_Michael_School _4910_N_Claremont_ Chicago IL 60645 Chicago IL 60612 Chicago IL 60625 Chicago IL 60643 Chicago IL 60617 Chicago IL 60629 Big Shoulders Fund Chicago IL 60622 Chicago IL 60613 Chicago IL 60622 Chicago IL 60641 Name of the organization

TEEA4001 07/12/13

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

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Continuation Page 6

2013

Schedule I Cont (Form 990) 2013 PD SPG STEM (h) Purpose of grant or assistance OP PP STEM PP ED SPG SPG PD EC SPG FRSTEM DG ED ED ED Employer identification number PP LA PP ED ቯቯ PD Partil Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II. 36-3490557 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 53,184 23,118 27,368 21,836 108,428 61,031 20,269 41,637 (d) Amount of cash 346,157 117,674 TEEA4001 07/12/13 grant (c) IRC section if applicable 501c3 36-2171128 36-2171144 36-2171115 36-2240477 36-2235175 36-2171123 36-2240479 36-2240480 36-3352367 36-2488067 (p) EIN <u>. St Stanislaus Kostka Scho</u> 6036 W. Eastwood Ave --_1919_S_Ashland_Ave____ St Thomas the Apostle Sch 5467 S Woodlawn Ave ---(a) Name and address of organization or government 1625 S_Allport_St____ _ St_Thomas_of_Canterbury _ St_Philip_Neri_School_ St_Robert_Bellarmine St_Procopius School_ _St_Sylvester_School _4827_N_Kenmore_Ave_ _3027_W_Palmer_Sq_ _ 247 W_23rd_St____ _St_Sabina_School_ _1255 N_Noble_St__ St_Therese_School_ _ 7801_S_Throop_St__ 2110 E_72nd St__ Chicago IL 60649 St_Pius V_School Chicago IL 60608 Chicago IL 60608 Chicago IL 60615 Chicago IL 60630 Chicago IL 60642 Chicago IL 60647 Chicago IL 60616 Chicago IL 60640 Chicago IL 60620 Biq Shoulders Fund Name of the organization

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

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Continuation Page 7

(h) Purpose of grant or assistance OP EC SPG ED IE E ED PP Employer Identification number Partil Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) БР 36-3490557 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance 5,750. 308,566. 5,350 (d) Amount of cash 67,422 101,590 grant (c) IRC section if applicable 501c3 501c3 501c3 501c3 501c3 36-3648506 36-2170826 36-2171154 36-3764476 36-2430761 (b) EIN _ Catholic_Bishop_of_Chicag 150 N. Michigan Avenue St. __2559_N_Sayre_Avenue___ (a) Name and address of organization or _900 W_Garfield_Blvd_ _ Accelerate_Institute _St_Turibius School_ -4120 W-57th St---_St_William_School Visitation School 835 N. Rush St. Chicago IL 60609 Chicago IL 60629 Chicago IL 60707 Biq Shoulders Fund Chicago IL 60611 Chicago IL 60601 # 1 1 1 1 1 1 1 1 1 1 government Name of the organization 111

Schedule I Cont (Form 990) 2013

TEEA4001 07/12/13

36-3490557

Big Shoulders Fund

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2013)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of veluation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Scholarships to elementary and high school students	6,088	8,468,944.			
2 Scholarships to teachers - leadership/teacher development	17	67,659.			,
က					
4					
ro					
v					
7					
Part IV Supplemental Information. Provide the infor	ide the information	required in Part I, lir	ne 2, Part III, colum	mation required in Part I, line 2, Part III, column (b), and any other additional information.	ditional information.
Pt_I_Line_2Procedures for monitoring the use	nitoring the use	of grant funds dif	fer based on the t	YPE of grant awarded.	of grant funds differ based on the type of grant awarded. Schools eligible for support are
reviewed each year to ensure	r_to_ensure_they_me	et outlined criter	ia_(in_City_of_Chic	ago, student populatio	they meet outlined criteria (in City of Chicago, student population has over 20% gualify for free or
reduced lunch and	participate in Tit	<u>le I programs)Ov</u>	erall schools repo	ct annually on a number	_reduced lunch and participate in Title I programs). Overall schools report annually on a number of indicators including financial
	llment, student	academic performa	nce, and demogra	phic_characteristics	viability, enrollment, student academic performance, and demographic characteristics of students served. Renewable
scholarship_awards_include	rds_include_regul	ar progress monit	oring and report	ing by the individua	regular progress monitoring and reporting by the individual schools on students. Patrons
Program funds are	-only_distributed	upon signed agree	ement of Patron, P	rincipal and Big Shou	Program funds are only distributed upon signed agreement of Patron, Principal and Big Shoulders, and requires substantiation
through receipting	ng or accounting.	of use of funds.	Programmatic and	capital_support_requ	through receipting or accounting of use of funds. Programmatic and capital support requires a minimum of annual reports
on use of fund	funds_and_demonstrated	rated measurabl	e_objectives_m	et through the fu	_measurable_objectives_met_through_the_fundingBig_Shoulders
Fund staff members	s_regularly_visit	<u>(at least 2-5 time</u>	s each year) schoo	ls and meet with lead	Fund staff members regularly visit (at least 2-5 times each year) schools and meet with leadership to ensure schools are using
funds as indicated by the requirements of each type of support.	ced by the requir	rements of each to	Vpe of support.		
3-1 1-1		(\$0.040			

Schedule I (Form 990) (2013)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

Attach to Form 990.

See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

OMB No 1545-0047

36-3490557

Big Shoulders Fund **Questions Regarding Compensation**

				Yes	No
1 a	Check the appropriate box(es) if the organization provided any o VII, Section A, line 1a Complete Part III to provide any relevant i	f the following to or for a person listed in Form 990, Part information regarding these items	*		71 20
	First-class or charter travel	Housing allowance or residence for personal use	-		_ r.é
	Travel for companions	Payments for business use of personal residence			
	X Tax indemnification and gross-up payments	X Health or social club dues or initiation fees		-	
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
			्र मृद्	E	
t	If any of the boxes on line 1a are checked, did the organization for reimbursement or provision of all of the expenses described above		1 b	х	
2	Did the organization require substantiation prior to reimbursing or	• • • • • • • • • • • • • • • • • • • •			
	trustees, and officers, including the CEO/Executive Director, regard	•	2	Х	 -
3	Indicate which, if any, of the following the filing organization used CEO/Executive Director Check all that apply Do not check any lestablish compensation of the CEO/Executive Director, but explain	boxes for methods used by a related organization to			
	X Compensation committee	Written employment contract			
	Independent compensation consultant	X Compensation survey or study			
	X Form 990 of other organizations	X Approval by the board or compensation committee			
4	Dunng the year, did any person listed in Form 990, Part VII, Sector a related organization	tion A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment? $\ \ .$		4 a		Х
t	Participate in, or receive payment from, a supplemental nonquali	fied retirement plan?	4 b		X
C	Participate in, or receive payment from, an equity-based compen	sation arrangement?	4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the application of the second of the sec	cable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must com	plete lines 5-9.		章 50 李 2	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the contingent on the revenues of	ne organization pay or accrue any compensation			難
	The organization?		5 a		<u> </u>
b	Any related organization?		5 b		X
	If 'Yes' to line 5a or 5b, describe in Part III		Erana Erana		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the contingent on the net earnings of	ne organization pay or accrue any compensation			
-	The organization?		6 a		X
b	Any related organization?		6 b		X
	If 'Yes' to line 6a or 6b, describe in Part III			12.0	97 - Y
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the payments not described in lines 5 and 6? If 'Yes,' describe in Part	ne organization provide any non-fixed t III	7	x	
8	Were any amounts reported in Form 990, Part VII, paid or accrue	ed pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section of Yes, describe in Part III	53 4958-4(a)(3)?	8		х
9	If 'Yes' to line 8, did the organization also follow the rebuttable presection 53 4958-6(c)?	esumption procedure described in Regulations	9		
_					

Big Shoulders Fund Schedule J (Form 990) 2013 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Page 2

36-3490557

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(i) Base compensation	(II) Bonus and incentive compensation '	(iii) Other reportable compersation	and otner deferred compensation	Denefits		reported as deferred in prior Form 990
Joshua Hale	Θ	336,141.	17,221.	13,560.	2,000.	21,469.	393,391.	0.
CEO	(ii)	0.	0		0	 - - 	0	
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2	€							
	€							
3	(ii)							
	(i)							•
4	(ii)	ı				 	 	
	(i)		1					
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	(1)							
9	(ii)	 				i 	 	1
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7	(ii)	i I						1 f f l
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8	(ii)] 			
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12	Ξ							!
	€ €		 		1 1		1 1 1 1 1 1	1 1 1 1 1
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	€ :						1 1 1	1 1 1 1 1
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	€ €		1 1 1 1 1 1 1				1 1 1	1 1 1 1 1
CL								
	€ €		1 1 1 1	1 1 1 1	1 1 1 1 1	 		
ВАА			TEEA4102 07/08/13	3			Schedule J	Schedule J (Form 990) 2013

_Dwes to a social club are paid on behalf of Joshua Hale, President, in order to have a place to conduct off-site board meetings and meetings with donors... These dues are not included in the president's taxable income. __A car is provided for business and personal use for Monsignor Kenneth Velo, co-chairman. Because the value of the personal use is reported on Form W-2, as required for officers. <u>of the organization, a small stipend is also provided which is calculated to cover the </u> <u> An annual bonus was paid to all current employees, including those listed in Part VIL</u> of the personal use and the amount of the stipend vary from year to year based on the Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, for Part II. Also complete this part for any additional information. personal use of the car and the stipend are included in his taxable income. the amount of any taxes which might be incurred by Monsignor Velo. The value .The_same_bonus_percentage_is_used_for_all_employees._The_bonus_percentage_ _actual_mileage_used_and_the_tax_laws_in_effect_during_the_year.__Both_the_ is multiplied by each person's regular annual compensation to determine. <u> based upon reaching various organizational goals during the year.</u> The bonus percentage is decided annually by the Co-chairmen. _who_is_also_a_member_of_a_religious_organization._ _the_dollar_amount_of_the_bonus_ _I_Line_la_ Pt_I_Line_la_ Pt_I_Line_

Schedule J (Form 990) 2013

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, 28c, or Form 990-EZ, Part V, line 38a or 40b.
 ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.
 ► Information about Schedule L (Form 990 or 990-EZ) and its instructions is

at www.irs.gov/form990.

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

36-3490557

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Big Shoulders Fund

Employer Identification number

4	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Co	rrected?
•		person and organization	1	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

	section 4958
3	Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990-EZ, Page V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	nship (c) Purpose of loan (d) Loan to or from the organization? (e) Onginal principal amount (f) Balance due	(f) Balance due	(g) In default? (h) Approved (by board or committee?		(I) Wn	tten nent?					
		3	То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)		:										
(5)												
(6)												
(7)												
(8)												
(9)					, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
(10)												

Panelli Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested p	person (b) Relationship between interested pe and the organization	rson (c) Amount of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)				1
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
10)				

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2013

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever
				Yes
Juli Rossi	family member of L Rossi,CFO	61,464.	employee	
		 .		_
				
				<u></u>
				
Supplemental Information	1			
				
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SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

Big	Shoulders Fund			36-	-3490557
Pel	Types of Property				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art Works of art	Х	3	900.	sale of comp property
2	Art - Historical treasures				
3	Art — Fractional interests				
4	Books and publications				
5	Clothing and household goods	Х		3,665.	sale of comp property
6	Cars and other vehicles				
7	Boats and planes	<u></u>		<u> </u>	
8	Intellectual property			<u> </u>	
9	Secunties – Publicly traded	Х	28	756,060.	avg high/low sales price
10	Securities — Closely held stock				
11	Securities – Partnership, LLC, or trust interests				
12	Secunties - 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	31	11,961.	sale of comp property
19	Food inventory	Х	10	668.	sale of comp property
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (food/beverage used at events) .	Х	9	37,583.	sale of comp property
26	Other (gift certif for fundraising events) .	Х	57		sale of comp property
27	Other (jewelry) .	Х	1	3,795.	sale of comp property
28	Other ► (other).	X	14	8,364.	sale of comp propery
29					
	organization completed Form 8283, Part IV, Donee A	Acknowledger	ment		29 0.
					Yes No
30a	During the year, did the organization receive by contr hold for at least three years from the date of the initia purposes for the entire holding period?	al contribution	n, and which is not requir	red to be used for exemp	
b	If 'Yes,' describe the arrangement in Part II				
31	Does the organization have a gift acceptance policy t	that requires	the review of any non-st	tandard contributions?	31 X
32a	Does the organization hire or use third parties or rela noncash contributions?				32a X
b	If 'Yes,' describe in Part II				
33	If the organization did not report an amount in column describe in Part II	n (c) for a typ	e of property for which o	column (a) is checked,	

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

Schedule M (Form 990) 2013

Schedu	ule M (Form 990) 2013	Big Shoulders Fund	36-3490557	Page 2
Part	the organization	Information. Provide the information required by Part I, lines 30b, and is reporting in Part I, column (b), the number of contributions, the number of both. Also complete this part for any additional inform	number of items	ther
-			-	
Pt_I	<u>col(b)</u>	The number reported in column (b) represents the	. 	
		number of contributions received.	. – – – – – – – – – – –	
			. 	_
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SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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Employer Identification number

OMB No 1545-0047

Big Shoulders Fun	<u>ad</u> 36-3490557
Pt_VI, Line 2	_Family & Business Relationships:
	John A. Canning, Michael Ferro - business relationship
	John A. Canning, James Gordon - business relationship
	Thomas Reynolds III, Thomas Lanctot - family relationship
	Lester Crown, Michael Ferro - business relationship
	Lester Crown, James Gordon - business relationship
	Lester Crown, Daniel Doherty - business relationship
Pt_VI, Line 11b_	The tax return is reviewed by the President and Audit Committee
	and distributed to the Executive Committee prior to filing.
Pt_VI, 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 Executive
	Committee. 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 Executive Committee prior to the
	proposed transaction taking place. The Executive Committee
	will then review all relevant information and decide
	if a conflict of interest exists. If the Executive Committee
	decides a conflict of interest exists, the person is prohibited
	from participating in any discussion or vote on that
	matter. All Executive Committee members are also requested
	_annually to report any family & business relationships that
	_must_be_disclosed_on_Form_990.
Pt VI, Line 15a	The Co-Chairmen and Executive Committee determine

Schedule Q (Form 990 or 990-EZ) 2013 Name of the organization	Page 2 Employer Identification number
Biġ Shoulders Fund	36-3490557
the compensation for the President after	
reviewing his performance and by using comparate	ive data
for other non-profit organizations. This was last	<u>st</u>
done_in_November_2013.	
Pt_VI, Line 19Governing documents, policies and financial	
information_are_made_available_on_a_discretionare	£X
basis to those with valid reasons for requesting	J
the_information.	·
Pt XI Unrealized gains/losses on investments are not i	included
in income on part VIII	·
Pt XI Allowance for doubtful pledges of \$122,500 is not incl	luded in revenue or expense
Part VII - Section A Joshua Hale and Linda Rossi are reported as offi	lcers
in Section A because their job descriptions fit	the criteria
specified by the IRS to be reported as officers.	:
However they are not legal officers of the organ	nization.
	·
Part VIII, Line 11a Under generally accepted accounting principles,	·
non-profit organizations must report agency	·
transactions in a specific manner. Agency	·
transactions are contributions received from don	ors
who have designated the use of their funds for a	·
specific beneficiary, such as a donor requesting	that
their gift be directed to a certain school as a	grant
or scholarship. As required under GAAP for fina	ncial
statement presentation, the Big Shoulders Fund e	excludes

these from (net) revenue and reports them as liabilities when

when received. However, in order to present the true

Schedule Q (Form 990 or 99	0-EZ) 2013	Page 2
Name of the organization	•	Employer Identification number 36 - 34 9 0 5 5 7
Big Shoulders Fun	id	36-3490557
	amount of support received from our donors, we o	do include
	these gifts in total contribution revenue on Lir	ne 1
	and then deduct them from gross revenue on Line	11a
	resulting in net revenue of -0- for these transa	actions.
Pt IX, Lin 24c	As described above, agency receipts are not	
	included in income, and correspondingly, agency	
	_expenditures_are_not_included_in_expensesLine	24c
	shows the total of agency expenditures included	<u>in</u>
	the detail expense lines 1 and 2.	
		
	·	
		·

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

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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:	Grants to schools as designated by donors -
Expenses	1,770.	agency (pass-through) transactions See
Grants Of	619,249.	supporting schedule reconciling grant expenses
Revenue.	0.	and net expense.

Schedule D, Supplemental Financial Statements

Part VII Investments - Other Securities

	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Vanguard *	12,371,461.	FMV
Viking Global Equities	3,912,245.	FMV
William Blair Funds	4,129,753.	FMV

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

Pt II Line la	This schedule has been prepared on the accrual basis. Grants shown are either pledges made in the current year or outright cash grants. Payments made in 2014 on previous year pledges are therefore not included. Furthermore, grants include not only direct payments to schools, but also payments made on behalf of schools. Key for grant purpose - column (h) CG - Capital Grant CG - Capital Grant EC - Professional Development-Early Childhood Program EC - Professional Development event EN - Contribution to fund-raising event IE - Inclusive Education Program IA - Leadership Award Program OP - Operating Grant PD - Professional Development Program OP - Operating Grant PD - Patrons Program
	SPG - Special Program Grant
	SIEM - SCIENCE, LECHNOLOGY, ENGINEERING, MACHEMALICS

7,989,441.

Supporting Statement of:

Form 990 p 2/Line 4a Expenses

Description	Amount
Total Grant/Assistance Payments	8,468,944.
Less: Agency Payments	-76,785.
Net Grant Expense: 8,392,159	
Other Expenses	377,044.
Net Program Expense:	
Total	8,769,203.

Supporting Statement of:

Form 990 p 2/Line 4b Expenses

Description	Amount
Total Grant/Assistance Payments	2,196,246.
Less: Agency Payments	-63,380.
Net Grant Expense: 2,132,866	
Other Expenses	166,892.
Net Program Expense:	
Total	2,299,758.

Supporting Statement of:

Form 990 p 2/Line 4c Expenses

7,372,051.
., - : = ,
-55,491.
672,881.

Supporting Statement of:

Total

Form 990 p 2/Other Expenses-1

Description		Amount
Total Grant/Assistance Payments		619,249.
Less: Agency Payments		-619,249.
Net Grant Expense:	0	

Continued

Supporting Statement of:

Form 990 p 2/Other Expenses-1

Description	Amount
Other Expenses Net Program Expense:	1,770.
Total	1,770.

Supporting Statement of:

Sch D, page 4/Part XI, Line 4b

Description	Amount
Fundraising expense for events Other gifts in kind	88,642. 6,580.
Total	95,222.

Supporting Statement of:

Sch D, page 4/Part XII, Line 4b

Description	Amount
Fundraising expenses for events	88,642.
Other gifts in kind	6,580.
Total	95.222

THE BIG SHOULDERS FUND REPORT, 2013-2014

For 28 years, Big Shoulders has provided support for inner-city Catholic schools – 75 elementary and 15 high schools – educating nearly 24,000 socio-economically disadvantaged children in Chicago. Big Shoulders Fund schools serve as dynamic, supportive centers of learning and beacons of hope and opportunity in communities across the city. Recent research by professors at the University of Notre Dame indicate that the existence of Catholic schools adds to social cohesion and reduces crime in communities, regardless of the religious or ethnic demographics of that neighborhood.

Since 2006, only eight Big Shoulders Fund schools have closed, in contrast to historic and national trends. Between 2006 and 2013, 614 Catholic schools have closed in the 25 largest dioceses in the United States, an average of 24 schools per district. In contrast, enrollment at Big Shoulders Fund elementary schools has remained stable over the past five years. Furthermore, Big Shoulders strategically invests consistently in literacy, technology, science and math instruction, to strengthen student learning. Finally, Big Shoulders has increased its efforts in distributing renewable scholarships that help create stability in the life of at-risk children and inner-city schools through multiple years of support.

Big Shoulders Fund schools continue to educate a broad cross-section of races, ethnic and religious backgrounds and social classes:

- 80 percent of our students are minority
- 61 percent of elementary students are living in poverty, qualifying for free/reduced lunch
- 30 percent of our students are not Catholic

Big Shoulders continues to make strides in improving the quality and vitality of schools serving students in socio-economically distressed areas of Chicago. Big Shoulders does this by strategically focusing on four critical areas through the investment of both financial and professional resources:

- Scholarships and Enrollment Growth
- Academic Programming to Increase Rigor and Improve Student Outcomes
- Improvements to School Operations to Foster Quality and Stability
- Leadership Development

Below is a brief update on the impact of your generous support in these four critical areas.

Scholarships and Enrollment Growth

During the 2013-14 school year, Big Shoulders awarded \$8.2M to 6,370 students, ensuring their access to a quality education in an environment of high expectations. As the largest scholarship provider in Chicago, Big Shoulders provides scholarships ranging from multi-year, renewable commitments to one-time emergency funds.

This year, Big Shoulders also decided to build upon the success of its Access Initiative pilot scholarship program and expand the program for the 2013-14 school year, adding a new cohort of 1,500 scholarship students. The Access Initiative provides three-year scholarships to students in need transferring from a public school to a Big Shoulders school. The average family income for Access scholarship recipients is \$28,533 and 71 percent of Access families earn less than \$40,000 per year.

FORM 990

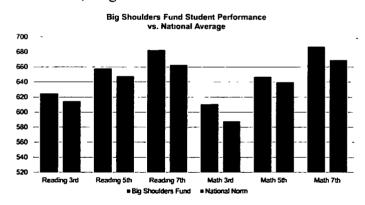
As a result of focused efforts with school leadership and donor partners, Big Shoulders continues to challenge national trends with strong enrollment at its elementary schools. More specifically, one of Big Shoulders most successful enrollment efforts has been in placing and training marketing directors in the schools who work to increase the local community's knowledge of the school.

Academic Programming to Increase Rigor and Improve Student Outcomes

Big Shoulders remains committed to continuously helping improve academic performance by providing additional resources and support to all students attending Big Shoulders schools and the educators serving them. Working with university partners and expert educators, Big Shoulders strategically invests in academic and support programs to assist schools' efforts to move students from the bottom two quartiles of achievement into the top two quartiles. According to recent assessment of standardized test scores, Big Shoulders Fund schools'

academic performance is stronger than the national local counterparts in average and mathematics and reading. However, Big Shoulders is not willing to rest on this success and continues to invest significantly in professional development for teachers to impact student learning.

Big Shoulders is investing in STEM (Science, Technology. Engineering & Mathematics) programs to provide a research-based curriculum with rich learning opportunities. These programs impact 30 schools and nearly 5,000 children. The

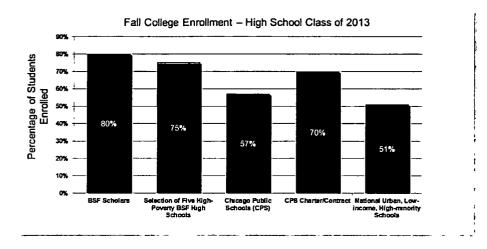


programs include an Early Math initiative, an Everyday Math initiative and a Next Generation Science Standards initiative.

Big Shoulders has added two significant student enrichment programs to help students develop important observation, analytic and reasoning skills. First, Big Shoulders offers a STEM Scholarship Program that provides a biweekly Saturday morning enrichment program in science and math for middle grade scholars. The first class of STEM Scholars graduated this year and 91 percent of them will be attending Catholic or selective enrollment high schools in the fall of 2014, allowing them to continue to prepare for college study. Second, Big Shoulders offers a year-long enrichment program that culminates in spending one week over the summer at Brush Creek Ranch in Saratoga, Wyoming. 120 middle school students participated in 2013 and the program grew to 160 this year, with the goal of increasing the interest of students in science and math related fields.

SCHEDULE O

In the past five years, 86 percent of renewable scholars enrolled in college the year following graduation and 78 percent of them enrolled at four-year universities. This is an exceptional outcome in contrast to the Chicago Public Schools, where approximately five out of ten graduates enroll in college.



Improvements to School Operations to Foster Quality and Stability

Big Shoulders helps to develop better structure and efficiencies in school operations through its Patrons Program. The Patrons Program pairs individuals, organizations or groups of people with a specific school. The patron serves as an important partner, providing financial support and helping create a strategic business plan to help improve school quality and stability. There are currently 61 Patron relationships involving 125 supportive Patrons who have committed to investing approximately \$29.5 million to the schools to increase viability and continuously improve the academic program. To date, over \$25.3 million of these funds have been directly invested in the schools in a variety of ways, such as to provide academic enhancements, fundraising guidance, marketing support, capital improvements, technological upgrades and tuition assistance benefitting current and future students.

In response to the recent deterioration in the Archdiocese of Chicago's financial situation, Big Shoulders has redoubled efforts to improve the viability of seven inner-city Catholic schools in Chicago's most challenged areas. Big Shoulders has negotiated an agreement whereby it will take on the majority of funding for these schools' operating needs in return for a commitment that these schools will remain open for a three-year period. During this period, Big Shoulders will engage significantly with these schools to address and improve viability and excellence. Each individual school is at a different point on each issue so Big Shoulders is working with each school leader to create a school-specific improvement plan, add resources, and closely and regularly monitor progress on key metrics.

Leadership Development

Effective school leadership is critical to the academic progress of students and Big Shoulders anticipates 20 to 30 principal openings at Big Shoulders schools in the next three years. The Big Shoulders Fund Leadership Development Program builds the pipeline of future school leaders by supporting individuals with a demonstrated commitment to Big Shoulders Fund schools in their educational leadership studies. Twelve principal candidates are currently in the *Leadership*... *Development Program* and 21 percent of current Big Shoulders Fund elementary school principals are participants or graduates of the program. Big Shoulders Fund has developed relationships with five universities so that the tuition costs of the program are divided equally between the university, Big Shoulders Fund and the individual.

Beyond leadership at the school level, Big Shoulders is also helping to build the next generation of civic leadership in Chicago. Over 300 individuals have joined the Big Shoulders Auxiliary Board and the Chairmen's Advisory Council, providing financial support and offering their time by mentoring, tutoring, serving on school boards, and providing more than 2,000 volunteer hours each year to the 90 schools.

Looking Ahead: A Brighter Future

Northeastern University's Center for Labor Market Studies released a report in 2011 on high school dropouts in Chicago and Illinois, indicating that dropouts cost society \$1,510 annually. In contrast, high school graduates pay more than \$5,000 in taxes annually and college graduates nearly quadruple that contribution. Big Shoulders works to ensure that a high-quality educational option remains a reality for nearly 24,000 children in Chicago so that they will graduate from high school.

Through scholarship and enrollment assistance, academic programming, operational support and leadership development, your investment in Big Shoulders provides measurable results that lead students to graduate from high school and enroll in college at rates higher than national and city averages.

According to a recent survey conducted by ISPOS, the third largest global market research firm, Big Shoulders alumni are more likely to graduate from college and less likely to be unemployed

than national and local peers. Even after controlling for childhood income, race, and age, Big Shoulders alumni do better economically. Of the alumni that identified as working class or poor during childhood, 60 percent now earn more than Chicago's median income and 20 percent earn more than \$100,000. Investments in Big Shoulders have been yielding a strong, well-educated workforce and generating greater stability in communities for the past 28 years.

