DLN: 93493128021540 OMB No. 1545-0047 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 Department of the Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number B Check if applicable Big Shoulders Fund □ Address change 36-3490557 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 212 W Van Buren Street 900 ☐ Amended return ☐ Application pending (312) 751-8337 City or town, state or province, country, and ZIP or foreign postal code Chicago, IL $\,$ 60607 $\,$ G Gross receipts \$ 52,668,884 Name and address of principal officer H(a) Is this a group return for Joshua Hale ☐Yes **☑**No subordinates? 212 W Van Buren Street 900 H(b) Are all subordinates Chicago, IL 60607 ☐ Yes ☐No ıncluded? 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► www bigshouldersfund org L Year of formation 1986 M State of legal domicile IL K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities We provide support to inner-city schools which provide a quality, values-based education for Chicago's children Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 31 4 31 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 **6** Total number of volunteers (estimate if necessary) 6 6,003 Total unrelated business revenue from Part VIII, column (C), line 12 -313 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 28,939,605 36,521,196 Ravenua 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 3,359,305 2,563,553 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -365,485 38,634 31,933,425 39,123,383 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 16,389,711 19,955,768 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 3,543,570 3,922,808 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶901,197 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 2,233,576 2,543,121 22,166,857 26,421,697 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 9,766,568 12,701,686 Revenue less expenses Subtract line 18 from line 12 . Net Assets or Fund Balances Beginning of Current Year End of Year 79,203,116 89,994,006 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 12,179,529 8,394,043 22 Net assets or fund balances Subtract line 21 from line 20 . 67,023,587 81,599,963 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-05-07 Signature of officer Sign Here Joshua Hale President & Chief Executive Officer Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00756195 Paid self-employed Firm's name ► CROWE LLP Firm's EIN ► 35-0921680 Preparer Use Only Firm's address ▶ 225 West Wacker Drive Suite 2600 Phone no (312) 899-7000 Chicago, IL 606061224 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (20	18)					Page 2				
Pa	rt III	Statement of	of Program Servic	e Accomplis	hments		_				
		Check if Sched	lule O contains a respo	onse or note to	any line in this Part III .		🗹				
1	Briefly	describe the or	rganızatıon's mıssıon								
We p	rovide si	upport to inner	-city schools which pro	ovide a quality,	values-based education	for Chicago's children					
_	5 1										
2		-			vices during the year wh	iich were not listed on	□Yes ☑No				
			990-EZ?				⊔ Yes ⊻ No				
_			se new services on Sch		changes in how it condu						
3	Did the										
	services ⁷										
	If "Yes,	," describe thes	se changes on Schedu	e O							
4	Section	1 501(c)(3) and		ons are required	to report the amount of	argest program services, as measi f grants and allocations to others, t					
4a	(Code) (Expenses \$	14,555,688	ıncludıng grants of \$	13,536,208) (Revenue \$	0)				
	See Add	litional Data									
4b	(Code) (Expenses \$	3,738,638	ıncluding grants of \$	3,086,203) (Revenue \$	0)				
	See Add	litional Data					<u> </u>				
4c	(Code) (Expenses \$	3,592,845	including grants of \$	2,042,599) (Revenue \$	0)				
	See Add	litional Data									
	(Code) (Expenses \$	2,086,804	ıncludıng grants of \$	1,290,758) (Revenue \$	0 }				
	for scho					ducation, learning about investments and tivities Grants to schools as designated					
4d	Other p	orogram servic	es (Describe in Schedi	ule O)							
	(Expen	ises \$	2,086,804 incl	uding grants of	\$ 1,290,7	58) (Revenue \$)				
4e	Total	program serv	ice expenses ►	23,973,9	75						

Form	990 (2018)			Page 3
Par	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 Schedule A	1	Yes	
	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? **	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No .
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	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		
6	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, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	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 services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
Ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
ь	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		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Yes	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1° If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	_

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

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Pai	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, 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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		No
b	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		No
:6	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 "Yes," complete Schedule L, Part II	26		No
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		No
8	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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		No
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		No
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
3	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		No
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
5a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
7	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		No
8	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	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u>.</u>		
			Yes	No

1a 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

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

156

1a

1b

Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Yes d If "Yes," indicate the number of Forms 8282 filed during the year 7d |

e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . No If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g

10a

10b

11a

11b

12b

13b

13c

7h

8

9a

9h

12a

13a

14a

14b

15

No

No

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If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Sponsoring organizations maintaining donor advised funds.

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

b Gross income from other sources (Do not net amounts due or paid to other sources

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders .

Form	990 (2018)						Page 6
	Governance, Management, and Disclosure For each "Yes" response to lines 2 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI	lule O	See ınstrud	tions			lines 🗹
Se	ction A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		3	1		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		3	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?			th any other	2	Yes	
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other μ			ect supervisio	^{on} 3		No
4	Did the organization make any significant changes to its governing documents since the	prior F	orm 990 w	as filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organ	nizatio	n's assets?		5		No
6	Did the organization have members or stockholders?				6		No
7a	Did the organization have members, stockholders, or other persons who had the power is	t one or more	<u>.</u>				
	members of the governing body?				7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by persons other than the governing body?				7 b		No

	similar committee, explain in Schedule O								
b	Enter the number of voting members included in line 1a, above, who are independent	1b	31						
2	Did any officer, director, trustee, or key employee have a family relationship or a busine officer, director, trustee, or key employee?		tionship with any other	2	Yes				
3	Did the organization delegate control over management duties customarily performed by of officers, directors or trustees, or key employees to a management company or other			3		No			
4	Did the organization make any significant changes to its governing documents since the	prior F	orm 990 was filed? .	4		No			
5	Did the organization become aware during the year of a significant diversion of the orga	nızatıo	n's assets?	5		No			
6	Did the organization have members or stockholders?			6		No			
7a	Did the organization have members, stockholders, or other persons who had the power members of the governing body?			7a		No			
b	Are any governance decisions of the organization reserved to (or subject to approval by persons other than the governing body?		7 b		No				
8	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	a The governing body?								
b	Each committee with authority to act on behalf of the governing body?			8 b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who organization's mailing address? If "Yes," provide the names and addresses in Schedule C			9		No			
Se	ction B. Policies (This Section B requests information about policies not requ	ured b	y the Internal Revenue	e Code	e.)				
					Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?			10a		No			
b	If "Yes," did the organization have written policies and procedures governing the activitie and branches to ensure their operations are consistent with the organization's exempt ${\tt p}$			10b					
11a	g body before filing the	11a	Yes						
b	Describe in Schedule O the process, if any, used by the organization to review this Form	990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13 .			12a	Yes				
Ь	that could give rise to								

3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes." did the organization follow a written policy or procedure requiring the organization to evaluate its participation			

7a	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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
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		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "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 take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ► IL			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
4.0				

ט ו	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes							
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes							
13	Did the organization have a written whistleblower policy?	13	Yes							
14	Did the organization have a written document retention and destruction policy?	14	Yes							
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	a The organization's CEO, Executive Director, or top management official									
ь	b Other officers or key employees of the organization									
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)									
16a	6a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?									
Ь	If "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 take steps to safeguard the organization's exempt									
	status with respect to such arrangements?	16b								
Se	ction C. Disclosure									
17	List the States with which a copy of this Form 990 is required to be filed▶ IL									
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply									
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest									

Form **990** (2018)

State the name, address, and telephone number of the person who possesses the organization's books and records Malcolm Douglas 212 W Van Buren St Suite 900 Chicago, IL 60607 (312) 751-8337

policy, and financial statements available to the public during the tax year

20

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	on	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

2800 Country Club Dr Olympia Fields, IL 60461

Page **8**

701111 990 (2018)							 -					Page o	
Part VII Section A. Officers, Direct		š, Key ∣	Emp			, and	High		ted Employees	(con	tinued)		
(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one b	ox, ι an of	ot che unles fficer	neck mo ess pers er and a tee)	rson a	(D) Reportable compensation from the organization (W 2/1099-MISC)	from related /- organizations (n d (W-	(F) Estimated amount of other compensation from the organization and		
	organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MI3C)	2/1099-MISC	·)	related organizations		
See Additional Data Table			\vdash	\vdash		<u> </u>	+			+			
	<u> </u>					<u> </u>	<u></u>			\exists			
		<u> </u>	<u> </u>	igspace	igspace	<u> </u>	igspace			\dashv			
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		├──	—	\vdash	\vdash	_	\vdash	<u> </u>		\dashv			
		-	+	\vdash	_	+-	+			\dashv			
	+	 	+	\vdash	+	+-	+			+			
			+	+	\dagger	+	+			\dashv			
1b Sub-Total			-			•	<u></u>			丅			
c Total from continuation sheets to F d Total (add lines 1b and 1c)	•					>	_	1,981,302		0		312,943	
Total number of individuals (including of reportable compensation from the compensation)			e list	ed a	bov	e) who) rec	eived more than s	\$100,000				
	SS Lucation									_	Yes	No	
3 Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i>									ed employee on	3	Yes		
4 For any individual listed on line 1a, is organization and related organization individual	ns greater than \$	\$150,00	00? <i>If</i>	"Yes	s," c	complet	te Sc	chedule J for such	1	4	Yes		
5 Did any person listed on line 1a rece services rendered to the organization	eive or accrue cor	mpensat	ition fi	from	any	y unrela	ated	organization or in				21	
Section B. Independent Contract	<u> </u>			-	_	,	_			5		No	
Complete this table for your five high from the organization Report compe	hest compensate									mper	nsation		
	(A) and business addre		1			*****	• • • • •		(B)		(C Comper		
Hilton Chicago	W.140 2.								rıan dınner space, foo	od		417,576	
720 S Michigan Ave Chicago, IL 60605												: : : : : : : : : : : : : : : : : : : :	
University of Chicago 1427 E 60th Street								prot aeve	elopment for schools			306,681	
Chicago, IL 60637 Ziemke Consulting LLC								prof deve	elopment for schools		 	210,417	
N Rockwell												•	
Chicago, IL 60625 University of Illinois Chicago								prof deve	elopment for schools			186,876	
W Harrison St Chicago, IL 60607													
Olympia Fields Country Club				_	_		_	Fundraisir services	ng event facility and			141,957	
2800 Country Club Dr													

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 8

		(2018)									Page 9
Part	VIII										
		Check if Schedul	le O contains a	a respo	onse or note to any	(A) Total reven		(B) Related or exempt function revenue		(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
10	1:	a Federated campaig	ns	1a	38,349			Tevende			312 311
ants		b Membership dues		1 b	0						
30 E		c Fundraising events		1c	1,885,287						
ffs, FA,		d Related organizatio	ons	1d	0						
<u>1</u> 3. €		e Government grants (co	ontributions)	1e	0						
Contributions, Gifts, Grants and Other Similar Amounts		f All other contributions, and similar amounts n above		1 f	34,597,560						
ntribu d Oth		g Noncash contribution in lines 1a - 1f \$	ons included	1,3	396,75 <u>6</u>						
<u>ප</u>		h Total. Add lines 1a	-1f	•	•	36,52	1,196				
ı.					Business	Code					
Ven	2a -			•							
Program Service Revenue	b) —————————————————————————————————————		_							
Z AC	C	_		_							
<u>ક</u> ્રે	d e	•									
Jran		All other program se	rvice revenue					0	0		0 0
P.		Total. Add lines 2a-2			•	0					
		Investment income (iii			interest, and other	1					
	9	sımılar amounts) . `		•	•	•	842,497			-313	842,810
		Income from investme				`					
	5	Royalties	(ı) Real		(II) Personal						
	6a	Gross rents	(1)		(11, 11, 11, 11, 11, 11, 11, 11, 11, 11,	1					
	ŀ	Less rental expenses				+					
	(Rental income or		0		0					
		(loss)				_					
	(d Net rental income o	(i) Securit		(II) Other	1			_		
	7 <i>a</i>	Gross amount from sales of assets other than inventory	,,	45,384							
	t	Less cost or other basis and sales expenses	13,2	24,328							
		Gain or (loss)	<u> </u>	21,056		<u> </u>					
		d Net gain or (loss) .			•	1,	721,056				1,721,056
Other Revenue	8a	Gross income from fi (not including \$ contributions reporte See Part IV, line 18	1,885,287 ed on line 1 c)	of		_					
يّ م		Less direct expense		b Ing ov	309,554		6,381				6,381
the		Net income or (loss) Gross income from g			ents •	1	0,381		+		6,381
ō		See Part IV, line 19]						
		- 1		a	43,872 11,619	4					
		Less direct expense Net income or (loss)		b activit			32,253				32,253
•		aGross sales of invent returns and allowand	tory, less				<u> </u>				·
	ŀ	Less cost of goods s	sold	a b							
	(Net income or (loss)		ınvent							
	11	Miscellaneous	Revenue		Business Code	-					
	ŀ	<u> </u>							+		
	•	-									
	(-		
	•	-									
	•	d All other revenue .					0		0	0	0
		Total. Add lines 11a			>	1					
		2 Total revenue. See					0		+		
					· P	39,	123,383		0	-313	2,602,500 Form 990 (2018)

Part IX Statement of Functional Expenses	
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d Lobbying

12 Advertising and promotion 13 Office expenses .

14 Information technology

15 Royalties .

17 Travel .

20 Interest .

23 Insurance .

16 Occupancy .

e Professional fundraising services See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any

24 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

25 Total functional expenses. Add lines 1 through 24e 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)

federal, state, or local public officials .

22 Depreciation, depletion, and amortization .

19 Conferences, conventions, and meetings

21 Payments to affiliates . . .

expenses on Schedule O)

a Credit card fees

b Food and meals

c Membership dues

e All other expenses

d

q Other (If line 11g amount exceeds 10% of line 25, column

f Investment management fees

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	nızatıons must comp	olete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			\square
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	6,436,738	6,436,738		
2 Grants and other assistance to domestic individuals See Part IV, line 22	13,519,030	13,519,030		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	0	0		
4 Benefits paid to or for members	0	0		_
5 Compensation of current officers, directors, trustees, and key employees	1,639,994	867,177	523,805	249,012
6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7 Other salaries and wages	1,814,173	1,168,920	342,728	302,525
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	49,662	30,761	10,811	8,090
9 Other employee benefits	209,445	115,638	60,894	32,913
10 Payroll taxes	209,534	120,972	54,079	34,483
11 Fees for services (non-employees)				
a Management				
b Legal	134		134	
c Accounting	47,895		47,895	

50.000

997,999

117,852

253,184

283,950

149,505

314,687

0

0

0

0

25,687

4,075

54,456

200,669

43,028

26,421,697

0

938,454

54,280

97,370

131,990

73,770

265,891

0

0

0

0

12,843

2,070

25,713

110,717

1,641

23,973,975

50,000

33,035

53,182

65,144

147,285

39,825

25,755

0

0

0

0

6,422

43,174

41,387

1,546,525

970

26,510

10.390

90,670

4,675

35,910

23,041

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6,422

1,035

28,743

46,778

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901,197

Form **990** (2018)

Page **11**

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498.462

220,100

1.993.654

5.681.827

8.394.043

26.932.699

46,323,723

8.343.541

81,599,963

89,994,006

Form **990** (2018)

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Form 990 (2018)

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Liabilities 22

Fund Balance

Assets or 30

Net

Investments—other securities See Part IV, line 11 .

Total assets.Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments-program-related See Part IV, line 11

Intangible assets

Accounts payable and accrued expenses

Grants payable . . .

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Other assets See Part IV, line 11 . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

		Check if Schedule O contains a response or not	ce to an	ly line in this Full IX F	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			46,725	1	76,558
	2	Savings and temporary cash investments .		[17,249,885	2	17,092,191
	3	Pledges and grants receivable, net			12,712,216	3	21,910,562
	4	Accounts receivable, net			0	4	0
	6	Loans and other receivables from current and for trustees, key employees, and highest compense. Part II of Schedule L Loans and other receivables from other disquality section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations voluntary employees' beneficiary organizations. Part II of Schedule L	ated en Ified pe on 4958 ations o (see in	rsons (as defined under (c)(3)(B), and f section 501(c)(9) structions) Complete	0	5	0
ets	7	Notes and loans receivable, net	•		0	7	0
ssets	8	Inventories for sale or use		. [0	8	0
Ø	9	Prepaid expenses and deferred charges			136,087	9	103,380
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	304,425			
	b	Less accumulated depreciation	10b	241,127	88,984	10 c	63,298
	11	Investments—publicly traded securities .			26.792.860	11	7.990.681

22.162.249

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14.110

79.203.116

397,145

169,700

3,938,818

7,673,866

12,179,529

28.240.075

30,173,755

8.609.757

67,023,587

79,203,116

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3a

3b

No

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Software ID: 18007697 Software Version: 2018v3.1

> **EIN:** 36-3490557 Name: Big Shoulders Fund

Form 990 (2018)

Form 990, Part III, Line 4a:

Student Scholarship Programs Administered over 74 distinct scholarship programs that include mentoring, enrichment and other support activities. Scholarship were

awarded to 4,335 students at 133 elementary and high schools to enable them to attend non-public schools

Form 990, Part III, Line 4b:
School operations Distributed operating and capital grants to multiple schools in an effort to prevent school closures, also assisted schools in improving

marketing/recruiting, building new external funding sources, improving school business operations, etc.

Form 990, Part III, Line 4c: Academic Enrichment and Leadership Development Big Shoulders administers over 20 ongoing programs in 75 schools involving over 800 teachers and administrators to improve instruction and learning through leadership and professional development, professional learning communities and access to high quality curricula with focus on math, science, civics, and literacy. Provide a variety of other needed capital and programmatic support to ensure a safe, effective learning environment for nearly 20,000.

students through ongoing enrichment programs including a science and leadership camp, after school programs, summer programs, and other opportunities for students

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation is both an officer and a compensation week (list from the from related from the

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organization and related organizations

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours								organizations
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	2/1099-MISC)	(W- 2/1099- MISC)
John A Canning Jr	15 0	х		x				0	0
Co-Chairman		_ ^						0	0
James J OConnor	30 0	x		x				0	0
Co-Chairman		_ ^							
Kenneth J Velo	25 0	x		х				0	0
	I .	. ^	1	. ^					· ·

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and Independent Contractors

Co-Chairman

John Croghan

Vice Chairman

Gerald Beeson

Executive Committee
Charles K Bobrinskoy

Executive Committee

Executive Committee

Executive Committee

Executive Committee

Executive Committee

Gregory Q Brown

James Compton

Kent Dauten

Mary Dempsey

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person compensation amount of other hours per compensation is both an officer and a week (list from the from related compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Executive Committee

Executive Committee

Executive Committee

Executive Committee

Executive Committee

Executive Committee

Thomas E Lanctot

Leigh-Anne Kazma

Christine E Kelly

Stephen King

James Hoeg

	any hours		direct		ee)	4	organization (W-	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
William Devers	2 0	Х					0	0	0
Executive Committee									
Daniel Doherty	1 0								
Executive Committee		X						0	0
David Dury	1 0							0	
Executive Committee		X						U	0
Dennis Fitzsimons	1 0	x					0	0	0

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Executive Committee						
David Dury	1 0	×			0	
Executive Committee		_ ^				
Dennis Fitzsimons	1 0	×			0	
Executive Committee		, and			, and the second	
James A Gordon	1 0					

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(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless person amount of other hours per compensation compensation is both an officer and a week (list compensation from the from related from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	· ·	lirect	or/ti	ruste	ee)		organization (W-	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations	
William T Lynch	1 0	×						0	0	0	
Executive Committee		^						0	0	0	
Andrew J McKenna	1 0	×						0	0	0	
Executive Committee		^						0	0	0	
Michael E Murphy	1 0	x						0	0	0	
Executive Committee		^						0	O	0	
Kımberly Querrey	1 0	Х						0	0	0	

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Michael E Murphy	10	×		
Executive Committee		^		
Kımberly Querrey	1 0	×		
Executive Committee		^		
Thomas Reynolds III	1 0			
Executive Committee		×		

and Independent Contractors

John Schreiber

Timothy Sullivan

Cheryl Thomas

Giancarlo Turano

Executive Committee

Executive Committee

Executive Committee

Executive Committee

Executive Committee

Christopher Valenti

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless person hours per compensation amount of other compensation week (list is both an officer and a from related from the compensation any hours director/trustee) organization (Worganizations from the

and Independent Contractors

John Moran

Relations Amelia Drozda

Engagement Matthew Katzfey

Development

Katherine LaMantia

Scholarship System Coordinator

Thomas Zbierski

Senior Director, Patrons Program

Senior Director, Scholarship Programs and School

Senior Director, Philanthropy, Partnerships, and

Director, Alumni Outreach and High School

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

185,068

188,585

142,739

114,565

102,323

48,365

29,490

13,760

31,806

3,708

	ally flours	`	an ecc	01/ (1	ust	,		Organization (VV			
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations	
Arthur R Velasquez	10										
Executive Committee		×						0	0	0	
Linda Rossi	50 0			,,				450 220		20.025	
CFO (Through 7/31/2018)				X				158,228	0	29,025	
Joshua Hale	50 0			,,				404.720		44.260	
President & CEO				×				494,730	0	41,269	
Malcolm Douglas	50 0			,,				74 200		0.000	
CFO				×				74,209	0	9,888	
Rebecca Lindsay-Ryan	50 0										
Senior Director, Academic Programs and External Affairs					×			186,832	0	40,462	

			l x l		l	494,730	0	
President & CEO			^			131,730	Ů	
Malcolm Douglas	50 0		х			74,209	0	
CFO						,		
Rebecca Lindsay-Ryan	50 0							
Senior Director, Academic Programs and External Affairs				X		186,832	0	

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and Independent Contractors (A) Name and Title

Michaela Metzger

Laura Nalley

Nicole Wilson

Senior Director, Strategy and Communication

Senior Director, People and Leadership

Former Sr Director, Strategy & Op

week (lis any hour: for relate organizatio below dott line)
3

(B)

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Dogutio	- /d-	(C)		د مدر دام						
than o	Position (do not check more than one box, unless person									
is both an officer and a director/trustee)										
Individual trustee or director	Institutional Trust⊭€	Officer	key employee	Highest compensated employee	Former					
				X						
				Х						
					Х					

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

(D)

Reportable

compensation

from the

2/1099-MISC)

ation he on (W- MISC)	fi oi (
106,636	
116,544	
110,843	



(E)

Reportable

(F)

Estimated

amount of other

compensation

from the

organization and

related

organizations

31,255

27,677

6,238

Average hours per d ons 32 0 50 0 0.0

SCHEDU (Form 990 990EZ)		Com		Charity Staturganization is a sect		2018		
Department of th			► Go to	www.irs.gov/Forms	990 for the late	est information		Open to Public Inspection
Name of the Big Shoulders F	organizat	ion					Employer identific	cation number
Dow't	Dancar 4	ar Dublic (Chaulte Ctat	(All overstien			36-3490557	
Part I he organizat				us (All organization e it is (For lines 1 thro			see instructions.	
1 _ ,	A church, co	onvention of	churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).	
2	A school de	scribed in se	ction 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	990 or 990-EZ))		
3 🗇	A hospital o	r a cooperati	ve hospital ser	vice organization desci	ribed in section	170(b)(1)(A)(iii).	
4 🗆	·	esearch orga	•	ed in conjunction with			•	Enter the hospital's
		tion operated iv). (Comple		t of a college or unive	rsity owned or o	perated by a gov	ernmental unit descr	ibed in section 170
6 ,	A federal, s	ate, or local	government o	governmental unit de	scribed in sectio	on 170(b)(1)(<i>A</i>	\)(v).	
:	section 17	D(b)(1)(A)(vi). (Complete			-	ınıt or from the genei	ral public described in
8 🗌	A communit	y trust descr	ıbed ın sectio ı	n 170(b)(1)(A)(vi)	(Complete Part I	I)		
				escribed in 170(b)(1) lee instructions Enter				lege or university or a
	from activiti investment	es related to income and i	its exempt fur inrelated busir	(1) more than 331/39 nctions—subject to cer ness taxable income (le omplete Part III)	taın exceptions,	and (2) no more	than 331/3% of its s	upport from gross
				d exclusively to test fo	r public safety S	See section 509	(a)(4).	
	more public	ly supported	organizations	d exclusively for the beddescribed in section 5 the type of supporting	09(a)(1) or se	ction 509(a)(2). See section 509(
a 🗆 ;	Type I. A s organizatior	upporting org	janization opei	rated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by	
	managemer	nt of the supp		pervised or controlled in ation vested in the sar and C.				
				supporting organizatio				ated with, its
d 🗆 ;	Type III no functionally	on-function integrated	ally integrate he organizatio	ions) You must com d. A supporting organi n generally must satis rt IV, Sections A and	ization operated fy a distribution	in connection wi requirement and	th its supported orga	
e 🗌	Check this b	oox if the org	anızatıon recei	ved a written determir	nation from the I		pe I, Type II, Type I	II functionally
	-		on-functionally organizations	integrated supporting	organization		_	
			on about the s	upported organization(1
	organization in your governing document? monetary support other s				(vi) Amount of other support (see instructions)			
					Yes	No		
		<u>'</u>						
otal								
	ouk Doduct	ion Act Not	ico coo the T	 nstructions for	Cat No 1128!	I SE	 Schedule A (Form 9	 000 or 000-E7\ 2010

▶Ⅵ

Schedule A (Form 990 or 990-EZ) 2018

(Complete only if you checked the box on line 5, 7, 8, or 9 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.)

Section A. Public Support

Calendar year

(a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total

	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")	17,423,397	22,422,667	12,647,103	28,986,324	36,521,196	118,000,687
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	17,423,397	22,422,667	12,647,103	28,986,324	36,521,196	118,000,687
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)						10,897,011
6	Public support. Subtract line 5						107,103,676
_	from line 4						
S	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2014	(b) 2015	(c)2016	(d)2017	(e) 2018	(f) Total
7	Amounts from line 4	17,423,397	22,422,667	12,647,103	28,986,324	36,521,196	118,000,687
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	401,061	267,220	316,987	406,465	842,810	2,234,543
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	13,881	0	13,881
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	447,821	659,861	372,545	588,411	359,807	2,428,445
11	Total support. Add lines 7 through 10						122,677,556
12	Gross receipts from related activities,	etc (see instruction	ons)			12	0
13	First five years. If the Form 990 is for	-			•	` ' ' -	_
	check this box and stop here					<u> ▶ L</u>	
S	ection C. Computation of Publi	c Support Perc	entage				_
14	Public support percentage for 2018 (li	ne 6, column (f) d	ivided by line 11, o	column (f))		14	87 31 %
	Public support percentage for 2017 Sc					15	83 61 %
1-5	25 05 02 76						

16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

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

b 10%-facts-and-circumstances test—2017. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

and stop here. The organization qualifies as a publicly supported organization

organization

instructions

supported organization

box and stop here. The organization qualifies as a publicly supported organization

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.554.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	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						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
36	ection B. Total Support Calendar year			I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	,	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
<u> </u>	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•		,	• •	18	
	331/3% support tests—2018. If the		·	on line 14 and lin	ne 15 is more than		ne 17 is not
							_
	more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2017. If the	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anızatıon	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations

Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported

organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by 5a

amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

>cn	edule A (Form 990 or 990-E2) 2018		F	age 5		
Pa	rt IV Supporting Organizations (continued)					
			Yes	No		
11	Has the organization accepted a gift or contribution from any of the following persons?					
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the					
	governing body of a supported organization?	11a				
b	A family member of a person described in (a) above?	11b				
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c				
S	ection B. Type I Supporting Organizations					
			Yes	No		
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2				
	organization	-				
S	ection C. Type II Supporting Organizations					
			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of					
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1				
_	<u> </u>					
	ection D. All Type III Supporting Organizations		Yes	No		
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		103	-140		
		1				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)					
		2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard					
S	ection E. Type III Functionally-Integrated Supporting Organizations		l			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)				
	The organization satisfied the Activities Test Complete line 2 below	•				
	b					
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instru	ctions)			
2	Activities Test Answer (a) and (b) below.	į	Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement					
,		2b				
3	Parent of Supported Organizations Answer (a) and (b) below.	_				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a				
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3h				

Sched	lule A (Form 990 or 990-EZ) 2018			Page 6				
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations					
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.							
	Section A - Adjusted Net Income (A) Prior Year (B) Current Year (optional)							
1	Net short-term capital gain	1						
2	Recoveries of prior-year distributions	2						
3	Other gross income (see instructions)	3						
4	Add lines 1 through 3	4						
5	Depreciation and depletion	5						
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6						
7	Other expenses (see instructions)	7						
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8						
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)				
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1						
а	Average monthly value of securities	1a						
b	Average monthly cash balances	1 b						
С	Fair market value of other non-exempt-use assets	1c						
d	Total (add lines 1a, 1b, and 1c)	1d						
е	Discount claimed for blockage or other factors (explain in detail in Part VI)							
2	Acquisition indebtedness applicable to non-exempt use assets	2						
3	Subtract line 2 from line 1d	3						
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4						
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5						
6	Multiply line 5 by 035	6						
7	Recoveries of prior-year distributions	7						
8	Minimum Asset Amount (add line 7 to line 6)	8						
	Section C - Distributable Amount		_	Current Year				
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1						
2	Enter 85% of line 1	2						
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3						
4	Enter greater of line 2 or line 3	4						
5	Income tax imposed in prior year	5						
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6						
7	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see				

Schedule A (Form 990 or 990-EZ) (2018)

c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2
If the amount is greater than zero, explain in Part VI

Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

See instructions

d Excess from 2017.e Excess from 2018.

3_j and 4c

8 Breakdown of line 7

Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12. Part IV. Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions) Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation Schedule A. Part II. Line 10 DESCRIPTION - GROSS REVENUE FROM FUNDRAISING EVENTS, COLUMN A - 370521 0, COLUMN B - 59436 Other Income 3 0, COLUMN C - 312865 0, COLUMN D - 535970 0, COLUMN E - 315935 0, COLUMN F - 2129654 0, DESCRIPTION - OTHER INCOME, COLUMN A - 2200 0, COLUMN B - 2850 0, COLUMN C - 4400 0, COLUM N D - 4840 0, COLUMN E - 0 0, COLUMN F - 14290 0, DESCRIPTION - GROSS REVENUE FROM GAMING

. COLUMN E - 43872 0, COLUMN F - 284501 0,

ACTIVITIES, COLUMN A - 75100 0, COLUMN B - 62648 0, COLUMN C - 55280 0, COLUMN D - 47601 0

Schedule A (Form 990 or 990-EZ) 2018

SCHEDULE D

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

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

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

DLN: 93493128021540 OMB No 1545-0047

Open to Public Inspection

Intern	nal Revenue Service ► Go to <u>www.irs</u>	s.qov/Form990 for the latest information.	Inspection					
	me of the organization		Employer identification number					
Big	Shoulders Fund		36-3490557					
Pa	art I Organizations Maintaining Donor Ad	vised Funds or Other Similar Funds o	l					
	Complete if the organization answered "							
		(a) Donor advised funds	(b)Funds and other accounts					
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor adviorganization's property, subject to the organization's		vised funds are the					
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No							
Pa	rt III Conservation Easements. Complete if	the organization answered "Yes" on Forn	n 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held by the or	ganızatıon (check all that apply) —						
	Preservation of land for public use (e g , recreat	tion or education) \square Preservation of an	historically important land area					
	Protection of natural habitat	Preservation of a c	certified historic structure					
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held	l a qualified conservation contribution in the for	m of a conservation					
	easement on the last day of the tax year		Held at the End of the Year					
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easements		2b					
С	Number of conservation easements on a certified hist	` '	2c					
d	Number of conservation easements included in (c) acc structure listed in the National Register	quired after 7/25/06, and not on a historic	2d					
3	Number of conservation easements modified, transfe tax year ▶	rred, released, extinguished, or terminated by	the organization during the					
4	Number of states where property subject to conserva	ation easement is located >						
5	Does the organization have a written policy regarding and enforcement of the conservation easements it has		of violations, Yes No					
6	Staff and volunteer hours devoted to monitoring, insp	pecting, handling of violations, and enforcing co	onservation easements during the year					
7	Amount of expenses incurred in monitoring, inspectin ▶ \$	ng, handling of violations, and enforcing conser	vation easements during the year					
8	Does each conservation easement reported on line 20 and section $170(h)(4)(B)(II)$?	(d) above satisfy the requirements of section 1	70(h)(4)(B)(ı) ☐ Yes ☐ No					
9	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							
Pai	Organizations Maintaining Collection Complete if the organization answered "	ns of Art, Historical Treasures, or Oth Yes" on Form 990, Part IV, line 8.	er Similar Assets.					
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held f provide, in Part XIII, the text of the footnote to its fir	116 (ASC 958), not to report in its revenue sta for public exhibition, education, or research in f						
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for p following amounts relating to these items							
((i) Revenue included on Form 990, Part VIII, line 1		▶ \$					
C	ii)Assets included in Form 990, Part X		▶ \$					
2	If the organization received or held works of art, histo following amounts required to be reported under SFA		·					
а	Revenue included on Form 990, Part VIII, line 1		▶ \$					
ь	Assets included in Form 990, Part X		▶ \$					

Cat No 52283D

Schedule D (Form 990) 2018

Par	t III	Organizations Ma	aintaining Coll	ections o	f Art, H	istori	cal Tr	eası	ires, o	r Other	Similar As	sets (conti	nued)	
3		g the organization's acq s (check all that apply)	uisition, accession	, and other	records,	check a	any of	the fo	llowing t	that are a	a significant u	se of its coll	ection	
а		Public exhibition d Loan or exchange programs												
b	☐ Scholarly research e ☐ Other													
С		Preservation for future	e generations											
4	Provi Part :	ide a description of the o	organization's coll	ections and	explain h	ow the	y furth	ner the	e organiz	zation's e	xempt purpo	se in		
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No													
Pa	rt IV	Escrow and Cust Complete if the org X, line 21.			' on Forn	n 990	, Part	IV, lı	ne 9, o	r report	ed an amou	nt on Form	n 990,	Part
1a		e organization an agent ded on Form 990, Part)		ın or other ı	ntermedia	ary for	contril	oution	s or oth	er assets	not	☐ Yes	☑ N	o
Ь	If "Ye	es," explain the arrange	ement in Part XIII	and comple	te the foll	lowing	table				A	mount		_
С		nning balance		'		,				1c				_
d	Addıt	tions during the year								1d				_
е	Dıstr	ributions during the year	r							1e				_
f	Endır	ng balance								1f				_
2a	Did t	:he organization include	an amount on For	m 990, Par	t X, line 2	1, for (escrow	or cu	istodial a	account li	abılıty?	✓ Yes	□м	– o
		es," explain the arrange												_
	rt V	Endowment Fund												
			<u>'</u>	(a)Curren			ior yea			ears back			our year	s back
1 a	Beginn	ning of year balance .			321,080		33,463	-		29,960,838		571,000		137,979
b	Contril	butions		-	266,216		1,256	,487		332,954	1 :	334,396		721,163
С	Net in	vestment earnings, gair	ns, and losses	1,	842,220		3,229	,702		4,763,478	3 -2,	352,658	1,9	906,491
d	Grants	s or scholarships			484,668		468	,353		437,182	2 .	432,078	;	388,692
е		expenditures for facilitie	es	1,	115,987		1,109	,778		1,116,618	3 1,	120,708	1,0	055,941
f	Admın	istrative expenses .	[50,000		50	,000		40,448	3	39,114		50,000
g	End of	f year balance	[36,	246,429		36,321	,080	3	33,463,022	2 29,5	960,838	33,	571,000
2	Provi	ide the estimated percei	ntage of the curre	nt year end	balance ((line 1g	ı, colu	mn (a)) held a	ıs				
а	Board	d designated or quasi-e	ndowment 🟲	63 %										
b	Perm	nanent endowment 🕨	31 %											
c	Temp	porarily restricted endov	wment ▶ 6	%										
За	The percentages on lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the													
	_	nization by Inrelated organizations										2-(:)	Yes	No No
	.,	-					•					3a(i) 3a(ii)		No
ь		related organizations . es" on 3a(ii), are the rel		s listed as r	eauired oi	. . n Sche	· · · dule R	· .				3b		
4		ribe in Part XIII the inte	-		•									
Pa	rt VI	Land, Buildings, Complete if the ord			' on Forn	n 990	. Part	IV. lı	ne 11a	. See Fo	rm 990. Pai	rt X. line 1	0.	
	Descr	ription of property	(a) Cost or othe (Investmen	er basıs	(b) Cost o						depreciation	•	ook valu	e
1a	Land			0				0						0
b	Buildir	ngs		0				0			0			0
		hold improvements		0			13	35,389			130,694			4,695
		ment								44,662				

13,941

46,043

59,984

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

Part VII Investments—Other Securities. Complete if th See Form 990, Part X, line 12.	ne organization answere	ed "Yes" on Form 990, Part IV, line 11b.
(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	0.488.800	F
A) Large Cap Equity Fund	9,488,899	
3) Small Cap Equity Fund	2,154,275	F
C) International Equity	7,481,619	F
D) Hedged Equity Fund	5,421,114	F
E) Private Equity	153,945	F
F) Absolute Return Fund	5,517,572	F
G) Alternative Fixed Income Fund	1,143,579	F
H) Fixed Income Fund otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	11,385,333	F
Part VIII Investments—Program Related.	42,746,336	
Complete if the organization answered 'Yes' on F (a) Description of investment	(b) Book value	(c) Method of valuation
1)		Cost or end-of-year market value
2)		
3)		
4)		
5)		
6)		
7)		
8)		
9)		
otal. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered	L'Ves' on Form 990 Part IV	/ June 11d See Form 990 Part V June 15
(a) Description		(b) Book value
1)		
2)		
3)		
4)		
5)		
5)		
7)		
8)		
9)		
otal. (Column (b) must equal Form 990, Part X, col (B) line 15)		
Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.	nswered 'Yes' on Form	990, Part IV, line 11e or 11f.
. (a) Description of liability 1) Federal income taxes	(b) Book	value
1) - Caciai income taxes		
2)		
3)		
4)		
5)		
6)		
7)		
8)		
9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	•	0
2. Liability for uncertain tax positions. In Part XIII, provide the text of		

Part XI

2

b

Part XII

5

1

2

3

5

Part XIII

See Additional Data Table

Schedule D (Form 990) 2018

12.750

50,000

12,750

50,000

-7,867,217

2e 3

4c

2e

3

4c

5

-5.992.527

Page 4

-5,979,777

39,073,383

50,000

39,123,383

18,517,230

-7,854,467

26,371,697

50,000

26.421.697

Schedule D (Form 990) 2018

Add lines 4a and 4b .

Add lines 2a through 2d .

Return Reference

а	Net unrealized gains (losses) on investments
b	Donated services and use of facilities
c	Recoveries of prior year grants
d	Other (Describe in Part XIII)
e	Add lines 2a through 2d
3	Subtract line 2e from line 1
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1

Donated services and use of facilities . . .

Other (Describe in Part XIII)

Supplemental Information

Subtract line 2e from line 1

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Investment expenses not included on Form 990, Part VIII, line 7b .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

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

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

2a 2b

2c 2d

4a

4b

2a

2b

2c 2d

4a

4b

Explanation

Schedule D (Forn	n 990) 2018	Page 5
Part XIII	Supplemental Info	ormation (continued)
Retur	n Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

(C) Hedged Equity Fund

(E) Absolute Return Fund

(G) Fixed Income Fund

(F) Alternative Fixed Income Fund

(D) Private Equity

Software Version:	2018v3.1
EIN:	36-34905
Name:	Big Should
Form 990, Schedule D, Part VII - Investments Other Securities	
(a) Description of security or category (including name of security)	(b)Book
(A) Large Cap Equity Fund	
(A) Small Cap Equity Fund	
(B) International Equity	

Software ID: 18007697

557 Ilders Fund value (c) Method of valuation Cost or end-of-year market value 9,488,899 F 2,154,275 7,481,619 F 5,421,114 F 153,945 F 5,517,572

F

1,143,579 11,385,333

Supplemental Information						
Return Reference	Explanation					
	Big Shoulders Fund receives donations classified for accounting purposes as agency transac tions designated for specific beneficiaries. Donations are deposited into Big Shoulders Fu nd bank accounts and recorded as liabilities until paid. Donations are tracked using the same method as other restricted donations.					

Supplemental Information	
Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	Endowment funds are used per donor restrictions for scholarships, programs, and other expenses Earnings on Board designated endowments are used for administrative expenses, which may include program, management, and fundraising expenses

Supplemental Information	upplemental Information						
Return Reference	Explanation						
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	The Fund has received a determination letter from the Internal Revenue Service indicating that the Fund is exempt from income tax under Section 501(c)(3) of the Internal Revenue Co de of 1986 and, except for taxes pertaining to unrelated business income, is exempt from f ederal and state income taxes. The Fund is classified as a public charity under Section 50. 9(a)(1) and Section 170(b)(1)(A)(vi), an organization that normally receives a substantial part of its support from direct or indirect contributions from the general public. A provision has been made for unrelated business income taxes in the accompanying financial statements in fiscal year 2019. The Fund recognizes a tax position as a benefit only if it is "more likely than not" that the tax position would be sustained in a tax examination, with a tax examination being presumed to occur. The amount recognized is the largest amount of tax benefit that is greater than 50% likely of being realized on examination. For tax positions not meeting the "more likely than not" test, no tax benefit is recorded. The Fund does not expect the total amount of unrecognized tax benefits to significantly change in the enext twelve months. The Fund has applied this criterion to all tax positions for which the statute of limitations include fiscal years ended June 2016 through 2018. The Fund direcognizes interest and penalties related to unrecognized tax benefits in interest and income tax expense, respectively. The Fund has no amounts accrued for interest or penalties as of June 30, 2019 and 2018. The Fund has determined that its tax provisions satisfy the more likely than not criterion and that no provision for income taxes is required at June 30, 2019.						

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form	loss on collectible accounts22350 adjustment for agency transaction receipts see schedule O for narative 5970177

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990	adjustment for agency transaction distributions see schedule o narrative7867217

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493128021540 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. **Open to Public** ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** Big Shoulders Fund 36-3490557 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria 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 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e.g., program service, describe for and investments fundraising, program and independent specific type of in region region contractors in services, investments, grants service(s) in region region to recipients located in the region) Central America and the 0 0 Investments 14,577,315 Carıbbean 3a Sub-total 14,577,315 b Total from continuation sheets to Part I o O 14.577.315 c Totals (add lines 3a and 3b)

Schedule F (Form 990) 2018							Page 3
Part IIII Grants and Otl				ed States. Complete r	f the organization ar	nswered "Yes" to Form 9	990, Part IV, line 16.
	duplicated if addit			T	1		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Sched	dule F (Form 990) 2018		Page 4
Par	t IV 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)	☑ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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, don't file with Form 990)	_	_
		∐ Yes	☑ 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)		
	Corporations (See Instructions for Form 3471)	✓ Yes	□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)	Yes	☑ 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)		
		✓ Yes	□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 separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713, don't file with Form 990)	☐ Yes	✓ No

Schedule F	(Form 990) 2018	Page 5						
Part V	amounts of investments vs. expen	by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; ditures per region); Part II, line 1 (accounting method); Part III (accounting (estimated number of recipients), as applicable. Also complete this part to provide structions).						
990 S che	90 Schedule F, Supplemental Information							
	Return Reference	Explanation						

No assistance is given outside the United States

990 Schedule F, Supplemental Informatio	90 Schedule F, Supplemental Information				
Return Reference	Explanation				

Schedule F, Part I, Line 2

SCHEDULE G
(Form 990 or 990-EZ)

SCHEDULE G
Fundraising or C

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

Go to www irs gov/Form990 for instructions and the latest information

organization entered more than \$15,000 on Form 990-EZ, line 6a
Attach to Form 990 or Form 990-EZ.

2018

DLN: 93493128021540OMB No 1545-0047

Open to Public Inspection

	ne of the organization						Employer ide	entification number
ıg	Shoulders Fund						36-3490557	
Pa	Fundraising Activi				answered "Yes" on Fo	orm 990,	Part IV, line	17.
L	Indicate whether the organiza	tion raised funds th	rough an	y of the fo	ollowing activities Check	all that a	pply	
а	Mail solicitations			e	Solicitation of nor	n-governm	ent grants	
b	☐ Internet and email solicita	ations f Solicitation of government grants						
c	Phone solicitations			g	Special fundraising	g events		
d	☐ In-person solicitations							
2a	Did the organization have a w or key employees listed in For						·	es 🗆 No
b	If "Yes," list the ten highest po to be compensated at least \$5			ndraisers)	pursuant to agreement	s under wh		
i)	Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or re fundra	nount paid to etained by) aiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
ot	al			•				
	List all states in which the organ	nization is registere	d or licens	sed to sol	icit contributions or has	been notifi	ied it is exempt	from registration or

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

10a

If "Yes," explain _

☐ Yes ☑ No

Sche	dule G (Form	990 or 990-EZ) 2018					Page 3
11	Does the org	ganızatıon conduct gamıng	activities with nonmembers	5?		☐ Yes	✓ No
12		nization a grantor, beneficia dminister charitable gamin		member of a partnership or other entity		□Yes	
13	Indicate the	percentage of gaming act	vity conducted in				NO
а	The organiza	ation's facility			13a		0 %
b	An outside f	acılıty			13b		100 %
14	Enter the na	ame and address of the per	son who prepares the orga	nization's gaming/special events books and	records		
	Name 🕨	Malcolm Douglas					
	Address 🟲	217 W Van Buren Chicago, IL 60607					
15a	Does the org revenue?	ganızatıon have a contract	with a third party from who	om the organization receives gaming		□Yes	☑ No
b			evenue received by the org the third party \$	anization ▶ \$ and	the		
С	If "Yes," ent	er name and address of th	e third party				
	Name 🟲						
	Address ►						
16	Gaming mar	nager information					
	Name 🟲						
	Gaming mar	nager compensation > \$		0			
	Description	of services provided P	resident & CEO				
	☑ Director	r/officer	☐ Employee	☐ Independent contractor			
17	Mandatory d	distributions					
а	_	nization required under stat tate gaming license?	e law to make charitable di	stributions from the gaming proceeds to		☐Yes	✓ No
b	Enter the an	mount of distributions requ	ired under state law distribu	uted to other exempt organizations or spent	:	_ 163	
		<u> </u>	ities during the tax year 🕨	•			
Pai				ions required by Part I, line 2b, colum licable. Also provide any additional inf			
	Retu	ırn Reference		Explanation			
Scho	dula C. Dart II	II lung 16	Mr Hale is not separately	compensated for his oversight of any gamir	na activitie	es	

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493128021540 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number Big Shoulders Fund 36-3490557 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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 (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Schedule I (Form 990) 2018

(3)

(3) Scholarships to college students 13 43,500

(4) (5)

(6)(7) Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Return Reference **Explanation**

Schedule I, Part II Basis of Although Big Shoulders Fund prepares its financial statements on the accrual basis. Schedule I Part II has been prepared on the cash basis Big Shoulders Fund believes

this method is more informative as it shows actual cash outlays during the year, including both direct payments to schools and payments made on behalf of schools. On Accounting

the accrual basis, multi-year grants pledged but not paid in the current year would be included in this schedule, but cash payments to schools as a result of previous multi-year grants would not be included. This could cause a misunderstanding regarding the actual annual support that the Big Shoulders Fund provides to certain schools during each school vear

ΑE Schedule I, Part II, Line 1(h) other academic enrichment AR alumni records CG capital grant DDG donor designated grant EC early childhood ED extended day FR Purpose of grant or assistance leadership award MO fundraising event HI health initiative IE inclusive education LA marketing/operating assistance

Code Legend OΡ service days SPG special program grants STEM operating grant PD professional development PP patron program SD

math SM stock market Schedule I, Part I, Line 2 Procedures for monitoring use of

science, tech, ena, Procedures for monitoring the use of grant funds differ based on the type of grant awarded Schools eligible for support are reviewed each year to ensure they meet the criteria (in the City of Chicago, student population has over 20% who qualify for free or reduced lunch and participate in Title I programs) Schools report annually on indicators including financial viability, enrollment, student academic performance, and demographic characteristics of students served. Renewable scholarship awards grant funds include regular progress monitoring and reporting by the individual schools on students. Patron program funds are only distributed upon agreement of Patron, School Principal, and Big Shoulders Fund, and requires substantiation through receipting or accounting of use of funds Programmatic and capital support requires a minimum of annual reports on use of funds and demonstrated measurable objectives met through the funding Big Shoulders Fund staff regularly visit (at least 2 - 5 times per

year) schools and meet with school leadership to ensure schools are using funds as indicated by the requirement of each type of support

Page **2**

Additional Data

Academy of St Benedict

6020 S Laflin St Chicago, IL 60636 Augustus Tolton Academy

7120 S Calumet Ave Chicago, IL 60619

36-2171119

36-2170979

Software ID: 18007697 **Software Version:** 2018v3.1 **EIN:** 36-3490557 Name: Big Shoulders Fund

Form 990,Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	c Governments.	
	•					_

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	

140,528

70,755

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash		
organization		ıf applıcable	grant	cash	(book, FMV, appra

501(c)3

501(c)3

ments.		
of valuation		(h) Purpose of grant
√, appraisal,	non-cash assistance	or assistance

PP DDG LA

PP AE STEM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Bridgeport Catholic Academy 36-3377611 501(c)3 15.709 ISTEM SM ED

3700 S Lowe Ave
Chicago, IL 60609

Children of PeaceHoly Trinity
School
1900 W Taylor Street

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Chicago, IL 60612

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 36-2170835 501(c)3 5.357 Christ the King Elementary

9240 S Hoyne Ave Chicago, IL 60620 Christ the King Jesuit College 26-0556958 501(c)3 21.890 CG SPG FR

Prep School 5088 W Jackson Blvd Chicago, IL 60644

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 42-1597059 501(c)3 15.000 FR SPG Cristo Rey St Martin College Prep

ISTEM FR

13.593

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

3106 Belvidere Road Waukegan, IL 60085

3434 S Michigan Ave Chicago, IL 60616

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Epiphany School 36-2412597 501(c)3 116.965 DDG SM LA

OP PP LA

Epiphany School 36-2412597 501(c)3 116,965 4223 W 25th St Chicago, IL 60623

476.257

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Holy Angels School

750 E 40th St Chicago, IL 60653

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Holy Trinity High School 36-2171703 501(c)3 293.423 DDG STEM CG

Holy Trinity High School 36-2171703 501(c)3 293,423 DDG STEM CC 1443 W Division St Chicago, IL 60642

Immaculate Conception School 36-3310936 501(c)3 120,052 STEM SM ED (Exchange)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

8739 S Exchange Avenue Chicago, IL 60617

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Josephinum Academy 36-2167764 501(c)3 27.989 AE FR CG 1501 N Oakley Blvd

IOP CG DDG

403.350

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Chicago, IL 60622 Leo High School

7901 S Sangamon St Chicago, IL 60620

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Maternity BVM School 36-2171722 501(c)3 118.519 IPP STEM AF

1537 N Lawndale Ave Chicago, IL 60651

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Waukegan, IL 60085

Most Blessed Trinity Academy 47-0955784 501(c)3 30.548 PP SPG ED 510 Grand Avenue

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Northside Catholic Academy 36-3956710 501(c)3 16.852 ISTEM ED SM 6216 N Glenwood Avenue

PP SM LA

39,423

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

36-2170886

Chicago, IL 60660

Our Lady of Grace School

2446 N Ridgeway Ave Chicago, IL 60647

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Our Lady of Guadalupe School 36-2743254 501(c)3 114.998 IPP STEM CG 9050 S Burley Avenue Chicago, IL 60617

OP PP LA

115.740

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Our Lady of Tepevac

Elementary School 2235 S Albany Ave Chicago, IL 60623

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 36-4202108 501(c)3 14.909 OP STEM SPG Our Lady of Tepeyac High School

School
2228 S Whipple St
Chicago, IL 60623

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Chicago, IL 60638

 Chicago, IL 60623
 Solution
 II5,770
 IE SM SPG

 Our Lady of the Snows School 4810 S Learnington Ave
 36-2401758
 501(c)3
 115,770
 IE SM SPG

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 36-2170859 501(c)3 127.584 PP LA IE Pope John Paul II Catholic School 4325 S Richmond St

AE DDG MO

28.093

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Chicago, IL 60632

7130 S Hamlin Ave Chicago, IL 60629

Oueen of the Universe School

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance Sacred Heart School (Chicago) 36-2171734 501(c)3 53.072 LA STEM SM 2926 E 96th St Chicago, IL 60617

2926 E 96th St
Chicago, IL 60617

San Miguel School - Back of 36-4378726 501(c)3 36,870

the Yards

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1949 W 48th Street Chicago, IL 60609

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance MO SM

Santa Lucia School	36-2171069	501(c)3	598,297		ОР МС
3017 S Wells St					
Chicago, IL 60616					

St Agnes of Bohemia School 36-3552287 501(c)3 58,907 EC IE SM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2643 S Central Park Ave. Chicago, IL 60623

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St Ailbe School 36-2170926 501(c)3 229.832 IPP OP LA 9037 S Harper Ave

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Chicago, IL 60651

Chicago, IL 60619 St Angela School 36-4091553 501(c)3 105.587 IPP STEM DDG 1332 N Massasoit Ave

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

ISTEM SM PP

St Ann School (Chicago) 2211 W 18th Pl	36-2284297	501(c)3	65,127		STEM LA ED
Chicago, IL 60608					

11.191

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

St Barbara School (Chicago)

2867 S Throop St Chicago, IL 60608

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance

ISTEM SM MO

St Bartholomew School	36-2170946	501(c)3	8,002		PP SD EC
4941 W Patterson Ave					
Chicago, IL 60641					

19,536

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

St Bede the Venerable School

4440 W 83rd St Chicago, IL 60652

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance St Bruno School 36-2170961 501(c)3 99.533 IE SPG STEM 4839 S Harding Ave

4839 S Harding Ave
Chicago, IL 60632

St Catherine of SienaSt Lucy 36-2170969 501(c)3 48,394

LA AE ED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

27 W Washington Oak Park, IL 60302

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance D SM

St Constance School	36-3965141	501(c)3	141,917		PP ED
5841 W Strong St			·		
Chicago, IL 60630					

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

8734 S Paulina St Chicago, IL 60620

St Ethelreda School 36-2182112 501(c)3 397,201 OP PP STEM

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 36-2192835 501(c)3 5.217 AE SD SM St Ferdinand School 3131 N Mason Avenue

3131 N Mason Avenue
Chicago, IL 60634

St Francis de Sales High School 36-2435876 501(c)3 1,212,465

(Chicago)

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

10155 S Ewing Ave Chicago, IL 60617

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 36-2707503 501(c)3 111.134 ISTEM SM ED

St Gabriel School 4500 South Wallace Street Chicago, IL 60609

St Gall School 36-2704905 501(c)3 42.627 IPP EC STEM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

5515 S Sawver Ave Chicago, IL 60629

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance _A EC

PP STEM SD

St Genevieve School 4854 W Montana St Chicago, IL 60639	36-2171008	501(c)3	119,229		PP LA
Chicago, IL 60639					

142.051

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

36-2373447

St Helen School

2347 W Augusta Blvd Chicago, IL 60622

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance AR SM EC IE

St Hilary School 36-2171019 501(c)3 25.796 5614 N Fairfield Ave

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Chicago, IL 60647

Chicago, IL 60659 St John Berchmans School 36-2171034 501(c)3 5.967 OP SM MO 2511 W Logan Blvd

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St John de la Salle Catholic 36-2171032 501(c)3 151 008 OP STEM PP

Academy				
10212 S Vernon Ave				
Chicago, IL 60628				

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2252 W Washington Blvd Chicago, IL 60612

St Malachy School 36-4091553 501(c)3 147.224 PP STEM IE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St Margaret of Scotland School 36-2367986 501(c)3 200.100 OP PP DDG 9833 S Throop St

PP STEM SM

16.393

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Chicago, IL 60643

1810 N Hermitage Ave Chicago, IL 60622

St Mary of the Angels School

36-2171072

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance OP EC LA

St Mary of the Lake School 36-2171076 501(c)3 139.100 1026 W Buena Ave Chicago, IL 60613

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Chicago, IL 60629

St Mary Star of the Sea School 36-2848256 501(c)3 107,406 PP ED SM 6424 S Kenneth Ave

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 36-2171089 501(c)3 35.087 IE STEM SM St MatthiasTransfiguration School 4910 N Claremont Ave. Chicago, IL 60625

OP AE STEM

64.466

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

St Michael the Archangel School

8231 S South Shore Dr. Chicago, IL 60617

36-2171093

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance St Nicholas of Tolentine School 36-2182132 501(c)3 163.679 ISTEM IE SPG 3741 W 62nd St

3741 W 62nd St
Chicago, IL 60629

St Nicholas Ukrainian 13-1026995 501(c)3 92,305

STEM LA IE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2200 W Rice St Chicago, IL 60622

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St Philip Neri School 36-2171115 501(c)3 172.879 OP PP LA

ISTEM SM FR

 St Philip Neri School
 36-2171115
 501(c)3
 172,879

 2110 E 72nd St
 Chicago, IL 60649
 0

57,540

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

Chicago, IL 60649

St Pius V School
1919 S Ashland Ave

Chicago, IL 60608

36-2240477

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St Procopius School 36-3352367 501(c)3 22.058 IPP LA OP

1625 S Allport St Chicago, IL 60608

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

5025 S Kenneth Avenue Chicago, IL 60632

St Richard School 36-2171120 501(c)3 19.557 AE EC

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St Sabina Academy 36-2171123 501(c)3 260.066 PP CG FR

St Sabina Academy 36-2171123 501(c)3 260,066 PP CG FR 7801 S Throop St Chicago, IL 60620 St Stanislaus Kostka School 36-2171128 501(c)3 35,772 STEM SM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1255 N Noble St Chicago, IL 60622

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance EC SD

STEM SM

27.471

					1
St Sylvester School	36-2488067	501(c)3	91,023		PP E
3027 W Palmer Square					l
Chicago, IL 60647					i

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

St Symphorosa School

6125 S Austin Ave Chicago, IL 60638 36-2171135

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Ch Thanasa Cabaal 26 2240470 E01/-\2 26 051 SM STEM EC

247 W 23rd St Chicago, IL 60616	36-2240479	501(0)3	36,931		SIM STEM
St Thomas of Canterbury	36-2240480	501(c)3	165,851		PP LA SD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Chicago, IL 60640

School 4827 N Kenmore Ave

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance St Thomas the Apostle School 36-2171144 501(c)3 59.386 IPP FC STEM 5467 S Woodlawn Ave

DDG SM

6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

36-2337889

Chicago, IL 60615 St Walter School

11741 S Western Ave Chicago, IL 60643

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance St William School 36-2171154 501(c)3 25.156 OP MO STEM

IE LA PP

129,776

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

36-3648506

2559 N Sayre Ave Chicago, IL 60707 Visitation School

900 W Garfield Blvd Chicago, IL 60609

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Mother McAuley Liberal Arts 36-2345207 501(c)3 25.000

SM MO FR STEM

High School 3737 W 99th Chicago, IL 60655	,	·		

5.873

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)3

36-2170788

ANNUNCIATA SCHOOL

3750 E 112th St Chicago, IL 60617

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9312	8021	.540
Sch	edule J	Co	mpensat	ion Information	OM	IB No	1545-(0047
(Forr	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.						3
► Attach to Form 990. Department of the Treasury ► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information. Op								
	nl Revenue Service me of the organiza	ation			Employer identificat		ectio	
	Shoulders Fund					.0	iiiibei	
Pa	rt I Questi	ons Regarding Compensa	tion		36-3490557			
	- Quissur	one magaraning compensation					Yes	No
1a				f the following to or for a person liste ly relevant information regarding the				
		s or charter travel		Housing allowance or residence for	•			
	_	companions		Payments for business use of perso				
		nification and gross-up payment	s 🔽	Health or social club dues or initiati				
	☐ Discretion	ary spending account		Personal services (e g , maid, chaut	rreur, cner)			
b		xes in line 1a are checked, did th all of the expenses described abo		ollow a written policy regarding payn nplete Part III to explain	nent or reimbursement	1 b	Yes	
2				or allowing expenses incurred by all r, regarding the items checked in line	- 1-2	2	Yes	
	directors, truste	es, officers, including the CLO/L	.xecutive Directo	r, regarding the items checked in line	- 1a·			
3	organization's C	EO/Executive Director Check al	I that apply Dor	ed to establish the compensation of t not check any boxes for methods CEO/Executive Director, but explain				
	✓ Compens	ation committee		Written employment contract				
	_ '	ent compensation consultant	✓	Compensation survey or study				
	✓ Form 990	of other organizations	\checkmark	Approval by the board or compensa	ition committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	Receive a sever	ance payment or change-of-cont	trol payment?			4a		No
b		r receive payment from, a suppl		ified retirement plan?		4b		No
c	Participate in, o	r receive payment from, an equi	ty-based comper	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	d provide the app	plicable amounts for each item in Par	t III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.				
5	For persons liste		n A, line 1a, did	the organization pay or accrue any				
а	The organization	1 [?]				5a		No
b	Any related orga					5b		No
	-	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any				
а	The organization					6a		No
b	Any related orga					6b		No
	-	6a or 6b, describe in Part III						
7		ed on Form 990, Part VII, Sectio escribed in lines 5 and 6? If "Yes		the organization provide any nonfixe rt III	d	7	Yes	
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		No
9	If "Yes" on line 5 53 4958-6(c)?	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		
For F	Paperwork Redu	iction Act Notice, see the Ins	tructions for Fo	orm 990. Cat No. 5	50053T Schedule J	(Forn	990)	2018

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on 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 column (D) and (E) amounts for that individual

Note. The sum of columns (B)(1)-(III) for each listed individual must equal the total amount of Form 990,		raic vii, Section A, line .			L marviduai			
(A) Name and Title	-		of W-2 and/or 1099-MISC		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Senents		as deferred on prior Form 990
	(i)	127,113	0	31,115	6,002	23,023	187,253	0
CFO (Through 7/31/2018)	(ii)	0	0	0	0	0	0	0
2 Joshua Hale	(i)	462,183	23,701	8,846	9,250	32,019	535,999	0
Procedent & CEO	(ii)	0	0	0	0	0	0	0
-	(i)	176,660	9,452	720	7,939	32,523	227,294	0
Senior Director, Academic Programs and External Affairs	(ii)	0	0	0	0	0	0	0
4 John Moran	(i)	172,240	9,452	3,376	7,916	40,449	233,433	0
Conjor Director Patrons	(ii)	0	0	0	0	0	0	0
5 Thomas Zbierski	(i)	177,711	8,978	1,896	7,541	21,949	218,075	0
Saniar Director Scholarchin	(ii)	0	0	0	0	0	0	0
6 Amelia Drozda	(i)	135,217	6,827	695	5,735	8,025	156,499	0
Senior Director	(ii)	0	0	0	0	0	0	0
7 Nicole Wilson	(i)	92,664	0	18,179	2,763	3,475	117,081	0
Former Cr Director Strategy	(ii)	0	0	0	0	0	0	0
							_	
	1							
	\							
							Schedule	J (Form 990) 2018

Chedule J (Form 990) 2018 Page 3					
Part III Supplemental Information					
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation				
Schedule J, Part I, Line 1a Health or Dues to social clubs are paid on behalf of Joshua Hale, President and CEO, to have a place to conduct off-site board meetings and meetings with do					

social club dues or initiation fees

Return Reference	Explanation
ayments	A bonus was paid to all active employees at 12/31/2018, including employees listed in Part VII, based on meeting organizational goals during the year. The bonus percentage is determined by the Co-chairmen. The same bonus percentage is used for all employees. The bonus percentage is multiplied by each employees regular annual compensation to determine the dollar amount of the bonus.

pa

efil	e GRAPHIC pi	int - DO NOT PR	ROCESS	As Filed Data -		DLN:	9349312	8021	540
	EDULE M			loncash Contri	hutions		OMB No 1	.545-0	047
(For	m 990)		1	ioncasn contri	Dutions		20	10	•
		l -	_	ons answered "Yes" on F	orm 990, Part IV, lines 2	9 or 30.	20	19)
		► Attach to Form							
Interna	tment of the Treasury al Revenue Service		iov/Form9	<u>90</u> for the latest informa	tion.		Open to Inspe	ection	
	e of the organizat noulders Fund	ion				Employer ident	ification n	umbei	r
	, our a or o r a ma					36-3490557			
Pa	rt I Types	of Property							
			(a) Check ıf applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	noncash co	(d) d of determin ontribution a		:s
1	Art—Works of ar	t			-9				
2	Art—Historical tr	easures .							
3	Art—Fractional ir	nterests							
4	Books and public	ations							
5	Clothing and hou								
e	-		-			+			
6 7	Cars and other v Boats and planes					+			
	Intellectual prope								
	Securities—Publi	•	X	40	1 379 32	1 Market value			
	Securities—Close				1,5,5,52	I larket value			
	Securities—Partr	nership, LLC,							
12	Securities—Misce	ellaneous							
13	Qualified conserve contribution—H structures	istoric							
14	Qualified conserve contribution—O	vation							
15	Real estate—Res	sidential .							
16	Real estate—Cor	nmercial							
17	Real estate—Oth								
18	Collectibles .								
19	Food inventory		X	1	17,43	5 Market value			
20	Drugs and medic	al supplies .							
21	Taxidermy .								
	Historical artifact								
	Scientific specim								
	Archeological art Other ▶ (1			
	Other • (1			
	Other ▶ (
	Other ▶ (•							
29				ition during the tax year for B, Part IV, Donee Acknowled		29			0
								Yes	No
30a	must hold for at	least three years fr	om the date	y contribution any property of the initial contribution,	and which is not required to	be used for exer			No
b	If "Yes," describ	e the arrangement (n Part II						
31	Does the organi	zation have a gift ac	ceptance p	olicy that requires the revie	w of any nonstandard contr	ibutions?	31	Yes	
32a				or related organizations to s		ash · · · ·	32a		No_
b	If "Yes," describ	e ın Part II							
33	If the organization describe in Part	•	amount in	column (c) for a type of pro	perty for which column (a)	ıs checked,			
For D		on Act Notice, see the	Instruction	s for Form 990	Cat No. 512271	Scher	lule M (Form	000)	(2018)

Schedule M (Form 990) (2018)							
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part							
I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.							
Return Reference	Explanation						
Schedule M, Part I Explanations of reporting method for number of contributions	Securities - Publicly traded - Combination of both methods Food inventory - number of contributions received						
	Schedule M (Form 990) (2018)						

efile GRAPH	PHIC print - DO NOT PROCESS As Filed Data - DLN: 9349312802					
SCHEDULE O (Form 990 or 990- EZ) 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. Form 990 or 990-EZ.						
Namel & the ofe	변취호ation	Employer identi 36-3490557	Inspection fication number			
Return Reference	e O, Supplemental Information Explanation					
Form 990, Part III, Line 4d Description of other program services	(Expenses \$ 2,086,804 including grants of \$ 1,290,758)(Revenue \$ 0) Other program services General academic enrichment activities for students, such as outdoor education, learning about investments and the stock market Support for schools holding fund-raising events Supporting volunteer school cleanup and maintenance activities Grants to schools as desig nated by donors - agency (pass-through) transactions					

Return Reference	Explanation
Form 990, Part VI, Line 15b PROCESS TO ESTABLISH COMPENSATION OF OFFICERS & KEY EMPLOYEES	ON AN ANNUAL BASIS, THE CEO AND SENIOR DIRECTOR, PEOPLE AND LEADERSHIP, PERFORM AN EVALUAT ION FOR EACH OFFICER AND KEY EMPLOYEE OF THE ORGANIZATION THIS EVALUATION IS PERFORMED US ING A SET OF PREDETERMINED CRITERIA FOR EACH ROLE AND ASSESSING HOW EACH INDIVIDUAL PERFOR MED COMPARED TO THESE METRICS THIS EVALUATION FORMS THE BASIS TO DETERMINE ANY SALARY ADJUSTMENTS

r governance of the Corporation but are honorary titles only

Return

Reference	
Form 990,	An Executive Committee, comprised of at least 11 but no more than 35 individuals, is veste
Part VI, Line	d with the management of the affairs of the corporation Each member is entitled to one vo
1a Delegate	te on each matter submitted to a vote of the Executive Committee All members of the Execu
broad	tive Committee are also members of the Board of Directors The Board of Directors (as many
authority to a	members as deemed appropriate) shall be appointed by the Executive Committee The duty of
committee	the Board of Directors is to advise the Executive Committee on any matters for which the
1	Francisco Consiste and an accordant to the consistency of the Board of Boar

Explanation

Executive Committee requests their counsel. The opinion of the Board of Directors either i ndividually or as a whole shall not be binding on any actions of the Executive Committee The terms "Director" and "Board of Directors" do not refer to those legally responsible fo

990 Schedule O, Supplemental Information

Return Reference	Explanation
VI, Line 2	Mr Charles K Bobrinskoy, Mr John A Canning, Jr - Business relationship, Mr Kent Daut en Mr John A Canning, Jr - Business relationship, Mr John A Canning, Jr , Timothy P Sullivan - Business relationship

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	The Form 990 tax return is reviewed by the Audit Committee and the President and is distributed to the governing body prior to filing

Return Reference	Explanation
12c Conflict	A conflict of interest policy applies to directors, officers, or members of a committee with authority to take action on behalf of the Executive Committee An annual notice is sent to all individuals covered under the policy. Any conflict of interest is required to be disclosed to the Executive Committee prior to the transaction taking place. The Executive Committee will review relevant information and make a determination on whether or not a conflict exists. Should a conflict exist, no parties subject to the conflict are eligible to

discuss or vote on the transaction All Executive Committee members are also required to r

eport any family or business relationships requiring disclosure on the Form 990

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	DURING CALENDAR YEAR 2018, A SUB-COMMITTEE OF THE EXECUTIVE COMMITTEE WERE TASKED WITH DET ERMINING THE COMPENSATION OF THE PRESIDENT & CEO THE SUBCOMMITTEE MADE UP OF CO-CHAIRMEN AND SELECTED MEMBERS OF THE EXECUTIVE COMMITTEE DETERMINED FISCAL YEAR 2019 COMPENSATION F OR THE PRESIDENT USING COMPARATIVE DATA FROM OTHER NOT-FOR-PROFIT ORGANIZATIONS ALL MEMBE RS DETERMINING COMPENSATION ARE CONSIDERED TO BE INDEPENDENT PERSONS THIS PROCESS WAS CON TEMPORANEOUSLY SUBSTANTIATED AND WAS LAST UNDERTAKEN IN MARCH 2018 (FOR THE TAX YEAR)

Return Explanation

Form 990,	Form 990's and financial statements are available at www bigshouldersfund org. Governing d
Part VI, Line	ocuments and the conflict of interest policy are provided upon request
19 Required	
documents	
available to	
the public	

Doturn

Reference	Explanation
Form 990, Part XI, Line 9 Agency Transactions	Under generally accepted accounting principles, non-profit organizations must report agency transactions in a specific manner. Agency transactions are contributions received from donors 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. As required under GAAP for financial statement presentation, Big Shoulders Fund excludes these from (net) revenue and reports them as liabilities when received. However, in order to present the true amount of support received from donors, Big Shoulders Fund includes these gifts in tota. I contribution revenue on Line 1 and then includes them as a reconciling item on Part XI, Line 9. Correspondingly, agency expenditures are not included in total expenses. Big Shoulders Fund nets these with the reconciling item for Agency Transactions on Part XI, Line 9.

Evolunation

Return Reference	Explanation	
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	loss on uncollectible accounts and rescinded pledges22350, Adjustment for Agency Trans actions - See Schedule O Narrative - 7867217, Adjustment for Agency Transactions - See Schedule O Narrative5970177,	