Form **990** 

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.

OMB No. 1545-0047 2016

11

| Dep<br>Inter   | artment o<br>nal Reve   | of the Treasury<br>snue Service |   | <ul> <li>Do not el</li> <li>Informatio</li> </ul> | nter social sec<br>n about Form ( | 990 and its ins    | tructions is at wi                       | t may be<br>ww <i>.irs</i> .g | made publ<br>gov/form | 990.              |           |                        |              |                           |                 |
|--|---|---------------------------------|---|---|-----------------------------------|--------------------|--|-------------------------------|-----------------------|-------------------|-----------|------------------------|--------------|---------------------------|-----------------|
| A  | For th  | ne 2016 calen                   | dar year, or ta                                     | x year begi                                       | nning Jul                         | 1                  | , 2016,                                  | and en                        | ding J                | un 30             | )         | Lever.                 | ,2017        |                           | 100.000         |
| В  | Check if  | f applicable:                   | C Name of orga                                      | Employ  | er iden                           | tification n       | umber                                    |                               |                       |                   |           |                        |              |                           |                 |
|  | Ad  | idress change                   | Doing busines                                       | ss as   |                                   |                    |  |                               |                       |                   | 36-       | 3490                   | )557         |                           |                 |
|  | Na  | ame change                      | Number and s  | street (or P.O. be                                | ox if mail is not d               | elivered to street | address)                                 | Ro                            | om/suite              | Ē                 | Telepho   | ນນອ <sup>ື</sup> ່ມການ | ıber         |                           |                 |
|  | Ini   | tial return                     | 212 W Va  | n Buren   | Street                            |                    |  | 90                            | 00                    |                   | (31)      | 2) 7                   | 51-83        | 37                        |                 |
|  | Fin   | al return/terminated            |   |   | , country, and ZI                 | P or foreign post  | al code                                  | 1,5 -                         |                       |                   | (0 = )    | - / ·                  |              |                           |                 |
|  | An  | nended return                   | Chicago   |   |                                   |                    | IL                                       | 6060                          | 7                     | G                 | Gross r   | eceipts                | \$ 30,58     | 32.382                    |                 |
| Application pending F Name and address of principal officer: |   |                                 |   |   |                                   |                    |  |                               |                       |                   |           | No                     |              |                           |                 |
|  | Joshua Hale 212 W Van Buren, Suite 900 Chicago IL 60607 H(b) Are all subordinates included? |                                 |   |   |                                   |                    |  |                               |                       |                   |           |                        |              |                           |                 |
| ī  | Tax-  | exempt status                   | X 501(c)(3)   | 501(c) (  |                                   | (insert no.)       | 4947(a)(1) or                            | 527                           | II                    | 'No,' attac       | nalist, ( | see inst               | ructions)    |                           |                 |
| J  |   |                                 | w.bigshou   | 1 1   |                                   |                    |  | - 1 - 1                       |                       | roup exem         | ption nu  | mber 🖡                 | ►            |                           |                 |
| ĸ  | Form  | of organization:                | X Corporation                                       | Trust   | Association                       | Other 🏲            | LY                                       | ear of forn                   |                       | 986               | <u> </u>  |                        | egal domicil | e: IL                     | _               |
| 5 e<br>41  |   | Summar                          |   | <u> </u>  |                                   | <u> </u>           | <u> </u>                                 |                               |                       |                   |           |                        | -            |                           |                 |
| 193844.00  |   |                                 | e the organiza                                      | tion's missio                                     | n or most sig                     | nificant activ     | vities: Bio                              | r Should                      | ders Fun              | d prov            | ides f    | unds                   | to suppo     | ort Cathol                | ic              |
| đ  |   |                                 |   |   |                                   |                    | rts of inner-ci                          |                               |                       |                   |           |                        |              |                           |                 |
| ũ  |   |                                 |   |   |                                   |                    | en, of whom 80%                          |                               |                       |                   |           |                        |              |                           |                 |
| Ĕ  |   | not Catholic.                   | BSF raises &  | provides fu                                       | nds for schol                     | arships, cap       | ital and progra                          | ammatic                       | enhanceme             | nts_to_i          | mprove    | the e                  | ducationa    | 1 environme               | nt.             |
| Ň  |   |                                 |   |   |                                   |                    | ons or disposed                          |                               |                       |                   |           | ssets.                 |              |                           |                 |
| ۍ<br>س   | 3   | Number of vot                   | ing members of                                      | of the goverr                                     | ning body (Pa                     | art VI, line 1a    | )  |                               |                       |                   | ••        | 3                      |              |                           | 34              |
| Se   |   |                                 |   |   |                                   |                    | art VI, line 1b)                         |                               |                       |                   |           | 4                      |              |                           | 34              |
| Ϋ́Ε,   | 5   | Total number                    | of individuals e                                    | enpioyed in<br>estimate if n                      | calendar yea                      | r 2016 (Part       | V, line 2a)                              |                               | • • • • •             |                   | •••       | 5                      |              |                           | 43              |
| Activities & Governance                                      |   |                                 |   |   |                                   |                    | 12                                       |                               |                       |                   |           | 6<br>7a                |              | 5,0                       | -               |
| ~  |   |                                 |   |   |                                   |                    |  |                               |                       |                   |           | 7b                     |              |                           | <u>0.</u><br>0. |
|  |   |                                 |   |   |                                   | • 1, 110 011       |  |                               |                       | · · · ·           | Year      |                        | Cur          | rent Year                 | <u>.</u>        |
|  | 8   | Contributions                   | and grants (Pa                                      | rt VIII. line 1                                   | h)                                |                    |  |                               | ⊢                     | 22,4              |           | 67.                    |              | ,647,10                   | 3               |
| Revenue  |   |                                 |   | · · · · · · · · · · · · · · · · · · ·             | •                                 |                    |  |                               |                       | 22/1              | 24/0      | 0,.                    |              | ,01,,10                   | <u></u>         |
| Nel  |   |                                 |   |   |                                   |                    |  |                               |                       | 1.9               | 11,2      | 76.                    |              | 41,83                     | 6.              |
| ď  |   |                                 |   |   |                                   |                    | 11e)                                     |                               |                       |                   | 82,0      |                        |              | -719,21                   |                 |
|  | 12  | Total revenue                   | - add lines 8                                       | through 11 (                                      | must equal F                      | Part VIII, colu    | ımn (A), line 12                         | 2)                            |                       | 23,3              |           |                        |              | ,969,72                   |                 |
|  | 13  | Grants and sir                  | nilar amounts p                                     | paid (Part IX                                     | , column (A)                      | , lines 1-3) .     |  |                               |                       | 15,5              | 13,2      | 89.                    |              | ,253,61                   |                 |
|  | 14  |                                 |   |   |                                   |                    |  |                               |                       |                   |           |                        | Ο.           |                           |                 |
| 4  | 15  | Salaries, other                 | r compensatior                                      |   |                                   |                    |  |                               |                       |                   |           | 47.                    | 3            | ,142,81                   | 8.              |
| Expenses   | 16a   | Professional fu                 | undraising fees                                     | (Part IX, co                                      | lumn (A), line                    | e 11e)             |  |                               | 🗖                     |                   | 60,0      |                        |              |                           | 0.              |
| per  | Ь   | Total fundraisi                 | al fundraising fees (Part IX, column (A), line 11e) |   |                                   |                    |  |                               |                       |                   |           |                        |              |                           |                 |
| ŭ  |   |                                 |   |   |                                   |                    |  |                               |                       | 6                 | 64,5      | S O                    | 1            | /11 00                    | <u>総理</u><br>つ  |
|  |   | -                               | -   |   |                                   | ,                  | line 25)                                 |                               |                       | 19,0              |           |                        |              | <u>,411,22</u><br>,807,65 |                 |
|  |   | •                               |   | •   | - /                               |                    |  |                               |                       |                   | 45,7      |                        |              | ,837,92                   |                 |
| <b>× 8</b>   |   |                                 |   |   |                                   |                    |  |                               |                       |                   |           |                        |              | , 037, 92<br>d of Year    | /               |
| anc o  | 20  | Total assets (F                 | Part X, line 16)                                    |   |                                   |                    |  |                               | Бед                   | inning of<br>69,8 |           |                        |              | ,528,70                   | <u>a</u>        |
| Ass  | 21  | •                               | (Part X, line 2                                     |   |                                   |                    |  |                               |                       |                   | 93,4      |                        |              | ,659,85                   |                 |
| Net Assets or<br>Fund Balances                               | 22  |                                 | • • •   | ,   |                                   |                    |  |                               |                       | 64,7              |           |                        |              | ,868,85                   |                 |
| -  |   | Signatur                        |   |   |                                   |                    |  |                               | •••                   | 04,7              | 00,7      | 21.                    | 03           | ,000,00                   | <u>/.</u>       |
| 10010-0000   | and the second second   |                                 |   | mined this return                                 | including accor                   | nnenvina schedu    | les and statements                       | and to the                    | a bast of my          | knowledge         | a and he  | liaf it ie             | true correct | and                       |                 |
| comp   | olete. Dec  | claration of prepare            | er (other than officer                              | r) is based on all                                | information of w                  | hich preparer ha   | iles and statements,<br>s any knowledge. | , and to ore                  | s beat of my          | NIOWIEdgi         | s and 06  | 1                      |              | , 2110                    |                 |
|  |   |                                 |   | and the second second                             |                                   |                    |  |                               |                       |                   | 5         | 91                     | 18           |                           |                 |
| Sig  | IN  | Signatur                        | e of difficar                                       |   |                                   |                    |  |                               |                       | Date              |           |                        |              |                           |                 |
| Here Joshua Hale President & Chief Executive                 |   |                                 |   |   |                                   |                    |  |                               |                       | ive Offic         | er        |                        |              |                           |                 |
|  |   | Туре ог                         | print name and title                                |   |                                   | ·                  |  |                               |                       |                   |           |                        |              |                           |                 |
|  |   | Print/Type pr                   | eparer's name                                       |   | Preparer's sig                    | nature             |  | Date                          |                       | Che               | ck        | if                     | PTIN         |                           | _               |
| Pai  | id  |                                 | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~                 |   |                                   |                    | 7  |                               |                       | self-             | employe   | d                      |              |                           |                 |
| Pre  | эраге   |                                 | ► 5€  | ell-  | -rre                              | par                | ea                                       |                               |                       |                   |           |                        |              |                           |                 |
| Us   | e Onl   | y Firm's addres                 | ss •  |   |                                   | <b>_</b>           |  |                               | _                     | Firm              | 's EIN 🕨  | •                      |              |                           | _               |
|  |   |                                 |   |   |                                   |                    |  |                               |                       | Phor              | ne no.    |                        |              |                           |                 |
| Мау  | the IF  | RS discuss this                 | return with the                                     | e preparer sl                                     | hown above?                       | (see instruc       | tions)                                   |                               |                       |                   |           |                        | .   Ye       | s X N                     | 0               |
| BA/  | A For   | Paperwork R                     | eduction Act I                                      | Notice, see                                       | the separate                      | e instructio       | ıs.                                      | -                             | TEEA0101              | 11/16/16          |           |                        | Fo           | rm 990 (201               | 16)             |

| Form | m 990 (2016) Big Shoulders Fund  | 36-34  | 490557                           | Page 2            |
|------|--|--|----------------------------------|-------------------|
| Par  | art III Statement of Program Service Accomplishm   |  |                                  |                   |
|      | Check if Schedule O contains a response or note to any line  | e in this Part III   |                                  | X                 |
| 1    |  |  |                                  |                   |
|      | The Big Shoulders Fund is organized for  |  |                                  |                   |
|      | and distributing funds for the benefit<br>schools and students or other education  | -1   |                                  |                   |
|      | Schools and Students of Other Education  | al purposes.   |                                  |                   |
| 2    | Did the organization undertake any significant program services du   | uring the year which were not listed on the prior  |                                  |                   |
|      | Form 990 or 990-EZ?  |  | . Yes                            | X No              |
|      | If 'Yes,' describe these new services on Schedule O.   |  |                                  |                   |
| 3    | B Did the organization cease conducting, or make significant change  | s in how it conducts, any program services?  | . Yes                            | X No              |
|      | If 'Yes,' describe these changes on Schedule O.  |  |                                  |                   |
| 4    | Describe the organization's program service accomplishments for a<br>Section 501(c)(3) and 501(c)(4) organizations are required to report<br>and revenue, if any, for each program service reported. | each of its three largest program services, as measure<br>to the amount of grants and allocations to others, the t | ed by expenses<br>otal expenses, | S.                |
| 4 a  | a (Code:) (Expenses \$ 8,135,032. includi  | ng grants of \$ 7 , 690 , 190 . ) (Revenue   | \$                               | 0.)               |
|      | Student Scholarship Programs:  |  |                                  |                   |
|      | Administered_over_70_distinct_scholarsh<br>enrichment_and_other_support_activities   | <u>ip programs that include mentor:</u>  | ing,                             |                   |
|      | 4259_students_at_97_elementary_and_high  | schools to enable them to  |                                  |                   |
|      | attend Catholic schools.   |  |                                  |                   |
|      | See supporting schedule reconciling gra  | nt expenses and net expense.   |                                  |                   |
|      | See also 2016/17 report attached on Sch  | edule_O.   |                                  |                   |
|      |  |  |                                  |                   |
|      |  |  |                                  |                   |
|      |  |  |                                  |                   |
|      |  |  |                                  |                   |
| 4 h  | <b>b</b> (Code: ) (Expenses \$ 4,566,281, includio   | ng grants of \$ 4,097,292.) (Revenue   | Ś                                | 0.)               |
|      | School operations:   |  | ۲ <u> </u>                       | /                 |
|      | Distributed grants to 32 schools as par  | t of the Patrons Program,  |                                  |                   |
|      | an adopt-a-school program that pairs fi  |  |                                  |                   |
|      | business expertise to address needs at   |  |                                  |                   |
|      | Also assisted 28 schools with operating  |  |                                  |                   |
|      | to prevent school closures, and assiste  |  |                                  |                   |
|      | operational support via grants and/or s  |  | ols_in                           |                   |
|      | <pre>building_enrollment, improving business funding sources.</pre>  | operations, and creating new   |                                  |                   |
|      | See supporting schedule reconciling gra  | nt expenses and net expense  |                                  |                   |
|      | See also 2016/17 report attached on Sch  |  |                                  |                   |
|      |  |  |                                  |                   |
| 4 c  | <b>c</b> (Code: ) (Expenses \$ 2,491,556. includi  | ng grants of \$ 1,402,572.)(Revenue  | \$                               | 0.)               |
|      | Academic Enrichment and Leadership Deve  |  |                                  |                   |
|      | Big Shoulders administers over 15 ongoi  |  | ving                             |                   |
|      | over 800 teachers and administrators to  |  |                                  |                   |
|      | learning_through_leadership_and_profess  |  |                                  |                   |
|      | learning communities and access to high  |  | n math,                          |                   |
|      | science and literacy. Provide a variety programmatic support to ensure a safe,   |  |                                  |                   |
|      | for nearly 20,000 students through ongo  |  |                                  |                   |
|      |  |  |                                  |                   |
|      | See supporting schedule reconciling gra  | nt expenses and net expense.   |                                  |                   |
|      | See also 2016/17 report attached on Sch  |  |                                  |                   |
| 4 d  | d Other program services (Describe in Schedule O.)   |  |                                  |                   |
|      |  | \$ 1,063,560.)(Revenue \$  | 0.                               | )                 |
| 4 e  | e Total program service expenses ► 16,306,762.   |  |                                  |                   |
| BAA  | A TEEA0  | 102 11/16/16   | Form                             | <b>990</b> (2016) |

Form 990 (2016) Big Shoulders Fund

| Pa  | rt IV Checklist of Required Schedules   |      |     |    |
|-----|---|------|-----|----|
|     |   |      | Yes | No |
| 1   | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.  | 1    | Х   |    |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?   | 2    | Х   |    |
| 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    |     | Х  |
| 4   | 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    |     | Х  |
| 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    |     | Х  |
| 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    |     | Х  |
| 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    |     | Х  |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.  | 8    |     | X  |
| 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    | X   |    |
| 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   | х   |    |
| 11  | If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.   |      |     |    |
| i   | a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.  | 11 a | Х   |    |
| I   | b 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.  | 11 b | Х   |    |
|     | c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII   | 11 c |     | Х  |
|     | d 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  | 11 d |     | Х  |
| (   | e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X   | 11 e |     | Х  |
| 1   | 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 $X \dots \dots$  | 11 f | Х   |    |
| 12: | a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII  | 12a  | Х   |    |
| I   | b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional   | 12 b |     | Х  |
| 13  | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E   | 13   |     | Х  |
| 14  | a Did the organization maintain an office, employees, or agents outside of the United States?   | 14a  |     | Х  |
| Į   | b 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  | Х   |    |
| 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   |     | Х  |
| 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   |     | Х  |
| 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   |     | Х  |
| 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   | Х   |    |
| 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   | Х   |    |

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Form 990 (2016) Big Shoulders Fund

| Pa   | rt IV Checklist of Required Schedules (continued)   |           |        |       |
|------|---|-----------|--------|-------|
|      |   | _         | Yes    | No    |
| 20a  | Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H   | 20a       |        | Х     |
| b    | 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? <i>If 'Yes,' complete Schedule I, Parts I and II</i>  | 21        | х      |       |
| 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        | х      |       |
| 23   | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete   |           |        |       |
|      |   | 23        | X      |       |
| 24 8 | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of<br>the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and<br>complete Schedule K. If 'No, 'go to line 25a                      | 24a       |        | Х     |
| I    | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?   | 24b       |        |       |
| C    | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  | 24c       |        |       |
| (    | Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?   | 24d       |        |       |
| 25 a | a 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       |        | х     |
| ł    | 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  |           |        | 37    |
|      | Schedule L, Part I  | 25b       | ┟───┦  | X     |
| 26   | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes,' complete Schedule L, Part II</i>                          | 26        |        | х     |
| 27   | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III | 27        |        | Х     |
| 28   | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):   |           |        |       |
| á    | A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV   | 28a       |        | Х     |
| ł    | A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete</i>   | 28b       |        | Х     |
| C    | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV  | 28c       |        | x     |
| 29   | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M  | 29        | X      |       |
| 30   | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M  | 30        |        | x     |
| 31   | Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I  | 30        |        | X     |
| 32   |   | 32        |        | x     |
| 33   |   | 33        |        | x     |
| 34   | 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        |        | x     |
| 35 a | a Did the organization have a controlled entity within the meaning of section 512(b)(13)?   | 34<br>35a |        | X     |
|      | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled  |           |        |       |
|      | entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2  | 35b       |        |       |
| 36   | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2  | 36        |        | Х     |
| 37   | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI   | 37        |        | Х     |
| 38   | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O   | 38        | х      |       |
| BAA  |   | Form      | 990 (2 | 2016) |

Form **990** (2016)

| 6- |  |  |  |  |
|----|--|--|--|--|
|    |  |  |  |  |
|    |  |  |  |  |

Page 4

| Form     | 990 (2016) Big Shoulders Fund 36-349055  | 7    | Р     | age 5 |
|----------|--|------|-------|-------|
| Par      | t V Statements Regarding Other IRS Filings and Tax Compliance  |      |       |       |
|          | Check if Schedule O contains a response or note to any line in this Part V   |      |       |       |
|          |  |      | Yes   | No    |
|          | 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 1b   |      |       |       |
| C        | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?   | 1 c  | Х     |       |
| 2 a      | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-   |      |       |       |
|          | ments, filed for the calendar year ending with or within the year covered by this return <b>2 a</b> 43<br>If at least one is reported on line 2a, did the organization file all required federal employment tax returns?                   | 2 b  | Х     |       |
|          | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)   |      |       |       |
| 3 a      | Did the organization have unrelated business gross income of \$1,000 or more during the year?  | 3 a  |       | Х     |
| b        | If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.   | 3 b  |       |       |
|          |  |      |       |       |
|          | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4 a  |       | Х     |
| b        | If 'Yes,' enter the name of the foreign country: ►   |      |       |       |
|          | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).  |      |       |       |
| 5 a      | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | 5 a  |       | Х     |
| b        | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   | 5 b  |       | Х     |
| c        | If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?   | 5 c  |       |       |
| 6 a      | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization  |      |       | x     |
| b        | solicit any contributions that were not tax deductible as charitable contributions?  | 6 a  |       | Λ     |
|          | not tax deductible?  | 6 b  |       |       |
|          | Diganizations that may receive deductible contributions under section 170(c).  |      |       |       |
|          | services provided to the payor?  | 7 a  | Х     |       |
| b        | If 'Yes,' did the organization notify the donor of the value of the goods or services provided?  | 7 b  | Х     |       |
| C        | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   | 7 c  |       | Х     |
| d        | I If 'Yes,' indicate the number of Forms 8282 filed during the year  |      |       |       |
|          | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  | 7 e  |       | Х     |
|          | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   | 7 f  |       | Х     |
| c        | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899  |      |       |       |
| -        | as required?   | 7 g  |       |       |
| h        | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   | 7 h  |       |       |
| 8        | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring  |      |       |       |
|          | organization have excess business holdings at any time during the year?  | 8    |       |       |
| 9        | Sponsoring organizations maintaining donor advised funds.  |      |       |       |
| а        | Did the sponsoring organization make any taxable distributions under section 4966?   | 9 a  |       |       |
| b        | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  | 9 b  |       |       |
| 10       | Section 501(c)(7) organizations. Enter:  |      |       |       |
|          | Initiation fees and capital contributions included on Part VIII, line 12   |      |       |       |
| b        | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  |      |       |       |
| 11       | Section 501(c)(12) organizations. Enter:   |      |       |       |
| а        | Gross income from members or shareholders  |      |       |       |
| b        | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)   |      |       |       |
| 12 a     | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?   | 12 a |       |       |
| b        | If Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b   |      |       |       |
| 13       | Section 501(c)(29) qualified nonprofit health insurance issuers.   |      |       |       |
|          | Is the organization licensed to issue qualified health plans in more than one state?   | 13 a |       |       |
|          | Note. See the instructions for additional information the organization must report on Schedule O.  |      |       |       |
| b        | Enter the amount of reserves the organization is required to maintain by the states in   |      |       |       |
|          | which the organization is licensed to issue qualified health plans   |      |       |       |
|          | Enter the amount of reserves on hand   |      |       |       |
|          | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a  |       | X     |
| b<br>BAA | If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O  | 14b  | 990 ( | 2016) |

|      | officer, director, trustee, or key employee?   | 2       | Х     |      |
|------|--|---------|-------|------|
| 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       |       | х    |
| 4    | Did the organization make any significant changes to its governing documents   |         |       |      |
|      | since the prior Form 990 was filed?  | 4       |       | Х    |
| 5    | Did the organization become aware during the year of a significant diversion of the organization's assets?   | 5       |       | Х    |
| 6    | Did the organization have members or stockholders?   | 6       |       | Х    |
| 7 a  | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more  |         |       |      |
|      | members of the governing body?   | 7 a     |       | X    |
| k    | 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     |       | х    |
| 8    | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  |         |       |      |
| a    | I The governing body?  | 8 a     | Х     |      |
| t    | Each committee with authority to act on behalf of the governing body?  | 8 b     | Х     |      |
| 9    | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O   | 9       |       | Х    |
| Sec  | tion B. Policies (This Section B requests information about policies not required by the Internal Rever  | ue C    | ode.) | )    |
|      |  |         | Yes   | No   |
|      | Did the organization have local chapters, branches, or affiliates?   | 10 a    |       | Х    |
| k    | 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?   | 10 b    | 37    |      |
|      | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | 11 a    | Х     |      |
|      | Describe in Schedule O the process, if any, used by the organization to review this Form 990.  | 40 -    | 37    |      |
|      | Did the organization have a written conflict of interest policy? <i>If 'No,' go to line 13</i>   | 12 a    | Х     |      |
|      | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12 b    | Х     |      |
| C    | Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done   | 12 c    | Х     |      |
| 13   | Did the organization have a written whistleblower policy?  | 13      | Х     |      |
| 14   | Did the organization have a written document retention and destruction policy?   | 14      | Х     |      |
| 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?   |         |       |      |
|      | The organization's CEO, Executive Director, or top management official   | 15 a    | Х     |      |
| k    | Other officers or key employees of the organization  | 15 b    |       | Х    |
|      | If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).  |         |       |      |
| 16 a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  | 16 a    |       | X    |
| k    | If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its<br>participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the<br>organization's exempt status with respect to such arrangements? | 16 b    |       |      |
| Sec  | tion C. Disclosure   |         |       |      |
| 17   | List the states with which a copy of this Form 990 is required to be filed  Illinois   |         |       |      |
| 18   | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply.   | availab | le    |      |
|      | X         Own website         Another's website         X         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 policy, and financial statements available the public during the tax year.   | e to    |       |      |
| 20   | State the name, address, and telephone number of the person who possesses the organization's books and records:  |         |       |      |
|      | Linda Rossi 212 W Van Buren St, Suite 900 Chicago, IL 60607 (3   | 12) 7   | 751-8 | 8337 |

Section A. Governing Body and Management

of the governing body, or if the governing body delegated broad

| Check if Schedule O contains a response or note to any line in this Part VI |
|---|
|---|

**1** a Enter the number of voting members of the governing body at the end of the tax year . . . . . If there are material differences in voting rights among members

**b** Enter the number of voting members included in line 1a, above, who are independent

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other

authority to an executive committee or similar committee, explain in Schedule O.

Form 990 (2016) Big Shoulders Fund 36-3490557 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for

1 a

1 b

34

34

Х

Yes No

BAA

Form 990 (2016)

| Form 990 (2016) Big Shoulders Fund  | 36-3490557         | Page 7 |
|---|--------------------|--------|
| Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Independent Contractors          |                    |        |
| Check if Schedule O contains a response or note to any line in this Part VII                                    |                    | Х      |
| Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensate                                 | ed Employees       |        |
| 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending | with or within the |        |

organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

|                       |  |  |                                   |                       | (C)                      | )            |                                 |        |  |   |  |
|-----------------------|--|--|-----------------------------------|-----------------------|--------------------------|--------------|---------------------------------|--------|--|---|--|
| (A)<br>Name and Title |  |  | thar                              | n one Ì<br>s both     | box, i<br>an o<br>ector/ | unless       | ,                               | 'n     | (D)<br>Reportable<br>compensation from<br>the organization | (E)<br>Reportable<br>compensation from<br>related organizations | (F)<br>Estimated<br>amount of other<br>compensation      |
|                       |  | per<br>week<br>(list any<br>hours for<br>related<br>organiza-<br>tions<br>below<br>dotted<br>line) | Individual trustee<br>or director | Institutional trustee | Officer                  | Key employee | Highest compensated<br>employee | Former | (W-2/1099-MISC)  | (W-2/1099-MISC)   | from the<br>organization<br>and related<br>organizations |
| _(1)                  | Gerald Beeson                                | _1.00  |                                   |                       |                          |              |                                 |        |  |   |  |
|                       | Exec Committee                               |  | Х                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| _(2)                  | James Compton<br>Exec Committee              | _1.00  | x                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| _(3)                  | Frank Considine                              | _0.00  | x                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| _(4)_                 | <u>Mary_Brian_Costello</u><br>Exec Committee | <u>1.00</u>  | x                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| (5)                   | Lester Crown<br>Exec Committee               | _1.00  | x                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| _(6)                  | Kent_Dauten<br>Exec Committee                | _1.50  | x                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| _(7)_                 | Mary_Dempsey<br>Exec Committee               | <u>1.00</u>  | x                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| (8)                   | William Devers<br>Exec Committee             | _1.50  | x                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| (9)                   | Daniel Doherty<br>Exec Committee             | <u>1.40</u>  | x                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| (10)                  | David Dury<br>Exec Committee                 | <u>1.00</u>  | Х                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| (11)                  | Michael_W. Ferro<br>Exec Committee           | <u>1.00</u>  | X                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| <u>(12)</u>           | Dennis Fitzsimons                            | <u>1.00</u>  | x                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| (13)                  | James A. Gordon                              | _1.00  | Х                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| (14)                  | James Hoeg                                   | _1.00  |                                   |                       |                          |              |                                 |        |  |   |  |
|                       | Exec Committee                               |  | Х                                 |                       |                          |              |                                 |        | 0.   | 0.  | 0.   |
| BAA                   |  | TEEA0  | 107                               | 11/16/                | 16                       |              |                                 |        |  |   | Form 990 (2016)  |

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| Part VII Section A. Officers, Directors   | , Trustees,   | Key             | Emp                             | oloy                    | ees, a                               | an        | d Highest Con  | npensated Em  |                   | Page<br>S (continu                             |    |
|---|---|-----------------|---------------------------------|-------------------------|--------------------------------------|-----------|--|---|-------------------|--|----|
|   | (B)   |                 |                                 | (C)                     |                                      |           |  |   |                   |  |    |
| (A)<br>Name and title   | Average<br>hours<br>per<br>week                             | box             | not che<br>, unless<br>icer and | a direc                 | e than or<br>h is both<br>tor/truste | an<br>ee) | (D)<br>Reportable<br>compensation from<br>the organization | (E)<br>Reportable<br>compensation from<br>related organizations | amou              | (F)<br>stimated<br>unt of other<br>pensation   |    |
|   | (list any<br>hours<br>for<br>related<br>organiza<br>- tions | or director     | nstitutional trustee            | Key employee<br>Offiner | Highest compensated                  | Former    | (W-2/1099-MISC)  | (W-2/1099-MISC)   | fr<br>orga<br>and | om the<br>anization<br>d related<br>anizations |    |
|   | dotted<br>line)   | rustee          | trustee                         | lee                     | npensated                            |           |  |   |                   |  |    |
| (15) Peter H. Huizenga  | 1.00  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      | -         | 0.   | 0.  |                   |  | 0. |
| (16) Leigh-Anne Kazma   | 1.00  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      | -         | 0.   | 0.  |                   |  | 0  |
| (17) Christine E. Kelly   | 1.00_   |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      |           | 0.   | 0.  |                   |  | 0  |
| (18) Stephen King   | 1.20  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      | -         | 0.   | 0.  |                   |  | 0  |
| (19) Thomas E. Lanctot  | 1.10  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      |           | 0.   | 0.  |                   |  | 0  |
| (20) William T. Lynch   | 1.40  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      |           | 0.   | 0.  |                   |  | 0  |
| (21) Anthony M. Mandolini   | 1.40  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      |           | 0.   | 0.  |                   |  | 0  |
| (22) Michael E. Murphy  | 1.00  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | х               |                                 |                         |                                      |           | 0.   | 0.  |                   |  | 0  |
| (23) Alan F. Myers  | 1.00  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      |           | 0.   | 0.  |                   |  | 0  |
| (24) Thomas Reynolds III  | 1.00  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      |           | 0.   | 0.  |                   |  | 0  |
| (25) John Schreiber   | 1.00  |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| Exec Committee  |   | Х               |                                 |                         |                                      |           | 0.   | 0.  |                   |  | 0  |
| 1 b Sub-total   |   |                 |                                 |                         |                                      |           | 0.   | 0.  |                   |  | 0  |
| c Total from continuation sheets to Part VII, \$  | Section A   |                 |                                 |                         |                                      |           | 1,412,177.   | 0.  | . 1               | 69,31  | 12 |
| d Total (add lines 1b and 1c)   |   |                 |                                 |                         |                                      | ►         | 1,412,177.   | 0 .   |                   | .69,31   |    |
| 2 Total number of individuals (including but not I  |   |                 |                                 |                         |                                      | ive       |  |   |                   |  |    |
| from the organization > 7   |   |                 |                                 |                         |                                      |           |  |   |                   | Yes  | No |
| 3 Did the organization list any former officer, dir<br>on line 1a? If 'Yes,' complete Schedule J for su           |   |                 |                                 |                         |                                      |           |  |   | 3                 | Tes  | X  |
| 4 For any individual listed on line 1a, is the sum the organization and related organizations gre such individual | ater than \$150,  | ompe<br>,000?   | nsatic<br>If 'Ye                | on and<br>s,' co        | d other<br><i>mplete</i>             | coi<br>Sc | mpensation from<br>hedule J for                            |   | 4                 | x  |    |
| 5 Did any person listed on line 1a receive or acc<br>for services rendered to the organization? If 'Y             |   |                 |                                 |                         |                                      |           |  |   | 5                 |  | Х  |
| Section B. Independent Contractors  |   |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| 1 Complete this table for your five highest component of compensation from the organization. Report of            | ensated indepe  | enden<br>or the | t cont<br>calen                 | ractoi<br>dar ve        | rs that                              | rec       | eived more than \$7<br>with or within the                  | 100,000 of<br>organization's tax y                              | ear.              |  |    |
| (A)<br>Name and business  |   |                 |                                 | J -                     |                                      |           | (B)<br>Description c                                       | )   | (                 | <b>C)</b><br>ensation                          |    |
| Loyola University 1032 W. Sheridan Road Chicago IL 60660 prof development for schools 144,000.                    |   |                 |                                 |                         |                                      |           |  |   |                   |  |    |
| University of Chicago 1427 E. 60th Stre   |   |                 |                                 |                         | 6063                                 |           | prof developmen  |   |                   | 05,53  |    |
| Ziemke Consulting LLC 4709 N. Rockwell  | Chicag  |                 |                                 |                         | 6062                                 |           | prof developmen  |   |                   | 65,00  |    |
| Hilton Chicago 720 S. Michigan Aver   | 9   |                 |                                 |                         |                                      |           | fundraising event fa                                       |   |                   | 14,71  |    |
| University of Illinois, Chicago 1240 W. Harrison  |   |                 |                                 | IL                      |                                      |           | prof developmen  |   |                   | 42,62  |    |
| 2 Total number of independent contractors (inclu  |   |                 |                                 |                         |                                      |           |  |   |                   | -2,02  |    |

\$100,000 of compensation from the organization BAA

2 Total number of independent contractors (including but not limited to those listed above) who received more than

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# Form 990 (2016) Big Shoulders Fund

# Part VIII Statement of Revenue

|   | Check if Schedule O contains a response or note to any lin   | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512-514 |
|---|--|----------------------|--|---|--|
| ts  | <b>1 a</b> Federated campaigns <b>1 a</b> 33,864.  |                      |  |   |  |
| ran   | <b>b</b> Membership dues <b>1 b</b> 0.   |                      |  |   |  |
| °, G  | c Fundraising events 1c 912,483.   |                      |  |   |  |
| ifts<br>ar A  | d Related organizations 1 d 0.   |                      |  |   |  |
| nii<br>G  | e Government grants (contributions) 1 e 0.   |                      |  |   |  |
| Contributions, Gifts, Grants<br>and Other Similar Amounts |  |                      |  |   |  |
| her   | f All other contributions, gifts, grants, and similar amounts not included above . 1 f 11,700,756. |                      |  |   |  |
| ₫đ  | g Noncash contributions included in lines 1a-1f: \$ 560,141.                                       |                      |  |   |  |
| no pu   |  | 12,647,103.          |  |   |  |
|   | Business Code  | 12,047,105.          |  |   |  |
| /eni  | 2a   |                      |  |   |  |
| Bey   | b  |                      |  |   |  |
| ice   | с  |                      |  |   |  |
| en  | d  |                      |  |   |  |
| s<br>E  | e  |                      |  |   |  |
| grai  | f All other program service revenue  |                      |  |   | <u> </u>   |
| Program Service Revenue                                   | <b>g Total.</b> Add lines 2a-2f  |                      |  |   |  |
|   | 3 Investment income (including dividends, interest and   |                      |  |   |  |
|   | other similar amounts)   | 316,987.             | 0.   | 0.                                      | 316,987.   |
|   | 4 Income from investment of tax-exempt bond proceeds   |                      |  |   |  |
|   | 5 Royalties  |                      |  |   |  |
|   | (i) Real (ii) Personal   |                      |  |   |  |
|   | 6 a Gross rents  |                      |  |   |  |
|   | b Less: rental expenses  |                      |  |   |  |
|   | c Rental income or (loss)  |                      |  |   |  |
|   | d Net rental income or (loss)  |                      |  |   |  |
|   | 7 a Gross amount from sales of (i) Securities (ii) Other   |                      |  |   |  |
|   | assets other than inventory 17,956,403. 0.   |                      |  |   |  |
|   | <b>b</b> Less: cost or other basis   |                      |  |   |  |
|   | and sales expenses 18,133,099. 98,455.   |                      |  |   |  |
|   | <b>c</b> Gain or (loss)176,69698,455.  |                      |  |   |  |
|   | <b>d</b> Net gain or (loss)  | -275,151.            | -98,455.   | 0.                                      | -176,696.  |
| an  | 8 a Gross income from fundraising events   |                      |  |   |  |
| nu e  | (not including . \$ 912,483.   |                      |  |   |  |
| eve   | of contributions reported on line 1c).   |                      |  |   |  |
| Ĕ   | See Part IV, line 18 a 312,865.  |                      |  |   |  |
| Other Reven   | <b>b</b> Less: direct expenses <b>b</b> <u>373,040.</u>  |                      |  |   |  |
| δ   | c Net income or (loss) from fundraising events ►   | -60,175.             |  | 0.                                      | -60,175.   |
|   | 9 a Gross income from gaming activities.   |                      |  |   |  |
|   | See Part IV, line 19   |                      |  |   |  |
|   | <b>b</b> Less: direct expenses <b>b</b> 8,060.   |                      |  |   |  |
|   | c Net income or (loss) from gaming activities ►  | 47,220.              | 0.   | 0.                                      | 47,220.  |
|   | <b>10a</b> Gross sales of inventory, less returns<br>and allowances                                |                      |  |   |  |
|   | and allowances a<br>b Less: cost of goods sold b   |                      |  |   |  |
|   | c Net income or (loss) from sales of inventory ►   |                      |  |   |  |
|   | Miscellaneous Revenue Business Code  |                      |  |   |  |
|   | 11a Agency collections - see Sch 0 900099  | -710,656.            | 0.   | 0.                                      | -710,656.  |
|   | b Other Income 900099  | 4,400.               | 0.   | 0.                                      | 4,400.   |
|   |  | Ŧ,400.               | υ.   | υ.                                      | ч,чоо.   |
|   | d All other revenue  |                      |  |   |  |
|   | e Total. Add lines 11a-11d   | -706,256.            |  |   |  |
|   |  | 11,969,728.          | -98,455.   | 0.                                      | -578,920.  |
| BAA   |  | 11/16/16             | JU, IJJ.   | 0.                                      | Form <b>990</b> (2016)   |
|   |  |                      |  |   | . /  |

36-3490557

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| Part IX Statement of Functional Expense  |                              |   |   |                                       |
|--|------------------------------|---|---|---------------------------------------|
| Section 501(c)(3) and 501(c)(4) organizations must con   |                              |   |   |                                       |
| Check if Schedule O contains a res   |                              |   |   |                                       |
| Do not include amounts reported on lines<br>6b, 7b, 8b, 9b, and 10b of Part VIII.  | <b>(A)</b><br>Total expenses | <b>(B)</b><br>Program service<br>expenses | (C)<br>Management and<br>general expenses | <b>(D)</b><br>Fundraising<br>expenses |
| 1 Grants and other assistance to domestic<br>organizations and domestic governments.<br>See Part IV, line 21   | 6,606,661.                   | 6,606,661.                                |   |                                       |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22  | 7,646,953.                   | 7,646,953.                                |   |                                       |
| 3 Grants and other assistance to foreign<br>organizations, foreign governments, and for-<br>eign individuals. See Part IV, lines 15 and 16.  | 0.                           | 0.  |   |                                       |
| 4 Benefits paid to or for members.   | 0.                           | 0.  |   |                                       |
| 5 Compensation of current officers, directors, trustees, and key employees   | 1,316,669.                   | 702,411.                                  | 445,669.                                  | 168,589.                              |
| 6 Compensation not included above, to<br>disqualified persons (as defined under<br>section 4958(f)(1)) and persons described   | 1,310,009.                   | /02,411.                                  | 445,009.                                  | 100,309.                              |
| in section 4958(c)(3)(B)   | 0.                           | 0.  | 0.  | 0.                                    |
| 7 Other salaries and wages   | 1,478,016.                   | 616,957.                                  | 544,707.                                  | 316,352.                              |
| 8 Pension plan accruals and contributions<br>(include section 401(k) and 403(b)<br>employer contributions)   | 40,591.                      | 21,384.                                   | 12,168.                                   | 7,039.                                |
| <b>9</b> Other employee benefits   | 145,071.                     | 58,451.                                   | 50,126.                                   | 36,494.                               |
| 10 Payroll taxes   | 162,471.                     | 77,307.                                   | 56,029.                                   | 29,135.                               |
| <b>11</b> Fees for services (non-employees):   |                              |   |   |                                       |
| <b>a</b> Management  | 0.                           | 0.  | 0.  | 0.                                    |
| <b>b</b> Legal   | 23,925.                      | 0.  | 23,925.                                   | 0.                                    |
| <b>c</b> Accounting  | 42,800.                      | 0.  | 42,800.                                   | 0.                                    |
| d Lobbying   | 0.                           | 0.  | 0.  | 0.                                    |
| e Professional fundraising services. See Part IV, line 17  | 0.                           | -   |   | 0.                                    |
| f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column   | 126,291.                     | 0.  | 126,291.                                  | 0.                                    |
| (A) amount, list line 11g expenses on Schedule O.)   | 753,155.                     | 663,464.                                  | 60,052.                                   | 29,639.                               |
| <b>12</b> Advertising and promotion  | 25,597.                      | 12,455.                                   | 0.  | 13,142.                               |
| <b>13</b> Office expenses  | 268,177.                     | 82,374.                                   | 39,812.                                   | 145,991.                              |
| 14 Information technology  | 138,373.                     | 72,368.                                   | 60,736.                                   | 5,269.                                |
| <b>15</b> Royalties  | 0.                           | 0.  | 0.  | 0.                                    |
| 16         Occupancy   | 121,402.                     | 56,256.                                   | 43,813.                                   | 21,333.                               |
| <ul> <li>17 Travel</li></ul>   | 241,104.                     | 208,717.                                  | 14,190.                                   | 18,197.                               |
| public officials   | 0.                           | 0.  | 0.  | 0.                                    |
| <b>19</b> Conferences, conventions, and meetings   | 10,284.                      | 3,917.                                    | 6,367.                                    | 0.                                    |
| 20 Interest  | 0.                           | 0.  | 0.  | 0.                                    |
| 21 Payments to affiliates  | 0.                           | 0.  | 0.  | 0.                                    |
| 22 Depreciation, depletion, and amortization   | 54,668.                      | 25,577.                                   | 16,764.                                   | 12,327.                               |
| <ul> <li>23 Insurance</li> <li>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 expenses on Schedule O.)</li> </ul> | 12,387.                      | 3,789.                                    | 7,178.                                    | 1,420.                                |
| a <u>Credit Card Fees</u>  | 27,257.                      | 0.  | 0.  | 27,257.                               |
| b Food & Meals   | 144,081.                     | 65,275.                                   | 34,669.                                   | 44,137.                               |
| <sup>c</sup> <u>Dues</u>   | 39,901.                      | 625.                                      | 39,276.                                   | . 0.                                  |
| d Agency Exp - see Sch 0   | -618,179.                    | -618,179.                                 | 0.  | 0.                                    |
| 25 Total functional expenses. Add lines 1 through 24e.   | 18,807,655.                  | 16,306,762.                               | 1,624,572.                                | 876,321.                              |
| 26 Joint costs. Complete this line only if<br>the organization reported in column (B)<br>joint costs from a combined educational<br>campaign and fundraising solicitation.<br>Check here ► if following<br>SOP 98-2 (ASC 958-720)              |                              |   |   |                                       |
| BAA  | TEEA0110 11/1                |   |   | Form <b>990</b> (2016)                |

# Form 990 (2016) Big Shoulders Fund Part X Balance Sheet

| Part X   | Balance Sheet   |                                 |             |                             |
|--|---|---------------------------------|-------------|-----------------------------|
|  | Check if Schedule O contains a response or note to any line in this Part X  |                                 |             |                             |
|  |   | <b>(A)</b><br>Beginning of year |             | <b>(B)</b><br>End of year   |
| 1  | Cash – non-interest-bearing   | 1,067,377.                      | 1           | 57,109                      |
| 2  | Savings and temporary cash investments  | 8,199,578.                      | 2           | 4,266,434                   |
| 3  | Pledges and grants receivable, net  | 17,120,797.                     | 3           | 15,548,904                  |
| 4  | Accounts receivable, net  | 0.                              | 4           | 0                           |
| 5  | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L   |                                 |             |                             |
| 6  | Loans and other receivables from other disgualified persons (as defined under   | 0.                              | 5           | 0                           |
|  | section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | 0.                              | 6           | 0                           |
| ള് 7   | Notes and loans receivable, net   | 0.                              | 7           | 0                           |
| 8 7<br>8 8<br>9 9  | Inventories for sale or use   | 0.                              | 8           | 0                           |
| ₹ 9  | Prepaid expenses and deferred charges   | 158,114.                        | 9           | 218,036                     |
| 10 a   | Land, buildings, and equipment: cost or other basis.<br>Complete Part VI of Schedule D  |                                 |             |                             |
|  | Complete Part VI of Schedule D         10a         333,463.           Less: accumulated depreciation         10b         228,589.   | 205 700                         | 10 c        | 104 074                     |
| 11   | Investments – publicly traded securities  | 205,799.                        | 11          | 104,874                     |
|  | Investments – other securities. See Part IV, line 11  | 16,105,465.                     | 1           | 19,759,175                  |
| 12   | Investments – program-related. See Part IV, line 11   | 26,982,150.                     | 12          | 27,482,507                  |
| 13   |   | 0.                              | 13          | 0                           |
| 14   | Other assets. See Part IV, line 11  | 0.                              | 14          | 0                           |
| 15   |   | 14,909.                         | 15          | 91,670                      |
| 16   | Total assets. Add lines 1 through 15 (must equal line 34)   | 69,854,189.                     | 16          | 67,528,709                  |
| 17<br>18   | Grants payable.   | 291,516.                        | 17<br>18    | 350,566                     |
| 10   |   | 4,621,821.<br>180,125.          | 10          | <u>2,846,260</u><br>237,975 |
| 20   | Tax-exempt bond liabilities   | 180,125.                        | 20          | 237,975                     |
| -  | Escrow or custodial account liability. Complete Part IV of Schedule D   | 0.                              | 20          | 225,051                     |
| 21 22 22   | Loans and other payables to current and former officers, directors, trustees,<br>key employees, highest compensated employees, and disqualified persons.<br>Complete Part II of Schedule L.   | 0.                              | 22          | 0                           |
| 23   | Secured mortgages and notes payable to unrelated third parties  | 0.                              | 23          | 0                           |
| 24   | Unsecured notes and loans payable to unrelated third parties  | 0.                              | 24          | 0                           |
| 25   | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D   |                                 | 25          | 0                           |
| 26   | Total liabilities. Add lines 17 through 25  | 5,093,462.                      | 26          | 3,659,852                   |
| se   | Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.   |                                 |             |                             |
| u 27   | Unrestricted net assets   | 24,847,378.                     | 27          | 24,228,605                  |
| 28   | Temporarily restricted net assets   | 32,893,033.                     | 28          | 32,286,982                  |
| <b>D</b> 29  | Permanently restricted net assets   | 7,020,316.                      | 29          | 7,353,270                   |
| Net Assets of Fund balances<br>22 25 26 20 20 20 20 20 20 20 20 20 20 20 20 20 | Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.   | · · · · · ·                     |             |                             |
| ວ<br>ທ 30  | Capital stock or trust principal, or current funds  |                                 | 30          |                             |
| 31   | Paid-in or capital surplus, or land, building, or equipment fund  |                                 | 31          |                             |
| x 32   | Retained earnings, endowment, accumulated income, or other funds  |                                 | 32          |                             |
| <b>U</b> 33  | Total net assets or fund balances.  | 64,760,727.                     | 33          | 63,868,857                  |
| ž 33   | Total liabilities and net assets/fund balances  | 69,854,189.                     | 34          | 67,528,709                  |
| 3AA  |   | 09,004,109.                     | <b>U</b> -1 | Form <b>990</b> (2016       |

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Form 990 (2016)

| Forn | n 990 (2016) Big Shoulders Fund 36-   | 349055 | 57      | Page                        | 12  |
|------|---|--------|---------|-----------------------------|-----|
| Pa   | rt XI Reconciliation of Net Assets  |        |         |                             | _   |
|      | Check if Schedule O contains a response or note to any line in this Part XI   |        |         |                             | Х   |
| 1    | Total revenue (must equal Part VIII, column (A), line 12)   | 1      | 11,90   | 59,72                       | 8.  |
| 2    | Total expenses (must equal Part IX, column (A), line 25)  | 2      | 18,80   | )7,65                       | 5.  |
| 3    | Revenue less expenses. Subtract line 2 from line 1  | 3      | -6,83   | 37,92                       | 7.  |
| 4    | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))   | 4      | 64,70   | 50,72                       | 7.  |
| 5    | Net unrealized gains (losses) on investments  | 5      | 6,01    | L9,86                       | 6.  |
| 6    | Donated services and use of facilities  | 6      |         | 6,81                        | 8.  |
| 7    | Investment expenses   | 7      |         | 1                           | 0.  |
| 8    | Prior period adjustments  | 8      |         |                             |     |
| 9    | Other changes in net assets or fund balances (explain in Schedule O)  | 9      | - 8     | 30,62                       | 7.  |
| 10   | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,  |        |         |                             | _   |
| De   | column (B))   | 10     | 63,86   | 58,85                       | 7.  |
| Pa   | rt XII Financial Statements and Reporting   |        |         |                             |     |
|      | Check if Schedule O contains a response or note to any line in this Part XII  |        | <u></u> | 1                           |     |
|      |   |        |         | Yes N                       | NO  |
| 1    | Accounting method used to prepare the Form 990: Cash X Accrual Other  |        | _       |                             |     |
|      | If the organization changed its method of accounting from a prior year or checked 'Other,' explain<br>in Schedule O.  |        |         |                             |     |
| 2 8  | a Were the organization's financial statements compiled or reviewed by an independent accountant?   |        | . 2.a   |                             | Х   |
|      | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a  |        |         |                             |     |
|      | separate basis, consolidated basis, or both:  |        |         |                             |     |
|      | Separate basis Consolidated basis Both consolidated and separate basis  |        |         |                             |     |
| I    | b Were the organization's financial statements audited by an independent accountant?  |        | . 2 b   | Х                           |     |
|      | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate  |        |         |                             |     |
|      | basis, consolidated basis, or both:   |        |         |                             |     |
|      | X         Separate basis         Both consolidated and separate basis   |        |         |                             |     |
| (    | c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aud review, or compilation of its financial statements and selection of an independent accountant? |        | . 2 c   | х                           |     |
|      | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.   |        |         |                             |     |
| 3 (  | a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single<br>Audit Act and OMB Circular A-133?   |        | . 3a    |                             | Х   |
| I    | b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required at  | udit   |         |                             |     |
|      | or audits, explain why in Schedule O and describe any steps taken to undergo such audits  |        | . 3 b   |                             |     |
| BAA  | ۱.  |        | Form    | <b>990</b> (20 <sup>-</sup> | 16) |

### Form 990

## **Continuation Sheet for Form 990**

Department of the Treasury Internal Revenue Service

Name of the Organization

### Big Shoulders Fund

Employler Identification number

36-3490557

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

| Highest Compensated Er                | · · ·  | es          |   |    |                |  |        |  |   |  |
|---------------------------------------|--|-------------|---|----|----------------|--|--------|--|---|--|
| (A)                                   | (B)  | Deed        |   | (C |                |  |        | (D)  | (E)   | (F)  |
| Name and Title                        | Average<br>hours per<br>week<br>(list any<br>hours for<br>related<br>organiza-<br>tions<br>below<br>dotted line) | or director |   |    | ≣ Key employee | apply<br>Highest compensated<br>employee | Former | Reportable<br>compensation from<br>the organization<br>(W-2/1099-MISC) | Reportable<br>compensation from<br>related organizations<br>(W-2/1099-MISC) | Estimated<br>amount of other<br>compensation<br>from the<br>organization<br>and related<br>organizations |
| 26_Timothy_Sullivan                   | 1.00_  |             |   |    |                |  |        |  |   |  |
| Exec Committee                        |  | Х           |   |    |                |  |        | 0.   | 0.  | 0.   |
| 27_Giancarlo_Turano                   | 1.50   | -           |   |    |                |  |        |  |   |  |
| Exec Committee                        |  | X           |   |    |                |  |        | 0.   | 0.  | 0.   |
| _28_Christopher_Valenti               | 1.00_  |             |   |    |                |  |        |  |   |  |
| Exec Committee                        | 1 00   | X           |   |    |                |  |        | 0.   | 0.  | 0.   |
| 29 Arthur R. Velasquez                | 1.00_  | -           |   |    |                |  |        |  |   |  |
| Exec Committee                        | 0- 00  | X           |   |    |                |  |        | 0.   | 0.  | 0.   |
| _30_Kenneth_J. Velo                   | 25.00  |             |   |    |                |  |        | 4 405  | 0   | 0  |
| <u>Co-Chairman</u>                    | 1 - 00   | X           |   | Х  |                |  |        | 4,425.   | 0.  | 0.   |
|                                       | 15.00  |             |   |    |                |  |        | 0  | 0   | 0  |
| Co-Chairman                           | 1 0 0  | X           |   | Х  |                |  |        | 0.   | 0.  | 0.   |
| 32 John Croghan                       | 1.00_  |             |   | 37 |                |  |        | 0  | 0   | 0  |
| Vice Chairman<br>33 Andrew J. McKenna | 1.00   | X           |   | Х  |                |  |        | 0.   | 0.  | 0.   |
| Vice Chairman                         | 1.00   |             |   | v  |                |  |        | 0.   | 0.  | 0  |
| 34 James J. O'Connor                  | 30.00  | X           |   | Х  |                |  |        | 0.   | 0.  | 0.   |
| Co-Chairman                           | 30.00  | x           |   | Х  |                |  |        | 0.   | 0.  | 0  |
|                                       | 67.00  | ~           |   | Λ  |                |  |        | 0.   | 0.  | 0.   |
| President & CEO                       | 0/.00  | 1           |   | х  |                |  |        | 438,259.   | 0.  | 32,863.  |
| 36 Linda Rossi                        | 45.00  |             |   | Λ  |                |  |        | 450,257.   | 0.  | 52,005.  |
| CFO                                   | 15.00  |             |   | х  |                |  |        | 177,076.   | 0.  | 21,088.  |
| 37 Rebecca Lindsay-Ryan               | 57.00  |             |   | 21 |                |  |        | 111,010.   | 0.  | 21,000.  |
| Sr Director, Academic Prgm            |  |             |   |    | х              |  |        | 166,561.   | 0.  | 35,243.  |
|                                       | 42.00  |             |   |    |                |  |        | 100,001.   | 0.  | 3372131  |
| Sr Director, Patron Program           |  |             |   |    | х              |  |        | 165,239.   | 0.  | 36,682.  |
| 39 Thomas Zbierski                    | 65.00  |             |   |    |                |  |        |  |   |  |
| Sr Director, School Prgm & Relations  |  |             |   |    | Х              |  |        | 169,967.   | 0.  | 14,861.  |
| 40 Amelia Drozda                      | 50.00  |             |   |    |                |  |        |  |   |  |
| Director, Corp & Fdn Relations        |  | 1           |   |    |                | Х  |        | 115,342.   | 0.  | 12,945.  |
| 41_Nicole_Wilson                      | <u>55.00</u>   |             |   |    |                |  |        |  |   |  |
| Sr Director, Strategy & Op            |  |             |   |    |                | Х  |        | 175,308.   | 0.  | 15,630.  |
|                                       |  |             |   |    |                |  |        |  |   |  |
|                                       |  |             |   |    |                |  |        |  |   |  |
|                                       |  |             |   |    |                |  |        |  |   |  |
|                                       |  |             |   |    |                |  |        |  |   |  |
|                                       |  |             |   | ļ  |                | ļ  |        |  |   |  |
|                                       |  | -           |   |    |                | <u> </u>                                 |        |  |   |  |
|                                       |  | I           | I | 1  | 1              |  | I      |  |   | Form 990 Cont 2016   |

2016

| SCHEDULE A           |
|----------------------|
| (Form 990 or 990-EZ) |

# **Public Charity Status and Public Support**

 $\begin{array}{l} \mbox{Complete if the organization is a section 501(c)(3) organization or a section} \\ 4947(a)(1) \mbox{ nonexempt charitable trust.} \end{array}$ 

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is

| OMB No. 1545- | 0047 |
|---------------|------|
| 201           | 6    |

| Open | to | Public |
|------|----|--------|
|      |    | ction  |

| Departm<br>Internal  | ent of the Treasury<br>Revenue Service  | ► Inf   |  | dule A (Form 990 or 99<br>at <i>www.irs.gov/form99</i>   |                                  | nd its in:                                 | structions is   | Inspection   |  |  |  |  |
|--|---|---|--|--|----------------------------------|--|---|--|--|--|--|--|
| Name o   | f the organization                      |   |  |  |                                  |  | Employer identifica   | ation number                                       |  |  |  |  |
| Big  | Shoulders                               | Fund  |  |  |                                  |  | 36-349055   | 7  |  |  |  |  |
| Part   | I Reason fo                             | or Public Cha   | arity Status (All or   | ganizations must co  | omplete                          | e this p                                   | art.) See instructior   | IS.  |  |  |  |  |
| The or   | ganization is not a                     | a private foundat   | ion because it is: (For  | lines 1 through 12, checl  | k only on                        | e box.)                                    |   |  |  |  |  |  |
| 1  | A church, con                           | vention of churc  | hes, or association of c   | churches described in <b>se</b>  | ction 17                         | 0(b)(1)(                                   | A)(i).  |  |  |  |  |  |
| 2  | A school desc                           | cribed in <b>section</b>  | 170(b)(1)(A)(ii). (Attac   | ch Schedule E (Form 990  | 0 or 990-                        | EZ).)                                      |   |  |  |  |  |  |
| 3  | A hospital or a                         | a cooperative ho  | spital service organiza  | tion described in <b>sectior</b>   | 170(b)(                          | 1)(A)(iii                                  | ).  |  |  |  |  |  |
| 4  | A medical res                           | earch organizati  | arch organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii)</b> . Enter the hospital's                 |  |                                  |  |   |  |  |  |  |  |
|  | name, city, ar                          | nd state:   |  |  |                                  |  |   |  |  |  |  |  |
| 5  |   |   | pperated for the benefit of a college or university owned or operated by a governmental unit described in <b>)(A)(iv).</b> (Complete Part II.) |  |                                  |  |   |  |  |  |  |  |
| 6  | A federal, stat                         | al, state, or local government or governmental unit described in section 170(b)(1)(A)(v).   |  |  |                                  |  |   |  |  |  |  |  |
| 7  |   | An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) |  |  |                                  |  |   |  |  |  |  |  |
| 8  | A community                             | trust described in  | n section 170(b)(1)(A)   | (vi). (Complete Part II.)  |                                  |  |   |  |  |  |  |  |
| 9  | An agricultura                          | An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college   |  |  |                                  |  |   |  |  |  |  |  |
|  | -                                       | or a non-land-gra   | nt college of agricultur   | e (see instructions). Ente   |                                  |  | _   | -  |  |  |  |  |
| 10   | from activities<br>investment in        | s related to its ex<br>come and unrela  | empt functions—subject<br>ted business taxable in  | t to certain exceptions, a<br>ncome (less section 511  | and (2) n                        | o more t                                   | han 33-1/3% of its suppo  | ort from gross                                     |  |  |  |  |
| 11   | An organizatio                          | on organized and  | d operated exclusively   | to test for public safety.   | See <b>sect</b>                  | ion 509                                    | (a)(4).   |  |  |  |  |  |
| 12<br>a  | or more public<br>lines 12a thro        | cly supported org<br>ugh 12d that des<br>porting organiza   | panizations described i<br>scribes the type of supp<br>tion operated, supervis   | n <b>section 509(a)(1)</b> or <b>s</b> o<br>porting organization and<br>ed, or controlled by its s | ection 5<br>complete<br>upported | <b>09(a)(2)</b><br>e lines 1:<br>l organiz | . See <b>section 509(a)(3).</b><br>2e, 12f, and 12g.<br>ation(s), typically by givi | Check the box in<br>ng the supported               |  |  |  |  |
| h  | complete Pa                             | organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.            |  |  |                                  |  |   |  |  |  |  |  |
| IJ.  | management                              | of the supporting   | g organization vested in   |  |                                  |  |   |  |  |  |  |  |
| c  | organization(s                          | s) (see instruction   | ns). You must comple   | te Part IV, Sections A,  | D, and E                         |  |   |  |  |  |  |  |
| a  | functionally in                         | tegrated. The or  | ganization generally m   | ust satisfy a distribution   | connecti<br>requirem             | on with<br>ent and                         | its supported organizatio<br>an attentiveness require                               | on(s) that is not<br>ement (see                    |  |  |  |  |
| е  | integrated, or                          | Type III non-fun  | ctionally integrated sup   | porting organization.  |                                  |  |   | ctionally  |  |  |  |  |
|  |   |   | 0  |  |                                  |  |   |  |  |  |  |  |
|  |   | -   |  | - · · ·  | 1                                |  |   |  |  |  |  |  |
| (  | <ol> <li>Name of supported c</li> </ol> | organization  | (II) EIN   | (III) Type of organization<br>(described on lines 1-10<br>above (see instructions))                | organizati<br>in your go         | on listed                                  | (V) Amount of monetary support (see instructions)                                   | (VI) Amount of other<br>support (see instructions) |  |  |  |  |
|  |   |   |  |  | Yes                              | No   |   |  |  |  |  |  |
| (A)  |   |   |  |  |                                  |  |   |  |  |  |  |  |
| or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:         10       An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33-1/3% (0) its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)         11       An organization organized and operated exclusively to test for public safety. See section 509(a)(4).         12       An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization adescribes the type of supporting organization and complete lines 12, 12, and 12g.         a       Type I. A supporting organization operated, supervised, or controlled by its support of organization(s), typically by giving the supported organization (s). Type unst complete Part IV, Sections A and B.         b       Type II. A supporting organization supervised or controlled in connection with its supported organization(s). You must complete Part IV, Sections A and C.         c       Type II A supporting organization operated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A and C.         c       Type III functionally integrated. A supporting organization operated in connection with its supported organizatio |   |   |  |  |                                  |  |   |  |  |  |  |  |
|  |   |   |  |  |                                  |  |   |  |  |  |  |  |
| (0)  |   |   |  |  |                                  |  |   |  |  |  |  |  |
| (D)  |   |   |  |  |                                  |  |   |  |  |  |  |  |
| (E)  |   |   |  |  |                                  |  |   |  |  |  |  |  |
| Total  |   |   |  |  |                                  |  |   |  |  |  |  |  |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I 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.)

|     | tion A. I ublic Support   |  |   |                        |                     |                      |                        |
|-----|---|--|---|------------------------|---------------------|----------------------|------------------------|
|     |   | <b>(a)</b> 2012                              | <b>(b)</b> 2013                         | <b>(c)</b> 2014        | <b>(d)</b> 2015     | <b>(e)</b> 2016      | (f) Total              |
| 1   | Gifts, grants, contributions, and<br>membership fees received. (Do not<br>include any 'unusual grants.')  | 21,255,590.                                  | 21,580,435.                             | 17,423,397.            | 22,422,667.         | 12.647.103.          | 95,329,192.            |
| 2   |   | 0.   | 0.                                      | 0.                     |                     | 0.                   | 0.                     |
| 3   | The value of services or<br>facilities furnished by a<br>governmental unit to the<br>organization without charge  | 0.   | 0.                                      | 0.                     | 0.                  | 0.                   | 0.                     |
| 4   | Total. Add lines 1 through 3  | 21,255,590.                                  | 21,580,435.                             | 17,423,397.            | 22,422,667.         | 12,647,103.          | 95,329,192.            |
| 5   | The portion of total<br>contributions by each person<br>(other than a governmental<br>unit or publicly supported<br>organization) included on line 1<br>that exceeds 2% of the amount<br>shown on line 11, column (f)   |  |   |                        |                     |                      | 16,105,999.            |
| 6   | Public support. Subtract line 5 from line 4   |  |   |                        |                     |                      | 79,223,193.            |
| Sec | tion B. Total Support   |  |   |                        |                     |                      |                        |
|     |   | <b>(a)</b> 2012                              | <b>(b)</b> 2013                         | <b>(c)</b> 2014        | <b>(d)</b> 2015     | <b>(e)</b> 2016      | <b>(f)</b> Total       |
| 7   | Amounts from line 4   | 21,255,590.                                  | 21,580,435.                             | 17,423,397.            | 22,422,667.         | 12,647,103.          | 95,329,192.            |
| 8   | Gross income from interest,<br>dividends, payments received<br>on securities loans, rents,<br>royalties and income from<br>similar sources  | 458,432.                                     | 364,151.                                | 401,061.               | 267,220.            | 316,987.             | 1,807,851.             |
| 9   | Net income from unrelated<br>business activities, whether or<br>not the business is regularly<br>carried on   | 0.   | 0.                                      | 0.                     | 0.                  | 0.                   | 0.                     |
| 10  | Other income. Do not include<br>gain or loss from the sale of<br>capital assets (Explain in<br>Part VI.)  | 507,655.                                     | 671,786.                                | 447,821.               | 659,861.            | 372,545.             | 2,659,668.             |
| 11  | Total support. Add lines 7 through 10   |  |   |                        |                     |                      | 99,796,711.            |
| 12  | Gross receipts from related activiti  | ies, etc. (see instru                        | ictions)                                |                        |                     | 12                   | 0.                     |
| 13  | First five years. If the Form 990 is organization, check this box and s   | s for the organizati<br>t <b>op here</b>     | on's first, second, t                   | hird, fourth, or fifth | i tax year as a sec | tion 501(c)(3)       |                        |
| Sec | tion C. Computation of Pu   | blic Support F                               | Percentage                              |                        |                     |                      | <b>E</b>               |
| 14  | Public support percentage for 201   | 6 (line 6, column (f                         | ) divided by line 11                    | , column (f))          |                     | ••••• 14             | 79.38%                 |
| 15  |   |  |   |                        |                     |                      | 80.26 %                |
| 16a | <b>33-1/3% support test–2016.</b> If the and <b>stop here.</b> The organization of  | ne organization did<br>qualifies as a public | not check the box<br>cly supported orga | on line 13, and lin    | e 14 is 33-1/3% or  | more, check this b   | oox<br>· · · · · · ► X |
| b   | Line and the set of t |  |   |                        |                     |                      |                        |
| 17a | or more, and if the organization me   | eets the 'facts-and                          | -circumstances' tes                     | st, check this box a   | and stop here. Exp  | olain in Part VI how | · _                    |
|     | initial in j         i         (i) 2013         (i) 2014         (i) 2015         (i) 2013         (i) 2014         (i) 2015         (i) 2014         (i) 2015         (i) 2014         (i) 2015         (i) 2013         (i) 2014         (i) 2015         (i) 2016         (i) 7014           Intermed wy functional into the amount atom line 4  |  |   |                        |                     |                      |                        |
| 18  | Private foundation. If the organiz  | ation did not check                          | k a box on line 13,                     | 16a, 16b, 17a, or 1    | 17b, check this boy | and see instruction  | ons ►                  |

Schedule A (Form 990 or 990-EZ) 2016

| Section | Α. | Public | Support |
|---------|----|--------|---------|
|         |    |        |         |

BAA

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)
Section A. Public Support

| Jec        | tion A. Public Support   |  |                   |                     |                     |                 |        |           |
|------------|--|--|-------------------|---------------------|---------------------|-----------------|--------|-----------|
| Calen<br>1 | dar year (or fiscal year beginning in) ►<br>Gifts, grants, contributions,<br>and membership fees<br>received (Do not include)  | <b>(a)</b> 2012  | <b>(b)</b> 2013   | <b>(c)</b> 2014     | (d) 2015            | <b>(e)</b> 2016 |        | (f) Total |
|            | any 'unusual grants.')   |  |                   |                     |                     |                 |        |           |
| 2          | Gross receipts from admissions,<br>merchandise sold or services<br>performed, or facilities<br>furnished in any activity that is   |  |                   |                     |                     |                 |        |           |
|            | related to the organization's tax-exempt purpose   |  |                   |                     |                     |                 |        |           |
| 3          | Gross receipts from activities<br>that are not an unrelated trade<br>or business under section 513 .   |  |                   |                     |                     |                 |        |           |
| 4          | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  |  |                   |                     |                     |                 |        |           |
| 5          | The value of services or<br>facilities furnished by a<br>governmental unit to the<br>organization without charge   | rights, contributions, ''''''''''''''''''''''''''''''''''''  |                   |                     |                     |                 |        |           |
| 6          | Total. Add lines 1 through 5   | contributions, in the test of  |                   |                     |                     |                 |        |           |
| <b>7</b> a | Amounts included on lines 1,<br>2, and 3 received from<br>disqualified persons   |  |                   |                     |                     |                 |        |           |
| b          | Amounts included on lines 2<br>and 3 received from other than<br>disqualified persons that<br>exceed the greater of \$5,000 or<br>1% of the amount on line 13<br>for the year  |  |                   |                     |                     |                 |        |           |
| С          | Add lines 7a and 7b  |  |                   |                     |                     |                 |        |           |
| 8          | Public support. (Subtract line 7c from line 6.)  |  |                   |                     |                     |                 |        |           |
| Sec        | tion B. Total Support  |  |                   |                     |                     |                 |        |           |
| Calen      | dar year (or fiscal year beginning in) 🕨   | (a) 2012   | <b>(b)</b> 2013   | (c) 2014            | (d) 2015            | (e) 2016        |        | (f) Total |
| 9          | Amounts from line 6  |  |                   |                     |                     |                 |        |           |
| 10a        | Gross income from interest, dividends,<br>payments received on securities loans,<br>rents, royalties and income from   |  |                   |                     |                     |                 |        |           |
| b          | Unrelated business taxable<br>income (less section 511<br>taxes) from businesses<br>acquired after June 30, 1975   |  |                   |                     |                     |                 |        |           |
| с<br>11    | Add lines 10a and 10b<br>Net income from unrelated business<br>activities not included in line 10b,<br>whether or not the business is<br>regularly carried on  |  |                   |                     |                     |                 |        |           |
| 12         | Other income. Do not include<br>gain or loss from the sale of<br>capital assets (Explain in  |  |                   |                     |                     |                 |        |           |
| 13         | Total support. (Add lines 9, 10c, 11, and 12.)   | e 3  |                   |                     |                     |                 |        |           |
| 14         | First five years. If the Form 990 is organization, check this box and ste  | to or expended on fished by a fished by fish |                   |                     |                     |                 |        |           |
| Sec        |  |  |                   |                     |                     |                 |        |           |
| 15         |  |  |                   |                     |                     |                 | 15     |           |
| 16         |  |  |                   |                     |                     |                 | 16     | olo       |
| Sec        | •  |  | •                 |                     |                     |                 |        |           |
| 17         |  | •  | .,                | •                   |                     |                 |        |           |
| 18         | year (or fixed year big many circles (b) 2012 (c) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total (c) 2016 (f) Total (c) 2016 (c) 2016 (c) Total (c) 2016 (c) 2016 (c) Total (c) 2016 (c) 201 |  |                   |                     |                     |                 |        |           |
|            | dar year (or fixed year legining in) * (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total<br>for granulation integration of the second and the second participation of |  |                   |                     |                     |                 |        |           |
|            | line 18 is not more than 33-1/3%, cl   | neck this box and  | stop here. The or | ganization qualifie | s as a publicly sup | ported organiz  | zation |           |
| 20         | Private foundation. If the organiza  | tion did not check   | a box on line 14, | 19a, or 19b, check  | this box and see i  | nstructions .   |        | ►         |

### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

No Yes 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 2 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was 2 described in section 509(a)(1) or (2). 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below. 3a b 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 c 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. 3c Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and 4a if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a **b** 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 supervised by or in connection with its supported organizations. 4h c 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 5a 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). b 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? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its 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 7 (defined in section 4958(c)(3)(Č)), 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,' 8 complete Part I of Schedule L (Form 990 or 990-EZ). 8 9a 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 b 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. 9b c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI. 9c 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes, answer 10b below. 10a b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.) 10b

| 11 Has the organization accepted a gift or contribution from any of the following persons?   |     |  |
|--|-----|--|
|  |     |  |
| a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the<br>governing body of a supported organization? | 11a |  |
| <b>b</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.  | 11c |  |

- 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.
- 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 organization.

### Section 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 <b>Part VI</b> how control or management of the |   |     |    |
| _ | supporting organization was vested in the same persons that controlled or managed the supported organization(s).   | 1 |     |    |

### Section 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?  | 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 <i>No</i> ' explain in <b>Part VI</b> how  |   |     |    |
|   | organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played |   |     |    |
|   | in this regard.   | 3 |     |    |

### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
  - a The organization satisfied the Activities Test. Complete line 2 below.
    - The organization is the parent of each of its supported organizations. Complete line 3 below.
  - The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

### 2 Activities Test. Answer (a) and (b) below.

- 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.
- **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.
- 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.*
- **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.

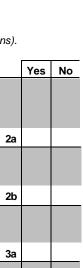
b

С

3b

1

2



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Page 6

| 1   | t V         Type III Non-Functionally Integrated 509(a)(3) Supporting Or           Check here if the organization satisfied the Integral Part Test as a qualifying trust or instructions. All other Type III non-functionally integrated supporting organizations | on Nov. 20, | 1970 (explain in Part | VI). <b>See</b><br>ıgh E.     |
|-----|---|-------------|-----------------------|-------------------------------|
| Sec | tion A – Adjusted Net Income  |             | (A) Prior Year        | (B) Current Yea<br>(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           |                       |                               |
| Sec | tion B – Minimum Asset Amount   |             | (A) Prior Year        | (B) Current Yea<br>(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):   |             |                       |                               |
| a   | Average monthly value of securities   | 1 a         |                       |                               |
| k   | Average monthly cash balances   | 1 b         |                       |                               |
| c   | Fair market value of other non-exempt-use assets  | 1 c         |                       |                               |
| c   | I Total (add lines 1a, 1b, and 1c)  | 1 d         |                       |                               |
| e   | Discount claimed for blockage or other<br>factors (explain in detail in <b>Part VI</b> ):   |             |                       |                               |
| 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           |                       |                               |
| Sec | tion 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   | <b>Distributable Amount.</b> 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 integrated Type III supporting organization (see instructions).

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Schedule A (Form 990 or 990-EZ) 2016

| Section        | n D – Distributions  |                                |  | Current Year                              |  |  |
|----------------|--|--------------------------------|--|---|--|--|
|                | ounts paid to supported organizations to accomplish exempt purpose   | es                             |  |   |  |  |
| <b>2</b> Am    | ounts paid to perform activity that directly furthers exempt purposes excess of income from activity   |                                | ons,                                   |   |  |  |
| 3 Adr          | ninistrative expenses paid to accomplish exempt purposes of support  | rted organizations             |  |   |  |  |
| <b>4</b> Am    | Amounts paid to acquire exempt-use assets  |                                |  |   |  |  |
| 5 Qua          | alified set-aside amounts (prior IRS approval required)  |                                |  |   |  |  |
| 6 Oth          | er distributions (describe in Part VI). See instructions.  |                                |  |   |  |  |
| 7 Tot          | al annual distributions. Add lines 1 through 6.  |                                |  |   |  |  |
|                | tributions to attentive supported organizations to which the organizat <b>Part VI</b> ). See instructions.   | ion is responsive (provi       | de details                             |   |  |  |
| 9 Dist         | tributable amount for 2016 from Section C, line 6  |                                |  |   |  |  |
| <b>10</b> Line | e 8 amount divided by Line 9 amount  |                                |  |   |  |  |
| Section        | n E – Distribution Allocations (see instructions)  | (i)<br>Excess<br>Distributions | (ii)<br>Underdistributions<br>Pre-2016 | (iii)<br>Distributable<br>Amount for 2016 |  |  |
| 1 Dist         | tributable amount for 2016 from Section C, line 6  |                                |  |   |  |  |
|                | derdistributions, if any, for years prior to 2016 (reasonable<br>ise required – explain in Part VI). See instructions.   |                                |  |   |  |  |
| 3 Exc          | cess distributions carryover, if any, to 2016:   |                                |  |   |  |  |
| a              |  |                                |  |   |  |  |
| b              |  |                                |  |   |  |  |
| c Fro          | m 2013   |                                |  |   |  |  |
| d Fro          | m 2014   |                                |  |   |  |  |
| e Fro          | m 2015   |                                |  |   |  |  |
| f Tot          | al of lines 3a through e   |                                |  |   |  |  |
| <b>g</b> App   | blied to underdistributions of prior years   |                                |  |   |  |  |
| h App          | blied to 2016 distributable amount   |                                |  |   |  |  |
| i Car          | rryover from 2011 not applied (see instructions)   |                                |  |   |  |  |
| j Rer          | mainder. Subtract lines 3g, 3h, and 3i from 3f.  |                                |  |   |  |  |
| 4 Dist<br>line | tributions for 2016 from Section D,<br>97: \$  |                                |  |   |  |  |
| <b>a</b> App   | plied to underdistributions of prior years   |                                |  |   |  |  |
|                | plied to 2016 distributable amount   |                                |  |   |  |  |
|                | mainder. Subtract lines 4a and 4b from 4.  |                                |  |   |  |  |
| Sub            | maining underdistributions for years prior to 2016, if any.<br>otract lines 3g and 4a from line 2. For result greater than<br>o, explain in Part VI. See instructions. |                                |  |   |  |  |
| fron           | maining underdistributions for 2016. Subtract lines 3h and 4b<br>n line 1. For result greater than zero, explain in Part VI. See<br>tructions.                         |                                |  |   |  |  |
| 7 Exc          | cess distributions carryover to 2017. Add lines 3j and 4c.   |                                |  |   |  |  |
|                | akdown of line 7:  |                                |  |   |  |  |
| а              |  |                                |  |   |  |  |
| b Exc          | cess from 2013   |                                |  |   |  |  |
| c Exc          | cess from 2014   |                                |  |   |  |  |
|                | cess from 2015   |                                |  |   |  |  |
|                | cess from 2016   |                                |  |   |  |  |

Schedule A (Form 990 or 990-EZ) 2016

| 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; |
|---------|--|
| -       | 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.)  |

- Other Addl Info Agency transactions are recorded as contributions but are deducted from gross revenue on Part VIII, lIne 11a see Schedule O for further details.
- Pt II Ln 10 Other Income Part II, Line 10 Description: Other income 2012: 0. 2013: 3331. 2014: 2200. 2015: 2850. 2016: 4400. Description: Fundraising events - gross 2012: 507655. 2013: 668455. 2014: 445621. 2015: 657011. 2016: 368145.

| SCHEDULE D Supplemental Financial Statements |                                       |  |  | OMB No. 1545-0047   |                              |                              |             |
|--|---------------------------------------|--|--|---|------------------------------|------------------------------|-------------|
|  | HEDULE D<br>rm 990)                   | ► Complet  | e if the organization answered<br>5, 7, 8, 9, 10, 11a, 11b, 11c, 11d                                     | d 'Yes' on Form 990,  |                              | 2016                         |             |
| Denar  | tment of the Treasury                 |  | Attach to Form 990   | ).  |                              | Open t                       | o Public    |
| Intern                                       | al Revenue Service                    | Information about Sche   | edule D (Form 990) and its inst  | tructions is at www.irs.gov/i                                     |                              | Inspec                       | tion        |
| Name   | of the organization                   |  |  |   | Employer i                   | dentification r              | umber       |
|  |                                       | lana Tuna  |  |   |                              |                              |             |
|  |                                       | lders Fund   |  |   | 36-349                       | 0557                         |             |
| Par  |                                       |  | or Advised Funds or Oth<br>ered 'Yes' on Form 990, F   |   | counts.                      |                              |             |
|  |                                       |  | (a) Donor advised f  | funds (b)   | Funds and                    | other accou                  | ints        |
| 1  | Total number at er                    | nd of year .........   |  |   |                              |                              |             |
| 2  | Aggregate value of co                 | ntributions to (during year)   |  |   |                              |                              |             |
| 3  | 00 0 0                                | ants from (during year)  |  |   |                              |                              |             |
| 4  | Aggregate value a                     | t end of year  |  |   |                              |                              |             |
| 5  |                                       |  | advisors in writing that the assegnation and the assegnation and the seclusive legal cont                |   |                              | Yes                          | No          |
| 6  | Did the organization                  | on inform all grantees, donors.  | and donor advisors in writing th   | nat grant funds can be used or                                    | lv L                         |                              |             |
| •  | for charitable purp                   | oses and not for the benefit of  | the donor or donor advisor, or f   | for any other purpose conferrir                                   | ig _                         |                              |             |
| _  |                                       |  |  |   |                              | Yes                          | No          |
| Par  |                                       | tion Easements.  |  |   |                              |                              |             |
|  |                                       | 0  | ered 'Yes' on Form 990, F  |   |                              |                              |             |
| 1  |                                       | •  | he organization (check all that a  |   |                              |                              |             |
|  |                                       | of land for public use (e.g., rec  | reation or education)  | Preservation of a historica                                       |                              |                              |             |
|  | Protection of r                       |  |  | Preservation of a certified                                       | historic struc               | cture                        |             |
| _  | Preservation of                       |  |  |   |                              |                              |             |
| 2  | Complete lines 2a last day of the tax |  | held a qualified conservation co   | ontribution in the form of a con                                  |                              |                              |             |
|  |                                       |  |  |   | Held at the                  | e End of the                 | e Tax Year  |
|  |                                       |  |  |   |                              |                              |             |
|  | 0                                     |  | ents   |   |                              |                              |             |
|  |                                       |  | d historic structure included in (a  | ,   |                              |                              |             |
| 0  |                                       |  | (c) acquired after 8/17/06, and n  |   |                              |                              |             |
| 3  | Number of conser<br>tax year ►        | vation easements modified, tra   | ansferred, released, extinguishe   | d, or terminated by the organi                                    | zation during                | the                          |             |
| 4  | Number of states                      | where property subject to cons   | servation easement is located  |   |                              |                              |             |
| 5  |                                       |  | rding the periodic monitoring, in  |   |                              | Yes                          | No          |
| 6  | Staff and voluntee<br>►               | r hours devoted to monitoring,   | inspecting, handling of violation  | ns, and enforcing conservation                                    | easements                    | during the                   | year        |
| 7  | Amount of expens<br>►\$               | es incurred in monitoring, insp  | ecting, handling of violations, a  | nd enforcing conservation eas                                     | ements durir                 | ng the year                  |             |
| 8  | Does each conser<br>and section 170(h | vation easement reported on I<br>)(4)(B)(ii)?  | ine 2(d) above satisfy the requir  | rements of section 170(h)(4)(B                                    | )(i)<br>•••••[               | Yes                          | No          |
| 9  |                                       | ole, the text of the footnote to the   | ts conservation easements in its<br>he organization's financial stater                                   |   |                              |                              |             |
| Par  | t III Organizat<br>Complete           | tions Maintaining Colle<br>if the organization answ  | ections of Art, Historical<br>ered 'Yes' on Form 990, F  | <b>Treasures, or Other S</b><br>Part IV, line 8.                  | imilar As:                   | sets.                        |             |
| 1;   | art, historical treas                 | sures, or other similar assets h   | FAS 116 (ASC 958), not to repo<br>eld for public exhibition, educati<br>I statements that describes thes | on, or research in furtherance                                    |                              |                              |             |
| I  | historical treasures                  | elected, as permitted under S<br>s, or other similar assets held t<br>relating to these items: | FAS 116 (ASC 958), to report in for public exhibition, education,  | n its revenue statement and ba<br>or research in furtherance of p | lance sheet<br>ublic service | works of ar<br>e, provide th | rt,<br>ne   |
|  |                                       |  | ne1  |   |                              |                              |             |
|  |                                       |  |  |   |                              |                              |             |
|  | amounts required                      | to be reported under SFAS 11   | historical treasures, or other sin<br>6 (ASC 958) relating to these ite                                  | ems:  |                              | ollowing                     |             |
|  |                                       |  |  |   |                              |                              |             |
|  |                                       |  |  |   |                              |                              |             |
| BAA  | For Paperwork R                       | eduction Act Notice, see the   | Instructions for Form 990.   | TEEA3301 08/15/16   | Sched                        | lule D (Forn                 | n 990) 2016 |

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

| Schedule D (Form 990) 2016 Big S   | Shoulders Fund         | l                      |                         | 36-3490                      | )557            | Page <b>2</b>      |  |  |
|--|------------------------|------------------------|-------------------------|------------------------------|-----------------|--------------------|--|--|
| Part III Organizations Mainta  | ining Collections      | of Art, Histori        | cal Treasures, o        | r Other Similar Ass          | ets (contir     | nued)              |  |  |
| 3 Using the organization's acquisition items (check all that apply):   | n, accession, and othe | r records, check an    | y of the following that | are a significant use of its | collection      |                    |  |  |
| a Public exhibition  |                        | d Loan or e            | exchange programs       |                              |                 |                    |  |  |
| <b>b</b> Scholarly research  |                        | e Other                |                         |                              |                 |                    |  |  |
| c Preservation for future generat  | ions                   |                        |                         |                              |                 |                    |  |  |
| 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in<br>Part XIII.  |                        |                        |                         |                              |                 |                    |  |  |
| 5 During the year, did the organization  |                        |                        |                         |                              | Yes             | No                 |  |  |
| to be sold to raise funds rather than<br>Part IV Escrow and Custodia   |                        |                        |                         |                              |                 |                    |  |  |
| Part IV Escrow and Custodia<br>line 9, or reported an ar   | mount on Form 99       | 0, Part X, line 2      | 21.                     |                              | 330, i an       | īv,                |  |  |
| •  |                        | · · ·                  |                         |                              |                 |                    |  |  |
| <b>1 a</b> Is the organization an agent, truste<br>on Form 990, Part X?  |                        |                        |                         | ets not included             | Yes             | X No               |  |  |
| <b>b</b> If 'Yes,' explain the arrangement in  |                        |                        |                         |                              |                 |                    |  |  |
|  |                        | <b>j</b>               |                         |                              | Amount          |                    |  |  |
| <b>c</b> Beginning balance   |                        |                        |                         | . 1c                         |                 |                    |  |  |
| <b>d</b> Additions during the year   |                        |                        |                         | . 1d                         |                 |                    |  |  |
| e Distributions during the year  |                        |                        |                         | . 1e                         |                 |                    |  |  |
| f Ending balance   |                        |                        |                         | . 1f                         |                 |                    |  |  |
| 2 a Did the organization include an am   | ount on Form 990, Pa   | rt X, line 21, for esc | row or custodial accou  | unt liability?               | X Yes           | No                 |  |  |
| <b>b</b> If 'Yes,' explain the arrangement in  |                        |                        |                         |                              |                 | х                  |  |  |
|  |                        | -                      | -                       |                              |                 |                    |  |  |
| Part V Endowment Funds. C  | omplete if the org     | anization answe        | ered 'Yes' on Forn      | n 990, Part IV, line 1       | 0.              |                    |  |  |
|  | (a) Current year       | (b) Prior year         | (c) Two years back      | (d) Three years back         | (e) Four ye     | ars back           |  |  |
| <b>1 a</b> Beginning of year balance   | 29,960,838.            | 33,571,000             | ). 32,437,97            | 9. 28,872,088.               | 26,644          | 4,257.             |  |  |
| <b>b</b> Contributions   | 332,954.               | 334,396                | 5. 721,163              | 3. 330,000.                  | 330             | ),000.             |  |  |
| <b>c</b> Net investment earnings, gains,   |                        |                        |                         |                              |                 |                    |  |  |
| and losses   | 4,763,478.             | -2,352,658             |                         |                              |                 | 8,568.             |  |  |
| d Grants or scholarships   | 437,182.               | 432,078                | 388,692                 | 2. 363,286.                  | 308             | 3,307.             |  |  |
| e Other expenditures for facilities and programs   | 1,116,618.             | 1,120,708              | 1,055,942               | 1. 1,016,419.                | 983             | 2,430.             |  |  |
| f Administrative expenses  | 40,448.                | 39,114                 |                         |                              |                 | D,000.             |  |  |
| g End of year balance  | 33,463,022.            | 29,960,838             |                         |                              |                 | 2,088.             |  |  |
| 2 Provide the estimated percentage   |                        |                        |                         | 0.1 52,157,575.              | 20,012          | 1,000.             |  |  |
| a Board designated or guasi-endown   | -                      | .79 %                  |                         |                              |                 |                    |  |  |
| <b>b</b> Permanent endowment   | 21.97 %                |                        |                         |                              |                 |                    |  |  |
| c Temporarily restricted endowment   |                        | 4 %                    |                         |                              |                 |                    |  |  |
| The percentages on lines 2a, 2b, a   |                        |                        |                         |                              |                 |                    |  |  |
| 3 a Are there endowment funds not in   | the possession of the  | organization that are  | a hald and administer   | ad for the                   |                 |                    |  |  |
| organization by:   |                        | organization that are  |                         |                              | Yes             | No                 |  |  |
| (i) unrelated organizations  |                        |                        |                         |                              | . 3a(i)         | Х                  |  |  |
| (ii) related organizations   |                        |                        |                         |                              | . 3a(ii)        | Х                  |  |  |
| <b>b</b> If 'Yes' on line 3a(ii), are the related  | •                      | •                      |                         |                              | . 3b            |                    |  |  |
| 4 Describe in Part XIII the intended u   | -                      | n's endowment fund     | ls.                     |                              |                 |                    |  |  |
| Part VI Land, Buildings, and   |                        |                        |                         |                              |                 |                    |  |  |
| Complete if the organiz  | ation answered 'Y      | es' on Form 99         | 0, Part IV, line 11     | a. See Form 990, Pa          | art X, line 1   | 10.                |  |  |
| Description of property  |                        | or other basis         | (b) Cost or other       | (c) Accumulated              | <b>(d)</b> Book | value              |  |  |
| investment)     basis (other)     depreciation       1 a Land     0     0     0  |                        |                        |                         |                              |                 |                    |  |  |
|  |                        |                        |                         |                              |                 |                    |  |  |
| c Leasehold improvements   |                        | 0.                     | 0.                      | 0.                           |                 | 0.                 |  |  |
| d Equipment  |                        | 0.                     | 135,389.                | 103,813.                     | 3               | <u>1,576.</u><br>0 |  |  |
|  |                        | 0.                     | 0.                      | 0.                           | 7               | 0.                 |  |  |
| e Other       0.       198,074.       124,776.       73,298.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       104,874.       104,874. |                        |                        |                         |                              |                 |                    |  |  |

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Schedule **D** (Form 990) 2016

| Complete if the organization answered '   | (b) Book value                   |                                     |                         |
|---|----------------------------------|-------------------------------------|-------------------------|
| (a) Description of security or category (including name of security)  | (D) BOOK value                   | (c) Method of valuation: Cost or er | id-of-year market value |
| Financial derivatives   |                                  |                                     |                         |
| Closely-held equity interests   |                                  |                                     |                         |
| Other   |                                  |                                     |                         |
| Berens Global Value Fund  | 1,977,330.                       |                                     |                         |
| Davidson Kempner Inst Partners  |                                  | FMV                                 |                         |
| ESG Domestic Opportunity Fund   |                                  | FMV                                 |                         |
| Farallon_Equity   | 2,369,523.                       | FMV                                 |                         |
| Kabouter Intl Opportunities   | 1,520,678.                       | FMV                                 |                         |
| Newport Asia Inst Fund  | 2,447,668.                       | FMV                                 |                         |
| OZ Structured Products  | 708,705.                         | FMV                                 |                         |
| Palo_Alto_Healthcare  | 2,767,805.                       | FMV                                 |                         |
| Other Investments - see Part XIII   | 10,567,514.                      | FMV                                 |                         |
| al. (Column (b) must equal Form 990, Part X, column (B) line 12.) ►   | 27,482,507.                      |                                     |                         |
| art VIII Investments - Program Related.   | Vaa' on Earm 000                 | Port IV line 11e See Form 00        | ) Dort V line 12        |
| Complete if the organization answered '<br>(a) Description of investment  | (b) Book value                   | (c) Method of valuation: Cost or e  |                         |
|   |                                  |                                     | na or year market value |
|   |                                  |                                     |                         |
| 2)  |                                  |                                     |                         |
| 3)  |                                  |                                     |                         |
| 4)  |                                  |                                     |                         |
| 5)  |                                  |                                     |                         |
|   |                                  |                                     |                         |
|   |                                  |                                     |                         |
| 7)  |                                  |                                     |                         |
| 6)<br>7)<br>8)  |                                  |                                     |                         |
| 7)<br>8)<br>9)  |                                  |                                     |                         |
| 7)<br>8)<br>9)<br>0)  |                                  |                                     |                         |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►   |                                  |                                     |                         |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.)►<br>art IX Other Assets.  | Yes' on Form 990                 | Part IV, line 11d, See Form 99      | ) Part X line 15        |
| 7)<br>8)<br>9)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.)►<br>art IX Other Assets.<br>Complete if the organization answered '   |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>8)<br>9)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.)►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De   | Yes' on Form 990, I<br>scription | Part IV, line 11d. See Form 990     | ), Part X, line 15.     |
| 7)<br>8)<br>9)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.)►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)   |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>8)<br>9)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.)►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)   |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.)►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)   |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>8)<br>9)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.)►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)   |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.)►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)<br>4)   |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.)►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)<br>4)<br>5)   |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)<br>4)<br>5)<br>6)<br>7)  |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>B)<br>9)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)<br>4)<br>5)<br>6)<br>7)<br>8)  |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>B)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)<br>4)<br>5)<br>6)<br>7)<br>8)<br>9)  |                                  | Part IV, line 11d. See Form 990     |                         |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)<br>4)<br>5)<br>6)  | scription                        |                                     |                         |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.). ►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)<br>4)<br>5)<br>6)<br>7)<br>8)<br>9)<br>0)<br>tal. (Column (b) must equal Form 990, Part X, column (B) I   | scription                        |                                     |                         |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► art IX Other Assets. Complete if the organization answered ' (a) De 1) 2) 3) 4) 5) 6) 7) 8) 9) 0 tal. (Column (b) must equal Form 990, Part X, column (B) line art X Other Liabilities. Complete if the organization answered 'Yes' on F  | scription                        |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► art IX Other Assets. Complete if the organization answered ' (a) De 1) 2) 3) 4) 5) 6) 7) 8) 9) 0 tal. (Column (b) must equal Form 990, Part X, column (B) line 1) 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   | scription                        |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.)► art IX Other Assets. Complete if the organization answered ' (a) De 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B) line 1) 21 32 33 44 55 60 77 80 99 00 tal. (Column (b) must equal Form 990, Part X, column (B) line 1) 21 22 23 23 24 25 25 25 25 25 25 25 25 25 25 25 25 25  | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.)► art IX Other Assets. Complete if the organization answered ' (a) De 1) 2) 3) 4) 5) 6) 7) 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B) line 1) 21 32 33 44 55 60 77 80 99 00 tal. (Column (b) must equal Form 990, Part X, column (B) line 1) 21 22 23 23 24 25 25 25 25 25 25 25 25 25 25 25 25 25  | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)<br>4)<br>5)<br>6)<br>7)<br>8)<br>9)<br>0)<br>tal. (Column (b) must equal Form 990, Part X, column (B) line<br>art X Other Liabilities.<br>Complete if the organization answered 'Yes' on F<br>(a) Description of liability<br>1) Federal income taxes<br>2)<br>3)  | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7)<br>8)<br>9)<br>0)<br>al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ►<br>art IX Other Assets.<br>Complete if the organization answered '<br>(a) De<br>1)<br>2)<br>3)<br>4)<br>5)<br>6)<br>7)<br>8)<br>9)<br>0)<br>tal. (Column (b) must equal Form 990, Part X, column (B) line<br>tal. (Column (b) must equal Form 990, Part X, column (B) line<br>tal. (Column (b) must equal Form 990, Part X, column (B) line<br>tal. (Column (b) must equal Form 990, Part X, column (B) line<br>tal. (Column (b) must equal Form 990, Part X, column (B) line<br>tal. (Column (b) must equal Form 990, Part X, column (B) line<br>(a) Description of liability<br>1) Federal income taxes<br>2)<br>3)<br>4)   | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► art IX Other Assets. Complete if the organization answered ' (a) De 1) 2) 3) 4) 5) 6) 77 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B) line 11 2) 3) 4) 5) Complete if the organization answered 'Yes' on F (a) Description of liability 1) Federal income taxes 2) 3) 4) 5)  | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► art IX Other Assets. Complete if the organization answered ' (a) De 1) 2) 3) 4) 5) 6) 77 8) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B) line 11 2) 3 4) 5) 6) 7 tal. (Column (b) must equal Form 990, Part X, column (B) line 11 2) 1) Federal income taxes 2) 3) 4) 5) 6)   | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► art IX Other Assets. Complete if the organization answered ' (a) De 1) 2) 3) 4) 5) 6) 7) tal. (Column (b) must equal Form 990, Part X, column (B) line 1) 9) 0) tal. (Column (b) must equal Form 990, Part X, column (B) line 1) art X Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability 1) Federal income taxes 2) 3) 4) 5) 6) 7)   | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► art IX Other Assets. Complete if the organization answered ' (a) De (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c  | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► art IX Other Assets. Complete if the organization answered ' (a) De (b) (a) De (c) De | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► art IX Other Assets. Complete if the organization answered ' (a) De (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c  | scription<br>ine 15.)            |                                     | (b) Book value          |
| 7) 8) 9) 0) al. (Column (b) must equal Form 990, Part X, column (B) line 13.) ► art IX Other Assets. Complete if the organization answered ' (a) De (b) (a) De (c) De | scription<br>ine 15.)            |                                     | (b) Book value          |

| Schedule D (Form 990) 2016 Big Shoulders Fund  | 36-349  | 0557 Page <b>4</b> |
|--|---|--------------------|
| Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per  | <sup>r</sup> Return.                          |                    |
| Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  |   |                    |
| 1 Total revenue, gains, and other support per audited financial statements   | 1   | 17,993,592.        |
| 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:  |   |                    |
| a Net unrealized gains (losses) on investments   | 56.   |                    |
| b Donated services and use of facilities   | 08.   |                    |
| c Recoveries of prior year grants  |   |                    |
| d Other (Describe in Part XIII.)   |   |                    |
| e Add lines 2a through 2d  | 2 e   | 6,178,174.         |
| 3 Subtract line 2e from line 1   | 3   | 11,815,418.        |
| 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:   |   | · · ·              |
| a Investment expenses not included on Form 990, Part VIII, line 7b 4a 126, 29  | 91.   |                    |
| b Other (Describe in Part XIII.)   |   |                    |
| <b>c</b> Add lines <b>4a</b> and <b>4b</b>   |   | 154,310.           |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  | 5   | 11,969,728.        |
| Part XII Reconciliation of Expenses per Audited Financial Statements With Financial Statements With With With With With | er Retur                                      |                    |
| Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.  |   |                    |
| 1 Total expenses and losses per audited financial statements.  | 1   | 18,804,835.        |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  | -   | 10,001,0001        |
| a Donated services and use of facilities   | 20  |                    |
| b Prior year adjustments   | <u>, , , , , , , , , , , , , , , , , , , </u> |                    |
| c Other losses   |   |                    |
| d Other (Describe in Part XIII.)   |   |                    |
| e Add lines 2a through 2d  | 2e  | 151,490.           |
| 3 Subtract line 2e from line 1   |   | 18,653,345.        |
| 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:   |   | 10,055,515.        |
| a Investment expenses not included on Form 990, Part VIII, line 7b 4a 126, 29  | 91  |                    |
| <b>b</b> Other (Describe in Part XIII.)  |   |                    |
| C Add lines 4a and 4b  |   | 154,310.           |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)   | 5   | 18,807,655.        |
| Part XIII Supplemental Information.  |   |                    |

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V,

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

As described elsewhere in this return, the Fund receives charitable donations that are classified for accounting purposes as agency transactions. These donations represent gifts from donors that are designated for specific beneficiaries, such as a school supported by the Fund. Although the Fund endeavors to forward these gifts to the beneficiary on a timely basis, it is not always possible to do so. The funds are deposited into the regular checking account when received, and are recorded as general liablities of the fund until paid. There is no separate account maintained for these funds, but they are tracked using the same method as other restricted donations.

Donor endowment funds are used as instructed by the donor which includes scholarships, programs, and other expenses as needed by the Fund. Earnings on funds designated by the Executive Committee to act as

Pt IV, Line 2b

Schedule **D** (Form 990) 2016

Page 5

endowments are used to pay the fund's administrative expenses, which may include program, management, or fundraising expenses, or they may be Pt V, Line 4 designated for use in specific programs.

Other: Certain expenses totaling \$28,019 related to fund-raising events are netted against event revenue on the financial statements, but are Pt XI, Line 4b included in fund-raising expenses on the tax return.

Other: Certain expenses totaling \$28,019 related to fund-raising events are netted against event revenue on the financial statements, but are Pt XII, Line 4b included in fund-raising expenses on the tax return.

The following is the text of the financial statement note pertaining to uncertain tax positions: 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 Code of 1986 and, except for taxes pertaining to unrelated business income, is exempt from federal and state income taxes. The Fund is classified as a public charity under Section 509(a)(1) and Section 170(b)(1)(A)(vi), an organization that normally receives a substantial part of its support from direct or indirect contributions from the general public. No provision has been made for income taxes in the accompanying financial statements as the Fund had no material unrelated business income in fiscal years 2017 and 2016.

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 next twelve months.

The Fund has applied this criterion to all tax positions for which the statute of limitations remains open. Tax years open to examination by tax authorities under the statute of limitations include fiscal years ending June 2014 through 2016. The Fund recognizes interest and penalties related to unrecognized tax benefits in interest and income tax expense, respectively. The Fund has no amounts accrued for interest or penalties as of June 30, 2017 and 2016. 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, 2017.

| Other | Part VII, Line (I) - Othe | r Investments |                  |
|-------|---------------------------|---------------|------------------|
| Other | Name of Security          | Book Value    | Valuation Method |
| Other | Raptor Private Holdings   | 27,432        | FMV              |
| Other | Renaissance Inst Div Alph | a 1,026,012   | FMV              |
| Other | Vanguard Dividend Growth  | 4,878,687     | FMV              |
| Other | Viking Global Equities    | 4,635,383     | FMV              |
| Other |                           |               |                  |
| Other | Total Other               | 10,567,514    |                  |
|       |                           |               |                  |

Pt X, Line 2

| SCHEDULE F   |   |   | d States  | OMB No. 1545-0047   |   |
|--|---|---|---|---|---|
| (Form 990)   | Complete if the org                       | anization answer  | ed 'Yes' on Form 990, Part IV, I<br>ich to Form 990.  | line 14b, 15, or 16.  | 2016  |
| Department of the Treasury<br>Internal Revenue Service | Informati                                 | on about Schedu   | le F (Form 990) and its instruc<br>irs.gov/form990.   | tions is  | Open to Public<br>Inspection                                      |
| Name of the organization                               |   |   |   | Employer iden   | tification number   |
| Big Shoulders Fund                                     |   |   |   | 36-3490   |   |
| Part I General Inform<br>on Form 990, F                | nation on Activiti<br>Part IV, line 14b.  | es Outside th   | e United States. Complet  | te if the organizatio   | n answered 'Yes'  |
|  |   |   | ostantiate the amount of its grant<br>tion criteria used to award the gr  |   | Yes No  |
| 2 For grantmakers. Desc<br>United States.              | cribe in Part V the orga                  | nization's procedu  | res for monitoring the use of its g   | grants and other assista  | nce outside the   |
| 3 Activities per Region. (T                            | he following Part I, line                 | 3 table can be du   | plicated if additional space is ne  | eded.)  |   |
| <b>(a)</b> Region                                      | (b) Number of<br>offices in the<br>region | (c) Number of<br>employees,<br>agents, and<br>independent<br>contractors<br>in the region | (d) Activities conducted in<br>the region (by type) (such<br>as, fundraising, program<br>services, investments,<br>grants to recipients<br>located in the region) | (e) If activity listed in<br>(d) is a program<br>service, describe<br>specific type of<br>service(s) in<br>the region | (f) Total<br>expenditures for<br>and investments<br>in the region |
| (1) Central America                                    | ı <u> </u>                                | 0   | investments   | n/a   | 15,566,928.   |
| (2)  |   |   |   |   |   |
| (3)  |   |   |   |   |   |
| (4)  |   |   |   |   |   |
| (5)  |   |   |   |   |   |
| (6)  |   |   |   |   |   |
| (7)  |   |   |   |   |   |
| (8)  |   |   |   |   |   |
| (9)  |   |   |   |   |   |
| (10)   |   |   |   |   |   |
| (11)   |   |   |   |   |   |
| (12)   |   |   |   |   |   |
| (13)   |   |   |   |   |   |
| (14)   |   |   |   |   |   |
| (15)   |   |   |   |   |   |
| (16)   |   |   |   |   |   |
| (17)   |   |   |   |   |   |
| <b>3 a</b> Sub-total                                   | 0   | 0   |   |   | 15,566,928.   |
| <b>b</b> Total from continuation sheets to Part I      |   |   |   |   |   |

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

0

**c** Totals (add lines 3a and 3b) .

15,566,928. Schedule F (Form 990) 2016

0

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

| 1        | (a) Name of organization   | (b) IRS code<br>section and EIN<br>(if applicable) | (c) Region                           | (d) Purpose<br>of grant | (e) Amount of cash grant | (f) Manner of<br>cash<br>disbursement | (g) Amount of<br>noncash<br>assistance | (h) Description of<br>noncash<br>assistance | (i) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) |
|----------|--|--|--------------------------------------|-------------------------|--------------------------|---------------------------------------|--|---|--|
| (1)      |  |  |                                      |                         |                          |                                       |  |   |  |
| (2)      |  |  |                                      |                         |                          |                                       |  |   |  |
| (3)      |  |  |                                      |                         |                          |                                       |  |   |  |
| (4)      |  |  |                                      |                         |                          |                                       |  |   |  |
| (5)      |  |  |                                      |                         |                          |                                       |  |   |  |
| (6)      |  |  |                                      |                         |                          |                                       |  |   |  |
| (7)      |  |  |                                      |                         |                          |                                       |  |   |  |
| (8)      |  |  |                                      |                         |                          |                                       |  |   |  |
| (9)      |  |  |                                      |                         |                          |                                       |  |   |  |
| (10)     |  |  |                                      |                         |                          |                                       |  |   |  |
| (11)     |  |  |                                      |                         |                          |                                       |  |   |  |
| (12)     |  |  |                                      |                         |                          |                                       |  |   |  |
| (13)     |  |  |                                      |                         |                          |                                       |  |   |  |
| (14)     |  |  |                                      |                         |                          |                                       |  |   |  |
| (15)     |  |  |                                      |                         |                          |                                       |  |   |  |
| (16)     |  |  |                                      |                         |                          |                                       |  |   |  |
| 2  <br>1 | Enter total number of recipient organizat the grantee or counsel has provided a se | ions listed above that a ection 501(c)(3) equiva   | are recognized as ch<br>lency letter | arities by the for      | eign country, recogn     | ized as tax-exempt                    | t by the IRS, or for v                 | vhich<br>• • • • • • • • ►                  |  |
| 3 BAA    | Enter total number of other organizations  | s or entities                                      | <u></u>                              | <u></u>                 |                          |                                       | <u></u>                                | Schedule F                                  | F (Form 990) 2016  |
| ваа      |  |  |                                      |                         |                          |                                       |  | Schedule F                                  | . (Eoun aan) 2016  |

Part IV, line 16. Part III can be duplicated if additional space is needed. (c) Number of recipients (d) Amount of (a) Type of grant or assistance (b) Region (e) Manner of (f) Amount of (g) Description of (h) Method of cash grant noncash assistance noncash assistance valuation (book, cash FMV, appraisal, disbursement other) (1) \_\_\_\_\_ (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16)

Page 3

Schedule F (Form 990) 2016

(18) BAA

(17)

| Sche | edule F (Form 990) 2016 Big Shoulders Fund  | 36-3490557 | Page 4 |
|------|---|------------|--------|
| Pa   | rt 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).   |            | No     |
| 2    | Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may b<br>required to separately file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Rec<br>of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S.<br>Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) | eipt       | X No   |
| 3    | Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certa Foreign Corporations (see Instructions for Form 5471)  |            | No     |
| 4    | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualifie electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).   | _          | No     |
| 5    | Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865).   | XYes       | No     |
| 6    | Did the organization have any operations in or related to any boycotting countries during the tax year?<br>If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (see<br>Instructions for Form 5713; do not file with Form 990)   | Yes        | X No   |

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TEEA3505 09/26/16

Schedule F (Form 990) 2016

Pt I Line 2 No assistance is given outside the United States.

36-3490557

|  | Supplem  | ental Inform                | ation Re                     | garding                                 | Fundraising or Ga   | ming Activities  | OMB No. 1545-0047                                       |
|--|--|-----------------------------|------------------------------|---|---|--|---|
| SCHEDULE G<br>(Form 990 or 990-EZ)                     |  | te if the organizati        | on answere                   | d 'Yes' on Fo                           | orm 990, Part IV, line 17, 18,<br>,000 on Form 990-EZ, line 6 | or 19, or if the   | 2016  |
| Department of the Treasury<br>Internal Revenue Service | ► Information                                      | -                           | <ul> <li>Attach t</li> </ul> | o Form 990                              | or Form 990-EZ.<br>and its instructions is at wi              |  | Open to Public<br>Inspection                            |
| Name of the organization                               |  |                             | <u> </u>                     |   |   | Employer identific   | •   |
| Big Shoulders  |  |                             |                              |   |   | 36-349055  | 7   |
|  | <b>g Activities.</b> Comp<br>Z filers are not requ |                             |                              |   | s' on Form 990, Part IV,                                      | line 17.   |   |
|  | 0  | ised funds throu            | igh any of                   |   | ng activities. Check all th                                   | ,  |   |
| a Mail solicitatio                                     |  |                             |                              | e                                       | - · · · · ·   | e e  |   |
|  | email solicitations                                |                             |                              | f                                       | Solicitation of gover   |  |   |
| d In-person sol  |  |                             |                              | g                                       |   | events   |   |
| <b>2</b> a Did the organizati                          | on have a written o                                | or oral agreeme             | nt with any                  | individual                              | (including officers, direct                                   | tors, trustees, or key   |   |
| employees listed                                       | in Form 990, Part V                                | <li>II) or entity in c</li> | connection                   | with profes                             | ssional fundraising servic                                    | ces?   | Yes No  |
| compensated at l                                       | east \$5,000 by the                                | organization.               | s (fundraise                 | ers) pursua                             | nt to agreements under  | which the fundraiser is to   | be  |
| (i) Name and addres<br>or entity (fund                 |  | (ii) Activity               | have custo                   | undraiser<br>dy or control<br>ibutions? | (iv) Gross receipts<br>from activity                          | (v) Amount paid to<br>(or retained by)<br>fundraiser listed in<br>column (i) | (vi) Amount paid to<br>(or retained by)<br>organization |
|  |  |                             | Yes                          | No                                      |   |  |   |
| 1  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
| 2  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
| 3  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
| 4  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
| 5  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
| 6  |  |                             |                              |   |   |  |   |
| 0  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
| 7  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
| 8  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
| 9  |  |                             |                              |   |   |  |   |
|  |  |                             | -                            |   |   |  |   |
| 10   |  |                             |                              |   |   |  |   |
| 10   |  |                             |                              |   |   |  |   |
| Tatal  |  |                             |                              |   |   |  |   |
| Total  |  |                             |                              |   | l<br>contributions or has beer                                | I<br>n notified it is exempt fro   | I<br>m registration                                     |
| or licensing.  |  |                             | 3                            |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |
|  |  |                             |                              |   |   |  |   |

| Sche   | Schedule G (Form 990 or 990-EZ) 2016         Big Shoulders Fund         36-3490557         Page 2 |  |                   |   |                    |  |  |  |  |  |  |  |
|--|---|--|-------------------|---|--------------------|--|--|--|--|--|--|--|
| Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or r more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and |   |  |                   |   |                    |  |  |  |  |  |  |  |
|  |   | List events with gross receipts grea                                 | iter than \$5 000 | na gross income on                                  | Form 990-EZ, lines |  |  |  |  |  |  |  |
|  |   |  | (a) Event #1      | (b) Event #2  | (c) Other events   | (d) Total events   |  |  |  |  |  |  |
|  |   |  | Golf Outing       | Award Dinner  | 2                  | (add column <b>(a)</b><br>through column <b>(c)</b> )                            |  |  |  |  |  |  |
| R  |   |  | (event type)      | (event type)  | (total number)     | (inough column (c))  |  |  |  |  |  |  |
| REVENUE  |   |  |                   |   |                    |  |  |  |  |  |  |  |
|  | 1   | Gross receipts   | 686,867.          | 387,409.  | 151,072.           | 1,225,348.   |  |  |  |  |  |  |
|  | 2   | Less: Contributions  | 432,266.          | 387,409.  | 92,808.            | 912,483.   |  |  |  |  |  |  |
|  | 3   | Gross income (line 1 minus line 2)                                   | 254,601.          | 0.  | 58,264.            | 312,865.   |  |  |  |  |  |  |
|  | 4   | Cash prizes  | 0.                | 0.  | 0.                 | 0.   |  |  |  |  |  |  |
| _  | 5   | Noncash prizes   | 3,960.            | 0.  | 0.                 | 3,960.   |  |  |  |  |  |  |
| D<br>I<br>R  | 6   | Rent/facility costs  | 46,216.           | 0.  | 9,950.             | 56,166.  |  |  |  |  |  |  |
| R<br>E<br>C<br>T   | 7   | Food and beverages   | 45,000.           | 0.  | 64,425.            | 109,425.   |  |  |  |  |  |  |
| E<br>X<br>P  | 8   | Entertainment  | 0.                | 0.  | 500.               | 500.   |  |  |  |  |  |  |
| EXPENSES   | 9   | Other direct expenses  | 179,447.          | 0.  | 23,542.            | 202,989.   |  |  |  |  |  |  |
| Š  | 10  | 373,040.   |                   |   |                    |  |  |  |  |  |  |  |
|  | 11  |  |                   |   |                    |  |  |  |  |  |  |  |
| Par  | t III   | Gaming. Complete if the organizati \$15,000 on Form 990-EZ, line 6a. |                   |   |                    | -60,175.<br>ed more than   |  |  |  |  |  |  |
| R<br>E<br>V<br>E   |   |  | <b>(a)</b> Bingo  | (b) Pull tabs/instant<br>bingo/progressive<br>bingo | (c) Other gaming   | <b>(d)</b> Total gaming<br>(add column <b>(a)</b><br>through column <b>(c)</b> ) |  |  |  |  |  |  |

| R<br>E<br>V<br>E<br>N         |         |  | <b>(a)</b> Bingo           | bingo/progressive<br>bingo | (c) Other gaming    | (add column (a)<br>through column (c)) |
|-------------------------------|---------|--|----------------------------|----------------------------|---------------------|--|
| N<br>U<br>E                   | 1       | Gross revenue                                  |                            |                            | 55,280.             | 55,280.                                |
| F                             | 2       | Cash prizes                                    |                            |                            | 5,510.              | 5,510.                                 |
| EXPENSES                      | 3       | Noncash prizes                                 |                            |                            | 450.                | 450.                                   |
| R E<br>E N<br>C S<br>T E<br>S | 4       | Rent/facility costs                            |                            |                            | 0.                  | 0.                                     |
|                               | 5       | Other direct expenses                          |                            |                            | 2,100.              | 2,100.                                 |
|                               | 6       | Volunteer labor                                | Yes %<br>No                | Yes %<br>No                | X Yes 91.00 %<br>No |  |
|                               | 7       | Direct expense summary. Add lines 2 throu      | gh 5 in column (d)         |                            |                     | 8,060.                                 |
| _                             | 8       | Net gaming income summary. Subtract line       | 7 from line 1, column (d   | 1)                         |                     | 47,220.                                |
| 9                             | Ente    | er the state(s) in which the organization cond | ucts gaming activities:    | Illinois                   |                     |  |
|                               | ls th   | ne organization licensed to conduct gaming a   | ctivities in each of these | states?                    |                     |  |
| •                             |         |  |                            |                            |                     |  |
|                               |         | e any of the organization's gaming licenses r  | evoked, suspended or te    | erminated during the tax   | year?               | · Yes XNo                              |
| t                             | ) IT 'Y | es,' explain:                                  |                            |                            |                     |  |

Schedule G (Form 990 or 990-EZ) 2016

| Schedule        | G (Form 990 or 990-EZ) 2016 Big Shoulders Fund 3  | 6-34905     | 57        | Page 3 |
|-----------------|---|-------------|-----------|--------|
| 11 Doe          | s the organization conduct gaming activities with nonmembers?   | ]           | X Yes     | No     |
| 12 Is th<br>adm | e organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to<br>inister charitable gaming?   | · · · · [   | Yes       | XNo    |
|                 | cate the percentage of gaming activity conducted in: organization's facility  | . 13a       | C         | ).00%  |
| <b>b</b> An c   | outside facility  | . 13 b      | 100       | ).00%  |
| 14 Ente         | or the name and address of the person who prepares the organization's gaming/special events books and reco  | rds:        |           |        |
| Nam             | № ► Linda Rossi   |             |           |        |
|                 | ress ► <u>212 W Van Buren, Suite 900 Chicago, IL 60607</u>  |             |           |        |
|                 | s the organization have a contract with a third party from whom the organization receives gaming revenue? .<br>es,' enter the amount of gaming revenue received by the organization $rac{1}{2}$ , $s_{1}$ , $s_{2}$ , $s_{2}$ , $s_{3}$ , $s_{4}$ , $s_{5}$ , $s_{1}$ , $s_{2}$ , $s_{2}$ , $s_{3}$ , $s_{4}$ , $s_{5}$ , $s_{1}$ , $s_{2}$ , $s_{3}$ , $s_{4}$ , $s_{5}$ , |             | Yes       | XNo    |
| of a            | aming revenue retained by the third party $\Rightarrow$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$   |             |           |        |
|                 | es,' enter name and address of the third party:   |             |           |        |
|                 | ne ►  |             |           |        |
| Add             | ress ►  |             |           | <br>   |
| <b>16</b> Gan   | ning manager information:   |             |           |        |
| Nam             | Ne Joshua Hale  |             |           |        |
| Gan             | ning manager compensation 🎽 \$0.  |             |           |        |
| Des             | cription of services provided<br><br>President & CEO  |             |           |        |
| X               | Director/officer  |             |           |        |
| 17 Man          | datory distributions  |             |           |        |
| state           | e organization required under state law to make charitable distributions from the gaming proceeds to retain the gaming license?   |             | Yes       | XNo    |
|                 | er the amount of distributions required under state law to be distributed to other exempt organizations or spent  | n the       |           |        |
| Part IV         | nization's own exempt activities during the tax year <b>\$</b><br><b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, colur  | nne (iii) a | nd(y)     |        |
| Faitiv          | and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any ac<br>information. See instructions  |             | na (v),   |        |
|                 | Part II, Line 1 Gross Receipts: A fundraising dinne   |             |           | ı May  |
|                 | 2016, and contributions relating to this dinner conti   |             |           |        |
|                 | collected during 2017. Due to the significant nature  |             |           |        |
|                 | have included them in Part II this year, even though actually held in the prior fiscal year. These contri   |             |           |        |
|                 | been pledged as of June 30, 2016, and were not recorde  |             |           |        |
| Other           | that date.  |             | , , cirac | SP OI  |
|                 | Mr. Hale is not separately compensated for his oversi   | .ght of     | any ga    | aming  |
| Line 1          |   |             |           | -      |

| SCHEDULE I   |                        | G  | rants and Ot           | her Assistance t                              | to Organization              | IS.                              | I                  | OMB No. 1545-0047       |
|--|------------------------|--|------------------------|---|------------------------------|----------------------------------|--------------------|-------------------------|
| (Form 990)   |                        | Go   | 2016                   |   |                              |                                  |                    |                         |
|  |                        | Comp   | lete if the organizati | on answered 'Yes' on F<br>► Attach to Form 99 |                              | 21 or 22.                        |                    | Open to Public          |
| Department of the Treasury<br>Internal Revenue Service |                        | Information                                  | on about Schedule I    | (Form 990) and its instr                      | ructions is at www.irs.      | gov/form990.                     |                    | Inspection              |
| Name of the organization                               |                        |  |                        |   |                              |                                  | Employer identifi  | cation number           |
| Big Shoulders  |                        |  |                        |   |                              |                                  | 36-349055          | 57                      |
| Part I General In                                      | formation on G         | Frants and Assis                             | stance                 |   |                              |                                  |                    |                         |
| 1 Does the organiza<br>the selection criter            | tion maintain record   | s to substantiate the a grants or assistance | amount of the grants   | or assistance, the grantee                    | es' eligibility for the gran | ts or assistance, and            |                    | X Yes No                |
| 2 Describe in Part IV                                  | / the organization's p | procedures for monito                        | pring the use of grant | funds in the United States                    | 3.                           |                                  |                    |                         |
| Part II Grants and                                     | d Other Assista        | ance to Domesti                              | c Organizations        | and Domestic Gov                              | ernments. Compl              | ete if the organizat             | ion answered 'Ye   | s' on                   |
|  |                        |  |                        | re than \$5,000. Part                         |                              |                                  |                    |                         |
| 1 (a) Name and addre                                   |                        | (b) EIN                                      | (c) IRC section        | (d) Amount of cash grant                      | (e) Amount of non-cash       | (f) Method of valuation          | (g) Description of | (h) Purpose of grant    |
| or gove  | rnment                 |  | (if applicable)        | (a) Amount of cash grant                      | assistance                   | (book, FMV, appraisal,<br>other) | noncash assistance | or assistance           |
| (1) Academy of S                                       | t Benedict             |  |                        |   |                              | othory                           |                    |                         |
| 6020_SLafli  |                        |  |                        |   |                              |                                  |                    |                         |
| Chicago IL 6   |                        | 36-2171119                                   | 501c3                  | 246,861.                                      |                              |                                  |                    | PP DDG LA               |
| (2) Augustus_Tol                                       |                        | 50 21/1115                                   | 50105                  | 240,001.                                      |                              |                                  |                    | FF DDG LIA              |
| 7120_SCalu   |                        |  |                        |   |                              |                                  |                    |                         |
| Chicago IL 6   |                        | 36-2170979                                   | 501c3                  | 87,012.                                       |                              |                                  |                    | PP AE STEM              |
| (3) Bridgeport_Ca                                      |                        |  | 50105                  | 07,012.                                       |                              |                                  |                    |                         |
| <u>3700_S_Lowe</u> _                                   |                        |  |                        |   |                              |                                  |                    |                         |
| Chicago IL 6   |                        | 36-3377611                                   | 501c3                  | 11,673.                                       |                              |                                  |                    | STEM SM ED              |
| (4) Children of F                                      |                        |  | 50105                  | 11/0/31                                       |                              |                                  |                    |                         |
| 1900_W Taylo   |                        |  |                        |   |                              |                                  |                    |                         |
| Chicago IL 6   |                        | 36-2212711                                   | 501c3                  | 28,372.                                       |                              |                                  |                    | STEM EC SM              |
| (5) Christ the Ki                                      |                        |  |                        |   |                              |                                  |                    |                         |
| 9240_SHoyn   |                        |  |                        |   |                              |                                  |                    |                         |
| Chicago IL 6   |                        | 36-2170835                                   | 501c3                  | 10,714.                                       |                              |                                  |                    | IE                      |
| (6) Christ the Ki                                      | ing Jesuit Co          |  |                        |   |                              |                                  |                    |                         |
| <u>5058_WJack</u>                                      | son_Blvd               |  |                        |   |                              |                                  |                    |                         |
| Chicago IL 6   | 0644                   | 26-0556958                                   | 501c3                  | 16,459.                                       |                              |                                  |                    | CG SPG FR               |
| (7) <u>Cristo Rey</u>                                  | <u>Jesuit High</u>     | \$   |                        |   |                              |                                  |                    |                         |
| <u>1852_W22nd</u>                                      | <u>Place</u>           |  |                        |   |                              |                                  |                    |                         |
| Chicago IL 6   | 0608                   | 36-4067306                                   | 501c3                  | 5,100.  |                              |                                  |                    | FR SPG                  |
| <u>(8) De La Salle</u>                                 | Institute              |  |                        |   |                              |                                  |                    |                         |
| <u>3434_SMich</u>                                      | igan_Ave               |  |                        |   |                              |                                  |                    |                         |
| Chicago IL 6   | 0616                   | 36-2167047                                   | 501c3                  | 13,546.                                       |                              |                                  |                    | STEM FR                 |
|  |                        | , 0 0  |                        | e line 1 table                                |                              |                                  | •                  | 72                      |
| 3 Enter total number                                   | r of other organizatio | ons listed in the line 1                     | table                  |   |                              |                                  |                    | 0                       |
| BAA For Paperwork R                                    | eduction Act Notic     | e, see the Instructio                        | ns for Form 990.       |   | TEEA3901                     | 11/03/16                         | Schedu             | ıle I (Form 990) (2016) |

# Continuation Sheet for Schedule I (Form 990)

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

...

Continuation Page 1 of 7

2016

| Name of the organization  |                 |                                    |                             |                                       |  | Employer identifie                          | cation number                            |
|---|-----------------|------------------------------------|-----------------------------|---------------------------------------|--|---|--|
| Big Shoulders Fund  |                 |                                    |                             |                                       |  | 36-349055                                   | 57                                       |
| Part II Continuation of Grants a                                | nd Other Assist | ance to Domesti                    | c Organizations an          | d Domestic Gove                       | rnments. (Schedu   | ule I (Form 990), F                         | Part II.)                                |
| (a) Name and address of organization<br>or government           | <b>(b)</b> EIN  | (c) IRC section<br>(if applicable) | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of<br>noncash<br>assistance | (h) Purpose of<br>grant or<br>assistance |
| <u>DePaul_Academy</u>   | _               |                                    |                             |                                       |  |   |  |
| _ <u>3633 N_California</u>                                      | _               |                                    |                             |                                       |  |   |  |
| Chicago IL 60618  | 36-2182169      | 501c3                              | 7,028.                      |                                       |  |   | AE FR DDG                                |
| _ <u>Epiphany School</u>  | _               |                                    |                             |                                       |  |   |  |
| _ <u>4223 W_25th_St</u>   | _               |                                    |                             |                                       |  |   |  |
| Chicago IL 60623  | 36-2412597      | 501c3                              | 204,150.                    |                                       |  |   | DDG SM LA                                |
| <u>Holy Angels School</u>                                       | _               |                                    |                             |                                       |  |   |  |
| _ <u>_750 E_40th_St</u>   | _               |                                    |                             |                                       |  |   |  |
| Chicago IL 60653  | 36-2747560      | 501c3                              | 441,294.                    |                                       |  |   | OP PP LA                                 |
| <u> Holy Trinity High School</u>                                | _               |                                    |                             |                                       |  |   |  |
| <u> 1443 W Division St</u>                                      | _               |                                    |                             |                                       |  |   |  |
| Chicago IL 60642  | 36-2171703      | 501c3                              | 177,286.                    |                                       |  |   | DDG STEM CG                              |
| <u>Immaculate Conception Sch</u>                                | L               |                                    |                             |                                       |  |   |  |
| <u>   8739  S  Exchange                                    </u> | _               |                                    |                             |                                       |  |   |  |
| Chicago IL 60617  | 36-3310936      | 501c3                              | 26,599.                     |                                       |  |   | STEM SM ED                               |
| Josephinum_Academy  | _               |                                    |                             |                                       |  |   |  |
| <u>_1501 N_Oakley</u>   | _               |                                    |                             |                                       |  |   |  |
| Chicago IL 60622  | 36-2167764      | 501c3                              | 37,205.                     |                                       |  |   | AE FR CG                                 |
| <u>_ Leo High School </u>                                       | _               |                                    |                             |                                       |  |   |  |
| <u>_ 7901 S_Sangamon St</u>                                     | _               |                                    |                             |                                       |  |   |  |
| Chicago IL 60620  | 36-2182061      | 501c3                              | 418,072.                    |                                       |  |   | OP CG DDG                                |
| <u>_ Maternity_BVM_School </u>                                  | _               |                                    |                             |                                       |  |   |  |
| <u>_ 1537 N Lawndale Avenue _</u>                               | _               |                                    |                             |                                       |  |   |  |
| Chicago IL 60651  | 36-2171722      | 501c3                              | 130,734.                    |                                       |  |   | PP STEM AE                               |
| <u>_ Most Blessed Trinity </u>                                  | _               |                                    |                             |                                       |  |   |  |
| <u>510_Grand_Ave</u>  | _               |                                    |                             |                                       |  |   |  |
| Waukegan IL 60085   | 47-0955784      | 501C3                              | 55,574.                     |                                       |  |   | PP SPG ED                                |
| <u>_ Northside Catholic Academ</u>                              | L               |                                    |                             |                                       |  |   |  |
| _ 6216 N. Glenwood Avenue                                       |                 |                                    |                             |                                       |  |   |  |
| <u>Chicago IL 60660</u>   | -<br>36-3956710 | 501c3                              | 25,312.                     |                                       |  |   | STEM ED SM                               |

TEEA4001 11/03/16

Schedule I Cont (Form 990) 2016

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

Continuation Page 2 of 7

2016

| Name of the organization  |                 |                                    |                             |                                       |  | Employer identifi                           | cation number                            |
|---|-----------------|------------------------------------|-----------------------------|---------------------------------------|--|---|--|
| Big Shoulders Fund  |                 |                                    |                             |                                       |  | 36-34905                                    | 57                                       |
| Part II Continuation of Grants ar                                   | nd Other Assist | ance to Domesti                    | c Organizations an          | d Domestic Gover                      | nments. (Sched   |   |  |
| (a) Name and address of organization<br>or government               | (b) EIN         | (c) IRC section<br>(if applicable) | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of<br>noncash<br>assistance | (h) Purpose of<br>grant or<br>assistance |
| Our_Lady_of_Grace_School_   |                 |                                    |                             |                                       |  |   |  |
| 2446_N_Ridgeway_Ave   |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60647  | 36-2170886      | 501c3                              | 53,219.                     |                                       |  |   | PP SM LA                                 |
| <u>_Our Lady_of_Guadalupe_Sch</u>                                   |                 |                                    |                             |                                       |  |   |  |
| 9050 S_Burley_Ave   |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60617  | 36-2743254      | 501c3                              | 64,638.                     |                                       |  |   | PP STEM CG                               |
| <u>_Our_Lady_of_Tepeyac_Elem</u><br>_2235_S_Albany                  |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60623  | 36-3409095      | 501c3                              | 332,131.                    |                                       |  |   | OP PP LA                                 |
| <u>_Our_Lady_of_Tepeyac_High</u><br>_2228_S_Whipple_St              |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60623  | 36-4202108      | 501c3                              | 111,096.                    |                                       |  |   | OP STEM SPG                              |
| _ Our Lady_of_the_Snows_Sch<br>_ 4810_S_Leamington_Ave              |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60638  | 36-2401758      | 501c3                              | 14,899.                     |                                       |  |   | IE SM SPG                                |
| _ Pope John Paul II School<br>_ 4325 S Richmond<br>Chicago IL 60632 | 36-2170859      | 501c3                              | 241,783.                    |                                       |  |   | PP LA IE                                 |
| Queen_of_the_Universe   | 30 21/0035      | 50105                              | 241,705.                    |                                       |  |   | FF DA IL                                 |
| <u>7130 S Hamlin Avenue</u><br>Chicago IL 60629                     | 36-2583566      | 501c3                              | 51,619.                     |                                       |  |   | AE DDG MO                                |
| Sacred_Heart_School   | 30 2303300      | 50105                              | 51,019.                     |                                       |  |   | AE DDO MO                                |
| 2906_E_96th_Street  |                 | 1                                  |                             |                                       |  |   |  |
| Chicago IL 60617  | 36-2171734      | 501c3                              | 37,482.                     |                                       |  |   | LA STEM SM                               |
| <u>San Miguel School</u>  |                 |                                    |                             |                                       |  |   |  |
| <u>1949 W. 48th St</u>  | 26 4280806      | F 0 1 0                            | 22 550                      |                                       |  |   |  |
| Chicago IL 60609  | 36-4378726      | 501c3                              | 33,550.                     |                                       |  |   | OP ED                                    |
| <u>Santa Lucia Elementary Sc</u>                                    |                 |                                    |                             |                                       |  |   |  |
| _ <u>3017 S. Wells Street</u>                                       | 26 2171060      | F 0 1 - 2                          | 206 205                     |                                       |  |   |  |
| Chicago IL 60616  | 36-2171069      | 501c3                              | 306,325.                    |                                       |  | Cabadula I                                  | OP MO SM<br>Cont (Form 990) 2016         |

TEEA4001 11/03/16

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

Continuation Page 3 of 7

| Name of the organization                              |                 |                                    |                             |                                       |  | Employer identifi                           | cation number                            |
|---|-----------------|------------------------------------|-----------------------------|---------------------------------------|--|---|--|
| Big Shoulders Fund                                    |                 |                                    |                             |                                       |  | 36-34905                                    | 57                                       |
| Part II Continuation of Grants ar                     | nd Other Assist | ance to Domesti                    | c Organizations ar          | d Domestic Gove                       | nments. (Sched   |   |  |
| (a) Name and address of organization<br>or government | <b>(b)</b> EIN  | (c) IRC section<br>(if applicable) | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of<br>noncash<br>assistance | (h) Purpose of<br>grant or<br>assistance |
| <u>St_Agnes_of_Bohemia_Schoo</u>                      |                 |                                    |                             |                                       |  |   |  |
| _ <u>2643 S Central Park Avenu</u>                    |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60623                                      | 36-3552287      | 501c3                              | 36,358.                     |                                       |  |   | EC IE SM                                 |
|   |                 |                                    |                             |                                       |  |   |  |
| _ <u>9037_S_Harper_Ave</u>                            |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60619                                      | 36-2170926      | 501c3                              | 212,653.                    |                                       |  |   | PP OP LA                                 |
| <u>St Angela School</u>                               |                 |                                    |                             |                                       |  |   |  |
| <u>_1332 N_Massasoit Avenue</u>                       |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60651                                      | 36-4091553      | 501c3                              | 163,249.                    |                                       |  |   | PP STEM DDG                              |
| <u>St Ann School</u>                                  |                 |                                    |                             |                                       |  |   |  |
| _ <u>2211 W_18th Pl</u>                               |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60608                                      | 36-2284297      | 501c3                              | 30,383.                     |                                       |  |   | STEM LA ED                               |
| <u>_St_Barbara_School</u>                             |                 |                                    |                             |                                       |  |   |  |
| <u>_2867 S_Throop_St</u>                              |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60608                                      | 36-2170943      | 501c3                              | 17,977.                     |                                       |  |   | STEM SM PP                               |
| <u>St_Bartholomew_School</u>                          |                 |                                    |                             |                                       |  |   |  |
| <u>_ 4941 W. Patterson Avenue</u>                     |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60641                                      | 36-2170946      | 501c3                              | 38,700.                     |                                       |  |   | PP SD EC                                 |
| <u>_ St_Bede_the_Venerable</u>                        |                 |                                    |                             |                                       |  |   |  |
| <u>_4440 W. 83rd Street</u>                           |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60652                                      | 36-4055633      | 501c3                              | 6,999.                      |                                       |  |   | STEM SM MO                               |
| <u>_ St_Benedict High School</u>                      |                 |                                    |                             |                                       |  |   |  |
| <u>_3900 N_Leavitt_Street_</u>                        |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60618                                      | 36-2251918      | 501c3                              | 6,114.                      |                                       |  |   | DDG SPG                                  |
| <u>_St_Bruno_School</u>                               |                 |                                    |                             |                                       |  |   |  |
| _ <u>4839 S_Harding_Avenue</u>                        |                 |                                    |                             |                                       |  |   |  |
| Chicago IL 60632                                      | 36-2170961      | 501c3                              | 39,964.                     |                                       |  |   | IE SPG STEM                              |
| _ <u>St_Catherine_of_Siena,_St</u>                    |                 |                                    |                             |                                       |  |   |  |
| <u>27_WWashington</u>                                 |                 |                                    |                             |                                       |  |   |  |
| Oak Park IL 60302                                     | 36-2170969      | 501c3                              | 47,258.                     |                                       |  | <u> </u>                                    | LA AE ED                                 |

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Schedule I Cont (Form 990) 2016

2016

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

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2016

| Name of the organization   |                  |                                    |                             |                                       |  | Employer identified                         | cation number                            |
|--|------------------|------------------------------------|-----------------------------|---------------------------------------|--|---|--|
| Big Shoulders Fund   |                  |                                    |                             |                                       |  | 36-34905                                    | 57                                       |
| Part II Continuation of Grants ar  | nd Other Assista | ance to Domesti                    | c Organizations an          | d Domestic Gove                       | rnments. (Schedu   | ıle I (Form 990), I                         | Part II.)                                |
| (a) Name and address of organization<br>or government                            | <b>(b)</b> EIN   | (c) IRC section<br>(if applicable) | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of<br>noncash<br>assistance | (h) Purpose of<br>grant or<br>assistance |
| _ <u>St_Constance_School</u>   |                  |                                    |                             |                                       |  |   |  |
| _ <u>5841 W. Strong_St</u>   |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60630   | 36-3965141       | 501c3                              | 102,961.                    |                                       |  |   | PP ED SM                                 |
| St_Ethelreda_School<br>8734_S_Paulina  |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60620   | 36-2182112       | 501c3                              | 390,576.                    |                                       |  |   | OP PP STEM                               |
| <u>St Francis DeSales High S</u><br><u>10155 S Ewing Ave</u><br>Chicago IL 60617 | 36-2435876       | 501c3                              | 1,072,666.                  |                                       |  |   | ΟΡ ΡΡ ΜΟ                                 |
|  | 36-2435876       | 50103                              | 1,072,666.                  |                                       |  |   | OP PP MO                                 |
| _ <u>St_Gabriel_School</u>   |                  | 501 2                              | 02,100                      |                                       |  |   |  |
| Chicago IL 60609<br>St_Gall School   | 36-2707503       | 501c3                              | 23,198.                     |                                       |  |   | STEM SM ED                               |
| <u>St_Gall_School</u><br><u>5515_S_Sawyer_Ave</u><br>Chicago IL 60629            | 36-2704905       | 501c3                              | 34,174.                     |                                       |  |   | PP EC STEM                               |
| St_Genevieve_School  | 30-2704903       | 50105                              | 54,174.                     |                                       |  |   | PP EC SIEM                               |
| <u>4854_W_Montana_St</u><br>Chicago IL 60639                                     | 36-2171008       | 501c3                              | 87,270.                     |                                       |  |   | PP LA EC                                 |
| St_Helen_School  |                  |                                    | - ,                         |                                       |  |   |  |
| 2347_W_Augusta_Blvd  |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60622   | 36-2373447       | 501c3                              | 99,316.                     |                                       |  |   | PP STEM SD                               |
| _ <u>St_John_Berchmans_School</u><br>_ <u>2511_W_Logan_Blvd</u>                  |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60647   | 36-2171034       | 501c3                              | 36,477.                     |                                       |  |   | OP SM MO                                 |
| <u>_St_John_DeLaSalle_Academy</u>  |                  |                                    |                             |                                       |  |   |  |
| _ <u>10212_S_Vernon_Ave</u>  |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60628   | 36-2171032       | 501c3                              | 256,140.                    |                                       |  |   | OP STEM PP                               |
| <u>St_Malachy_School</u>   |                  |                                    |                             |                                       |  |   |  |
| <u>_ 2252 W_Washington_Blvd_</u>   |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60612   | 36-4091553       | 501c3                              | 127,837.                    |                                       |  | 0   | PP STEM IE                               |

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

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| Name of the organization   |                  |                                    |                             |                                       |  | Employer identifi                           | cation number                            |
|--|------------------|------------------------------------|-----------------------------|---------------------------------------|--|---|--|
| Big Shoulders Fund   |                  |                                    |                             |                                       |  | 36-34905                                    | 57                                       |
| Part II Continuation of Grants ar  | nd Other Assista | ance to Domesti                    | c Organizations an          | d Domestic Gover                      | rnments. (Schedu   | ule I (Form 990), F                         | Part II.)                                |
| (a) Name and address of organization or government                                       | <b>(b)</b> EIN   | (c) IRC section<br>(if applicable) | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of<br>noncash<br>assistance | (h) Purpose of<br>grant or<br>assistance |
| <u>St Margaret of Scotland S</u><br><u>9833 S Throop St</u><br>Chicago IL 60643          | 36-2367986       | 501c3                              | 324,865.                    |                                       |  |   | OP PP DDG                                |
| <u>St Mary of the Angels Sch</u><br><u>1810 N Hermitage</u><br>Chicago IL 60622          | 36-2171072       | 501c3                              | 99,423.                     |                                       |  |   | PP STEM SM                               |
| _ <u>St_Mary_Star_of_the_Sea_S</u><br>_ <u>6424_S_Kenneth_Avenue</u><br>Chicago_IL_60629 | 36-2848256       | 501c3                              | 284,457.                    |                                       |  |   | OP EC LA                                 |
| _ <u>St_Mary_of_the_Lake_Schoo</u><br>_ <u>1026 W. Buena_Avenue</u><br>Chicago_IL_60613  | 36-2171076       | 501c3                              | 77,345.                     |                                       |  |   | PP ED SM                                 |
| <u>St Matthias/Transfigurati</u><br><u>4910 N Claremont</u><br><u>Chicago IL 60625</u>   | 36-2171089       | 501c3                              | 27,703.                     |                                       |  |   | IE STEM SM                               |
| St_Michael_School<br>8231_S_South_Shore_Dr<br>Chicago_IL_60617                           | 36-2171093       | 501c3                              | 190,209.                    |                                       |  |   | OP AE STEM                               |
| <u>St Nicholas of Tolentine</u><br><u>3741 W_62nd St</u><br><u>Chicago IL 60629</u>      | 36-2182132       | 501c3                              | 163,148.                    |                                       |  |   | STEM IE SPG                              |
| <u>St Nicholas Unkrainian Ca</u><br>2200 W_Rice_Street<br>Chicago IL 60622               | 13-1026995       | 501c3                              | 63,211.                     |                                       |  |   | STEM LA IE                               |
| <u>St_Philip_Neri_School</u><br>2110_E_72nd_St<br>Chicago_IL_60649                       | 36-2171115       | 501c3                              | 209,893.                    |                                       |  |   | OP PP LA                                 |
| <u>St Pius V School</u><br><u>1919 S Ashland Ave</u><br>Chicago IL 60608                 | 36-2240477       | 501c3                              | 12,073.                     |                                       |  |   | STEM SM FR                               |

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

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| Name of the organization                                       |                  |                                    |                             |                                       |  | Employer identifie                          | cation number                            |
|--|------------------|------------------------------------|-----------------------------|---------------------------------------|--|---|--|
| Big Shoulders Fund   |                  |                                    |                             |                                       |  | 36-349055                                   | 57                                       |
| Part II Continuation of Grants ar                              | nd Other Assista | ance to Domesti                    | c Organizations an          | d Domestic Gover                      | rnments. (Schedu   | le I (Form 990), F                          | Part II.)                                |
| (a) Name and address of organization or government             | <b>(b)</b> EIN   | (c) IRC section<br>(if applicable) | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of<br>noncash<br>assistance | (h) Purpose of<br>grant or<br>assistance |
| <u>St_Procopius_School</u>                                     |                  |                                    |                             |                                       |  |   |  |
| _ <u>1625 S_Allport_St</u>                                     |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60608   | 36-3352367       | 501c3                              | 138,673.                    |                                       |  |   | PP LA OP                                 |
| <u>St Sabina School</u>  |                  |                                    |                             |                                       |  |   |  |
| <u>_7801 S_Throop_St</u>                                       |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60620   | 36-2171123       | 501c3                              | 80,064.                     |                                       |  |   | PP CG FR                                 |
| <u>St Stanislaus Kostka Scho</u><br>1255 N_Noble St            |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60642   | 36-2171128       | 501c3                              | 20,420.                     |                                       |  |   | STEM SM                                  |
| <u>St_Sylvester_School</u><br><u>3027_W_Palmer_Sq</u>          |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60647   | 36-2488067       | 501c3                              | 28,321.                     |                                       |  |   | PP EC SD                                 |
| St_Symphorosa_School<br>6125_SAustin_Ave                       |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60638   | 36-2171135       | 501c3                              | 9,335.                      |                                       |  |   | STEM SM                                  |
| <u>St_Therese_School</u>                                       |                  | 501 0                              | 20.450                      |                                       |  |   |  |
| Chicago IL 60616   | 36-2240479       | 501c3                              | 38,459.                     |                                       |  |   | SM STEM EC                               |
| St_Thomas_of_Canterbury_<br>4827_N. <u>Kenmore_Avenue_</u>     |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60640   | 36-2240480       | 501c3                              | 119,704.                    |                                       |  |   | PP LA SD                                 |
| <u>St Thomas the Apostle Sch</u><br><u>5467 S Woodlawn Ave</u> |                  |                                    |                             |                                       |  |   |  |
| Chicago IL 60615   | 36-2171144       | 501c3                              | 57,279.                     |                                       |  |   | PP EC STEM                               |
| St_Viator_Elem_School<br>4140_W_Addison_St                     |                  |                                    |                             |                                       |  |   |  |
| <u>Chicago IL 60641</u>  | 36-2171148       | 501c3                              | 9,583.                      |                                       |  |   | EC SM ED                                 |
| St_William_School<br>_2559 N_Sayre_Avenue                      |                  |                                    |                             |                                       |  |   |  |
| <u>Chicago</u> IL 60707  | 36-2171154       | 501c3                              | 136,720.                    |                                       |  |   | OP MO STEM                               |
| Chicago II 00/07   | 100 21/1104      | 100100                             | 1 130,720.                  |                                       | 1  | 0   | Cont (Form 000) 2016                     |

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

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| Name of the organization   |                  |                                    |                             |                                       |  | Employer identified                         | cation number                            |
|--|------------------|------------------------------------|-----------------------------|---------------------------------------|--|---|--|
| Big Shoulders Fund   |                  |                                    |                             |                                       |  | 36-349055                                   | 57                                       |
| Part II Continuation of Grants ar  | nd Other Assista | ance to Domesti                    | c Organizations an          | d Domestic Gover                      | rnments. (Schedu   | ule I (Form 990), F                         | Part II.)                                |
| (a) Name and address of organization<br>or government                                      | <b>(b)</b> EIN   | (c) IRC section<br>(if applicable) | (d) Amount of cash<br>grant | (e) Amount of non-<br>cash assistance | (f) Method of<br>valuation (book,<br>FMV, appraisal,<br>other) | (g) Description of<br>noncash<br>assistance | (h) Purpose of<br>grant or<br>assistance |
| Visitation_School<br>900_W_Garfield_Blvd<br>Chicago_IL_60609                               | 36-3648506       | 501c3                              | 123,103.                    |                                       |  |   | IE LA PP                                 |
| <u>Chicago Historical Societ</u><br><u>1601 N. Clark Street</u><br><u>Chicago IL 60614</u> | 36-2167004       | 501c3                              | 10,000.                     |                                       |  |   | FR                                       |
| _ <u>HFS Scholars</u><br>_ <u>1074 W. Taylor St #201 _<br/>Chicago IL 60607</u>            | 36-3922345       | 501c3                              | 7,500.                      |                                       |  |   | FR                                       |
| _ Mobile_CARE Foundation_<br>_ 321 N_Loomis, Suite 202<br>Chicago IL 60607                 | 36-4203198       | 501c3                              | 12,500.                     |                                       |  |   | OP                                       |
|  |                  |                                    |                             |                                       |  |   |  |
|  |                  |                                    |                             |                                       |  |   |  |
|  |                  |                                    |                             |                                       |  |   |  |
|  |                  |                                    |                             |                                       |  |   |  |
|  |                  |                                    |                             |                                       |  |   |  |
|  |                  |                                    |                             |                                       |  |   |  |
|  | •                |                                    | TEE 14001 11/02/16          | 1                                     | •  | · <u> </u>                                  | Cont (Form 990) 20                       |

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BAA

(e) Method of valuation (book, (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (f) Description of noncash assistance recipients cash grant noncash assistance FMV, appraisal, other) 1 Scholarships to elementary and high school students 4,259 7,575,135 10 2 Scholarships to teachers - leadership/teacher development 31,818. 6 3 Scholarships to college students 40,000. 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. Pt I Line 2 Procedures for monitoring the use of grant funds differ based on the type of grant awarded. Schools eligible for support are reviewed each year to ensure they meet outlined criteria (in City of Chicago, student population has over 20% who qualify for free or reduced lunch and participate in Title I programs). Overall schools report annually on a number of indicators including financial viability, enrollment, student academic performance, and demographic characteristics of students served. Renewable scholarship awards include regular progress monitoring and reporting by the individual schools on students. Patrons Program funds are only distributed upon agreement of Patron, Principal and Big Shoulders, and requires substantiation through receipting or accounting of use of funds. Programmatic and capital support requires a minimum of annual reports on use of funds and demonstrated measurable objectives met through the funding. Big Shoulders Fund staff members regularly visit (at least 2-5 times each year) schools and meet with leadership to ensure schools are using funds as indicated by the requirements of each type of support. Although Big Shoulders Fund prepares its financial statements on the accrual basis, Schedule I Part Other II has been prepared on the cash basis. We believe 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 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 year. See the summary below which shows the reconciliation between grants reported on Schedule I and total grants

# Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

36-3490557

#### Continuation of Part IV – Supplemental Information

paid per Part IX, Line 1.

| Other | Reconciliation from Cash to Accrual Basis:                   |            |
|-------|--|------------|
| Other | Grants paid per Schedule I, Part II                          | 8,263,991  |
| Other | Total grants under \$5,000 paid, but not reported on Part II | 38,156     |
| Other | New multi-year grants pledged                                | 2,028,830  |
| Other | Payments made on previous pledges                            | -3,714,737 |
| Other | Previous year grant pledge withdrawn                         | -17,279    |
| Other | Net present value adjustment on grants payable               | 7,700      |
| Other | Total Grant Expense per Part IX, Line 1                      | 6,606,661  |

Other Part II, Line 1a: Key for grant purpose - column (h): AE - Academic enrichment; AR - Alumni Records; CG - Capital Grant; DDG - Donor Designated Grant; EC - Early Childhood Program; ED - Extended Day Program; FR - Contribution to fund-raising event; IE - Inclusive Education Program; LA - Leadership Award Program; MO - Marketing/Operating Assistance; OP - Operating Grant; PD - Professional Development Program; PP - Patrons Program; SD - Service Days; SM - Stock Market Program; SPG -Special Program Grant; STEM - Science, Technology, Engineering, Mathematics;

| SCHEDULE J   | Compensation  | OMB No. 1  | OMB No. 1545-0047 |        |      |
|--|---|--|-------------------|--------|------|
| (Form 990)   | For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees   |  |                   |        |      |
|  | Complete if the organization answered   | <sup>s</sup> 20                                  |                   |        |      |
| Department of the Treasury<br>Internal Revenue Service | Attach to F Information about Schedule J (Form 990) and   | Open to<br>Inspe                                 |                   | С      |      |
| Name of the organization                               |   | Employer identi                                  | •                 |        |      |
| Big Shoulders  | Fund  | 36-34905   | 57                |        |      |
| Part I Question  | s Regarding Compensation  |  |                   |        |      |
|  |   |  |                   | Yes    | No   |
|  | priate box(es) if the organization provided any of the follore 1a. Complete Part III to provide any relevant information  |  | rt                |        |      |
| First-class o  | r charter travel  | using allowance or residence for personal use    |                   |        |      |
| Travel for co  | mpanions Pay  | yments for business use of personal residence    |                   |        |      |
| X Tax indemn   | fication and gross-up payments X Hea  | alth or social club dues or initiation fees      |                   |        |      |
| Discretionar   | / spending account  | rsonal services (such as, maid, chauffeur, chef) |                   |        |      |
|  | es on line 1a are checked, did the organization follow a v<br>r provision of all of the expenses described above? If 'N   |  | 1b                | х      |      |
|  |   |  |                   |        |      |
|  | tion require substantiation prior to reimbursing or allowin<br>cers, including the CEO/Executive Director, regarding th   |  | 2                 | 37     |      |
|  |   |  |                   | X      |      |
| CEO/Executive  | any, of the following the filing organization used to estal<br>Director. Check all that apply. Do not check any boxes for<br>asation of the CEO/Executive Director, but explain in Pa | or methods used by a related organization to     |                   |        |      |
| X Compensati   | on committee Written employment contract  |  |                   |        |      |
| Independen   | compensation consultant X Compensation survey or study  |  |                   |        |      |
| X Form 990 of  | other organizations   | proval by the board or compensation committee    | )                 |        |      |
|  |   |  |                   |        |      |
| organization or a                                      | did any person listed on Form 990, Part VII, Section A, I related organization:   |  |                   |        |      |
|  | ance payment or change-of-control payment?  |  |                   |        | Х    |
|  | receive payment from, a supplemental nonqualified retir   |  |                   |        | Х    |
| 1 /  | receive payment from, an equity-based compensation a  | 0  | 4c                |        | X    |
| If Yes to any of                                       | lines 4a-c, list the persons and provide the applicable an  | nounts for each item in Part III.                |                   |        |      |
| Only section 50  | 1(c)(3), 501(c)(4), and 501(c)(29) organizations must   | complete lines 5-9.                              |                   |        |      |
| 5 For persons liste<br>contingent on th                | d on Form 990, Part VII, Section A, line 1a, did the organ  | nization pay or accrue any compensation          |                   |        |      |
| Ũ  | ?   |  | 5a                |        | х    |
| <b>b</b> Any related orga                              | nization?   |  | 5b                |        | Х    |
| If 'Yes' on line 5                                     | or 5b, describe in Part III.  |  |                   |        |      |
| contingent on th                                       | d on Form 990, Part VII, Section A, line 1a, did the organ<br>e net earnings of:  |  |                   |        |      |
|  | ?   |  |                   |        | Х    |
|  |   |  | 6b                |        | Х    |
|  | or 6b, describe in Part III.  |  |                   |        |      |
| 7 For persons lister<br>payments not de                | d on Form 990, Part VII, Section A, line 1a, did the organ<br>scribed on lines 5 and 6? If 'Yes,' describe in Part III  | nization provide any nonfixed                    | 7                 | Х      |      |
| to the initial cont                                    | ts reported on Form 990, Part VII, paid or accrued pursu<br>act exception described in Regulations section 53.4958<br>in Part III   | -4(a)(3)?  | 8                 |        | х    |
| 9 If 'Yes' on line 8.                                  | did the organization also follow the rebuttable presumpt 6(c)?  | ion procedure described in Regulations           |                   |        |      |
|  | Reduction Act Notice, see the Instructions for Form   |  | nedule J (Forn    | n 990) | 2016 |

#### 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.

|      | (B) Breakdown o          | of W-2 and/or 1099-MIS  | C compensation  | (C) Botiromont   |   | (E) Total of   | (F) Compensation   |
|------|--------------------------|---|---|--|---|--|--|
|      | (i) Base<br>compensation | (ii) Bonus & incentive compensation   | (iii) Other<br>reportable<br>compensation   | and other<br>deferred<br>compensation  | benefits  | columns(B)(i)-(D)  | in column (B)<br>reported as<br>deferred on prior<br>Form 990  |
| (i)  | <u>408,571.</u>          | 21,013.   | 8,675.  | <u>4,750.</u>  | 28,113.   | <u>471,122.</u>  | 0.   |
| (ii) | 0.                       | 0.  | 0.  | 0.   | 0.  | 0.   | 0.   |
| (i)  | 167,064.                 | <u> </u>  | 1, <u>392.</u>  | <u>7,241</u> .   | <u>13,847.</u>  | <u>198,164.</u>  | 0.   |
| (ii) | 0.                       | 0.  | 0.  | 0.   | 0.  | 0.   | 0.   |
| (i)  | <u>157,465.</u>          | <u>8,458.</u>   | <u>638.</u>   | <u>7,105.</u>  | <u>28,138.</u>  | <u>201,804.</u>  | 0.   |
| (ii) | 0.                       | 0.  | 0.  | 0.   | 0.  | 0.   | 0.   |
| (i)  | <u>155,905.</u>          | <u>8,458.</u>   | <u>876.</u>   | <u>7,105.</u>  | <u>29,577.</u>  | <u>201,921.</u>  | 0.   |
| (ii) | 0.                       | 0.  | 0.  | 0.   | 0.  | 0.   | 0.   |
| (i)  | <u>160,528.</u>          | <u> </u>  | 1, <u>350.</u>  | <u>6,795.</u>  | 8,066.  | <u>184,828.</u>  | 0.   |
| (ii) | 0.                       | 0.  | 0.  | 0.   | 0.  | 0.   | 0.   |
| (i)  | <u>166,276.</u>          | <u> </u>  | 642.  | <u>7,048</u> .   | 8,582.  | <u>190,938.</u>  | 0.   |
| (ii) | 0.                       | 0.  | 0.  | 0.   | 0.  | 0.   | 0.   |
| (i)  |                          |   |   |  |   |  |  |
| (ii) |                          |   |   |  |   |  |  |
| (i)  |                          |   |   |  |   |  |  |
| • •  |                          |   |   |  |   |  |  |
|      |                          |   |   |  |   |  |  |
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| • •  |                          |   |   |  |   |  |  |
|      |                          |   |   |  |   |  |  |
| (ii) |                          |   |   |  |   |  |  |
| (i)  |                          |   |   |  |   |  |  |
| (ii) |                          |   |   |  |   |  |  |
|      |                          |   |   |  |   |  |  |
| (ii) |                          |   |   |  |   |  |  |
|      |                          |   |   |  |   |  |  |
| • •  |                          |   |   |  |   |  |  |
| (i)  |                          |   |   |  |   | +  |  |
| • •  |                          |   |   |  |   |  |  |
|      |                          |   |   |  |   |  |  |
| (ii) |                          |   |   |  |   |  |  |
|      |                          | (i) Base<br>compensation<br>(i) $\_ 408, 571.$ .<br>(ii) $0.$<br>(i) $\_ 167, 064.$ .<br>(ii) $0.$<br>(i) $\_ 157, 465.$ .<br>(ii) $0.$<br>(i) $\_ 155, 905.$ .<br>(ii) $0.$<br>(i) $\_ 160, 528.$<br>(ii) $0.$<br>(i) $\_ 166, 276.$ .<br>(ii) $0.$<br>(i) $.$ $.$ $.$ $.$ $.$ $.$ $.$ $.$ $.$ $.$ | (i) Base compensation       (ii) Bonus & incentive compensation         (ii) $\_ 408, 571.$ $\_ 21, 013.$ (ii) $\_ 167, 064.$ $\_ 8, 620.$ (ii) $\_ 157, 465.$ $\_ 8, 458.$ (ii) $\_ 155, 905.$ $\_ 8, 458.$ (ii) $\_ 0.$ $0.$ (i) $\_ 160, 528.$ $\_ 8, 089.$ (ii) $\_ 0.$ $0.$ (ii) $\_ 166, 276.$ $\_ 8, 390.$ (ii) $\_ 0.$ $0.$ (ii) $\_ 0.$ $0.$ (ii) $\_ 0.$ $0.$ (ii) $\_ 166, 276.$ $\_ 8, 390.$ (ii) $\_ 0.$ $0.$ (ii) $\_ 0.$ $0.$ (ii) $\_ 0.$ $0.$ (ii) $\_ 0.$ $0.$ (iii) $\_ 0.$ $0.$ (iii) $\_ 0.$ $0.$ (iii) $\_ 0.$ $0.$ (iii) $\_ 0.$ $\_ 0.$ | compensation       (i) Boilds & incentive compensation       reportable compensation         (i) $= 408, 571.$ $= 21, 013.$ $= -8, 675.$ (ii) $0.$ $0.$ $0.$ (ii) $= 167, 064.$ $= 8, 620.$ $= 1, 392.$ (iii) $0.$ $0.$ $0.$ (ii) $= 157, 465.$ $= 8, 458.$ $= 638.$ (iii) $0.$ $0.$ $0.$ (i) $= 155, 905.$ $= 8, 458.$ $= 876.$ (ii) $0.$ $0.$ $0.$ (i) $= 160, 528.$ $= 8, 089.$ $= -1, 350.$ (ii) $0.$ $0.$ $0.$ (ii) $0.$ $0.$ $0.$ (ii) $0.$ $0.$ $0.$ (iii) $0.$ $0.$ $0.$ <td>(i) Base compensation       (ii) Bonus &amp; incentive compensation       (iii) Other reportable compensation       (i) CP Retirement and other deferred compensation         (i)</td> <td>(i) Base<br/>compensation         (ii) Onus &amp; incentive<br/>compensation         (iii) Other<br/>reportable<br/>compensation         (ii) Other<br/>reportable<br/>compensation         (iii) Other<br/>reportable<br/>compensation         (iii) Other<br/>reportable<br/>compensation         (iii) Other<br/>reportable<br/>compensation         (iii) Other<br/>reportable<br/>compensation         (iii) Cher<br/>reportable<br/>compensation         (iiii) Cher<br/>reportable<br/>compensationcompensation&lt;</td> <td>CONDENSION         (ii) Bonus &amp; incentive<br/>compensation         (iii) Other<br/>compensation         (iiii) Oth</td> | (i) Base compensation       (ii) Bonus & incentive compensation       (iii) Other reportable compensation       (i) CP Retirement and other deferred compensation         (i) | (i) Base<br>compensation         (ii) Onus & incentive<br>compensation         (iii) Other<br>reportable<br>compensation         (ii) Other<br>reportable<br>compensation         (iii) Other<br>reportable<br>compensation         (iii) Other<br>reportable<br>compensation         (iii) Other<br>reportable<br>compensation         (iii) Other<br>reportable<br>compensation         (iii) Cher<br>reportable<br>compensation         (iiii) Cher<br>reportable<br>compensationcompensation< | CONDENSION         (ii) Bonus & incentive<br>compensation         (iii) Other<br>compensation         (iiii) Oth |

Schedule J (Form 990) 2016 Big Shoulders Fund

#### 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.

Pt I Line 1a Dues to a social club are paid on behalf of Joshua Hale, President, in order to have a place to conduct off-site board meetings and meetings with donors. These dues are not included in the president's taxable income.
Pt I Line 1a A small stipend is provided to one of the Co-chairmen which is calculated to gross up the amount of any taxes which might be incurred by him relating to the value of taxable fringe benefits provided to him. Both the value of the benefits and the stipend are included in his taxable income.
Pt I Line 7 An annual bonus was paid to all employees active as of 12/31/16, including those listed in Part VII, based upon reaching various organizational goals during the year. The bonus percentage is decided annually by the Co-chairmen. The same bonus percentage is used for all employees. The bonus percentage is multiplied by each person's regular annual compensation to determine the dollar amount of the bonus.

#### SCHEDULE M (Form 990)

## **Noncash Contributions**

OMB No. 1545-0047

| ► | Com | nplete | e if the | organizations answered 'Yes | ' on Form 990, | Part IV, lines 29 or 30. |
|---|-----|--------|----------|-----------------------------|----------------|--------------------------|
|   |     |        | -        |                             |                |                          |

► Attach to Form 990.

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

| Employer identification number |
|--------------------------------|
| 36-3490557                     |

Big Shoulders Fund
Part I Types of Property

|     |  | <b>(a)</b><br>Check if<br>applicable | (b)<br>Number of<br>contributions or<br>items contributed | (c)<br>Noncash contribution<br>amounts reported<br>on Form 990,<br>Part VIII, line 1g | Method c<br>noncash cor | (d)<br>of determini<br>atribution ar | ing<br>mounts |
|-----|--|--------------------------------------|---|---|-------------------------|--------------------------------------|---------------|
| 1   | Art – Works of art   | Х                                    | 4   | 1,789.  | sale of com             | parable pr                           | roperty       |
| 2   | Art – Historical treasures   |                                      |   |   |                         |                                      |               |
| 3   | Art – Fractional interests   |                                      |   |   |                         |                                      |               |
| 4   | Books and publications   |                                      |   |   |                         |                                      |               |
| 5   | Clothing and household goods   | Х                                    |   | 8,855.  | sale of com             | parable p                            | roperty       |
| 6   | Cars and other vehicles  |                                      |   |   |                         |                                      |               |
| 7   | Boats and planes   |                                      |   |   |                         |                                      |               |
| 8   | Intellectual property  |                                      |   |   |                         |                                      |               |
| 9   | Securities – Publicly traded   | Х                                    | 24  | 434,897.  | average high            | /low sale                            | s price       |
| 10  | Securities – Closely held stock  |                                      |   |   |                         |                                      |               |
| 11  | Securities – Partnership, LLC, or trust interests. $% \left( {{{\bf{n}}_{{\rm{s}}}}} \right)$ .                |                                      |   |   |                         |                                      |               |
| 12  | Securities – Miscellaneous   |                                      |   |   |                         |                                      |               |
| 13  | Qualified conservation contribution –<br>Historic structures   |                                      |   |   |                         |                                      |               |
| 14  | Qualified conservation contribution - Other  |                                      |   |   |                         |                                      |               |
| 15  | Real estate – Residential  |                                      |   |   |                         |                                      |               |
| 16  | Real estate – Commercial   |                                      |   |   |                         |                                      |               |
| 17  | Real estate – Other  |                                      |   |   |                         |                                      |               |
| 18  | Collectibles   | Х                                    | 23  | 7,467.  | sale of com             | parable p                            | roperty       |
| 19  | Food inventory   |                                      |   |   |                         |                                      |               |
| 20  | Drugs and medical supplies   |                                      |   |   |                         |                                      |               |
| 21  | Taxidermy  |                                      |   |   |                         |                                      |               |
| 22  | Historical artifacts   |                                      |   |   |                         |                                      |               |
| 23  | Scientific specimens   |                                      |   |   |                         |                                      |               |
| 24  | Archeological artifacts  |                                      |   |   |                         |                                      |               |
| 25  | Other ► (food & beverage prizes).  | Х                                    | 42  | 49,641.   | sale of com             | parable pr                           | roperty       |
| 26  | Other ► (food for events/meetings) .   | Х                                    | 2   | 11,558.   | sale of com             | parable p                            | roperty       |
| 27  | Other► ( <u>Furniture</u> ).   | X                                    | 1   | 32,210.   | sale of com             | parable pr                           | roperty       |
| 28  | Other ► (Other goods ).  | Х                                    | 17  | 13,724.   | sale of com             | parable pr                           | roperty       |
| 29  | Number of Forms 8283 received by the organizatio   |                                      |   |   |                         |                                      |               |
|     | organization completed Form 8283, Part IV, Donee   | Acknowledge                          | ement   |   | 29                      |                                      | 0.            |
|     |  |                                      |   |   | _                       | Yes                                  | No            |
| 30a | During the year, did the organization receive by cor<br>it must hold for at least three years from the date of | the initial con                      | tribution, and which isn't                                | required to be used   |                         |                                      |               |
|     | for exempt purposes for the entire holding period?   |                                      |   |   |                         | la                                   | X             |
|     | If 'Yes,' describe the arrangement in Part II.   | that requires                        | the review of any panet                                   | andard contributions?   |                         |                                      |               |
| 31  | Does the organization have a gift acceptance policy  |                                      |   |   | 31                      |                                      |               |
|     | Does the organization hire or use third parties or re<br>noncash contributions?                                | 0                                    |   |   |                         | 2a                                   | X             |
| b   | If 'Yes,' describe in Part II.   |                                      |   |   |                         |                                      |               |
| 33  | If the organization didn't report an amount in colum describe in Part II.                                      | n (c) for a type                     | e of property for which co                                | blumn (a) is checked,   |                         |                                      |               |
| BAA | For Paperwork Reduction Act Notice, see the In   | structions fo                        | r Form 990.   |   | Schedule M              | (Form 990)                           | ) (2016)      |

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.

Pt I col(b) The number reported in column (b) represents the number of contributions received.

| SCHEDULE O   | Supplemental Information to Form 990 or 990-EZ   | OMB No. 1545-0047            |
|--|--|------------------------------|
| (Form 990 or 990-EZ)                                   | Complete to provide information for responses to specific questions on<br>Form 990 or 990-EZ or to provide any additional information.                           | 2016                         |
| Department of the Treasury<br>Internal Revenue Service | <ul> <li>Attach to Form 990 or 990-EZ.</li> <li>Information about Schedule O (Form 990 or 990-EZ) and its instructions is<br/>at www.irs.gov/form990.</li> </ul> | Open to Public<br>Inspection |
| Name of the organization                               | Employer ide   | tification number            |

#### Big Shoulders Fund

Other

Pt VI, Line 2

Employer identification num

36-3490557

Part I, Line 8 Contribution Revenue: Regarding our fluctuation in fundraising income, in any given year we receive both consistent, recurring annual support and other major, project-specific gifts or pledges related to events, bequests, endowments, programmatic initiatives, etc. An especially large fluctuation relates to a major fundraising dinner held every other year, but in any one year we may also receive large pledges that must be included in revenue in the year the pledge was received, but the actual cash support is spread out over time. To normalize this, and based on past experience, we budget our expenses to remain fairly steady year over year, and to be based on gifts either already received or expected pledge payments for that year. This may result in a large operating surplus in one year, and a large operating deficit in the following year. However, the total funds raised relates closely to the total expenses over time.

Family and business relationships: John A. Canning, Michael Ferro business relationship; John A. Canning, Timothy Sullivan - business relationship; Thomas Reynolds III, Thomas Lanctot - family relationship; William Devers, Andrew McKenna - business relationship; Andrew McKenna, James Gordon - business relationship; Andrew McKenna, Michael Ferro business relationship; Andrew McKenna, Dennis Fitzsimons - business relationship.

The tax return is reviewed by the President and the Audit Committee and Pt VI, Line 11b is distributed to the Executive Committee prior to filing.

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

The Co-Chairmen and Executive Committee determine the compensation for the President after reviewing his performance and by using comparative data for other non-profit organizations. This was last done in December Pt VI, Line 15a 2016.

Tax returns and financial statements for the past three years are posted on our website and are also available on request. Governing documents and the conflict of interest policy may be provided to interested Pt VI, Line 19 parties upon request.

Part VII, Section A: The "Executive Committee" is the formal name of

| Schedule <b>O</b> (Form 990 or 990-EZ) 2016 |                                |  |
|---|--------------------------------|--|
| Name of the organization                    | Employer identification number |  |
| Big Shoulders Fund                          | 36-3490557                     |  |

Other

Pt VIII

Pt XI

the governing board of the organization. Joshua Hale and Linda Rossi are reported as officers in Section A because their job descriptions fit the criteria specified by the IRS to be reported as officers. However they are not legal officers of the organization.

Part VIII, Line 11a: Under generally accepted accounting principles, non-profit organizations must report agency transactions in a specific manner. Agency transactions are contributions received from 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, the 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 our donors, we do include these gifts in total contribution revenue on Line 1 and then deduct them from gross revenue on Line 11a resulting in net revenue of -0- for these transactions.

#### Part IX, Line 24c: As described above, agency receipts are not included in income, and correspondingly, agency expenditures are not included in total expenses. Line 24c shows the total of agency expenditures Other included in the detail expense lines 1 and 2.

Line 9: Other changes in net assets: \$76,950 represents the net adjustment made for actual and potential uncollectible pledges receivable in 2017. An additional \$3,677 loan balance was also written off.

Schedule O (Form 990 or 990-EZ) (2016)

3

36-3490557

## **BIG SHOULDERS FUND**

June 2017

#### BIG SHOULDERS FUND PROGRAMS AND IMPACT $\stackrel{\circ}{\sim}$

The educational landscape of Chicago is challenging territory to navigate. Without question, families everywhere are seeking the best educational opportunities for their families, but the challenges of geography, scarcity of local quality options, and expense present what can feel like towering obstacles. For families of limited means living in distressed communities, the search for safe and engaging educational options provokes anxiety, and at the worst, hopelessness.

Three years ago, Chicago Public Schools (CPS) enacted the largest mass school closing in American history. This event transformed the educational landscape of the City and resulted in greater scarcity of accessible quality educational options city-wide that were largely felt by students of color. An investigation by *The American Prospect* found that these closures have disproportionately impacted African American students who comprised 40 percent of CPS enrollment, but made up 88 percent of those affected by school closures.<sup>1</sup> The report goes on to explain that "...87.5 percent of students affected by closures did not move to significantly higher-performing schools." Clearly, the need for quality alternatives is significant, but low-income families do not even consider Catholic schools because they believe they cannot afford the expense.

Recent research on national shifts in household spending found basic needs costs have grown to account for nearly 80 percent of low-income families' overall budgets in the last 30 years.<sup>2</sup> An analysis of the apartment market in Chicago found that average rent in Chicago has increased 3.9 percent per year over the last two years and median rent increased 4.8 percent last year alone.<sup>3</sup> These factors impact families' ability to afford school tuition. Median rates were \$4,960 per student in elementary school and \$8,025 in high school during the 2015-16 school year and, when

<sup>&</sup>lt;sup>1</sup> Cohen, Rachel M. (April 2016). "School Closures: A Blunt Instrument." The American Prospect.

<sup>&</sup>lt;sup>2</sup> The Hamilton Project of the Brookings Institute, 2016.

<sup>&</sup>lt;sup>3</sup> Marks Jarvis, Gail, 2016. "As apartment rents rise, a majority of Chicago renters are staying put." *Chicago Tribune*.

| Schedule O (Form 990 or 990-EZ) (2016) | Page 4.                        |
|--|--------------------------------|
| Name of the organization               | Employer identification number |
| BIG SHOULDERS FUND                     | 36-3490557                     |

coupled with surging cost of living, families are squeezed against razor-thin margins for discretionary spending and often have little left over to save in case of an emergency.

Big Shoulders Fund, however, is energized and steadfast in its resolve to provide holistic supports to schools, ensuring they remain rooted in community. Big Shoulders supports schools and students through investments in four core areas: scholarships, leadership development for school administrators and teachers, academic enrichment, and operational improvement. When schools receive support in these vital areas, they are empowered to significantly improve business practices, strive for better outcomes including student growth and achievement, and create structures that ensure timely student graduation and matriculation into quality high schools or colleges.

Further, the schools supported by Big Shoulders Fund are essential assets in distressed and at-risk communities. Recent analysis of quality of life and community health data collected from Chicago and other major cities by Professors Margaret F. Brinig and Nicole Stelle Garnett found, "the loss of Catholic schools triggers disorder, crime, and an overall decline in community cohesiveness, and suggest that new charter schools fail to fill gaps left behind."<sup>4</sup> It is clear then that the preservation of quality, operationally viable Catholic schools aligns with safety, civility, and progress interests of the city we all call home. Unrestricted contributions allow Big Shoulders to respond to the immediate needs of these schools and their students through comprehensive programs and resources.

### Scholarships & Enrollment Growth

Big Shoulders and its supporters provide substantial support to families and schools through nearly 80 distinct scholarship programs. In addition to significantly reducing barriers to quality education, scholarships also help schools retain students despite high rates of family mobility. At the core of these scholarships is a lasting partnership between donor, student, and the schools; everyone has an important role and is accountable. During the 2015-16 school year, Big Shoulders awarded \$8.4 million in scholarships to approximately 5,100 students. For the 2016-17 school year, the number of scholarships requested increased 55 percent and amounted to a 93 percent increase (from \$2,984,157 in 2015-16 to \$5,753,120 in 2016-17) in the amount of funding requested. Big Shoulders Fund's goal is to eventually serve 10,000 students through scholarships each year, but the demand for scholarships significantly exceeds available funding.

<sup>&</sup>lt;sup>4</sup> Lost Classroom, Lost Community: Catholic Schools' Importance in Urban America. UChicago Press, 2014

| Schedule O (Form 990 or 990-EZ) (2016) | Page 5                         |
|--|--------------------------------|
| Name of the organization               | Employer identification number |
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## Capacity Building & Operational Improvement: Patrons Program and Covered Schools Initiative

Through partnerships with generous *Patrons* and investments in the *Covered Schools Initiative*, Big Shoulders ensures safe, inviting, high quality schools rooted in the communities these families call home remain a viable option. The *Patrons Program* pairs schools with Patron donors to develop sustainable structures and more efficient school operations. Patrons partner with schools to develop strategic business plans and accompanying quality indicators, and then provide the financial resources needed to realize stability and growth goals. There are currently 126 highlyengaged Patrons who have already contributed or pledged over \$33M at 63 schools. Funds have improved school's viability through fundraising guidance, marketing support, capital improvements, technological upgrades, academic enhancements, and tuition assistance for current and future students.

Many of the best practices that have been developed over the past decade through the Patrons Program are implemented in select high-need schools through the *Covered Schools Initiative*. Since 2012, Big Shoulders has worked closely with a small group of schools serving some of the most impoverished communities in Chicago, providing additional support to ensure that they remain viable and academically rigorous. These "Covered Schools" – which are the subject of a written agreement with the Archdiocese of Chicago – are primarily located on Chicago's South and West sides in neighborhoods that typically are the most challenged with scarce quality educational options and chronic violence. However, with the comprehensive supports provided by Big Shoulders Fund, these schools are stronger, improve their capacity to offer high-quality education, and continue to serve as anchors of hope and possibility for families in these communities.

In the first two years of the initiative, Big Shoulders Fund was able to work with the Covered Schools to reduce the overall operating deficits by 18.4 percent and increased enrollment by over five percent. If not for this intervention, the Archdiocese would have closed these schools and 3,022 students would have departed Big Shoulders Fund schools at the end of the first two years of this program. After year three of this initiative, the collective net deficit reduction for the Covered Schools has reached \$915,000 and over 5,000 student-years of education have been saved by keeping these schools in operation. Despite enrollment decreases across schools in the Archdiocese in this three-year period, Covered Schools enrollment has trended more positively than the overall market.

| Schedule O (Form 990 or 990-EZ) (2016) | F                              | <sub>Page</sub> 6, |
|--|--------------------------------|--------------------|
| Name of the organization               | Employer identification number | •                  |
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Big Shoulders expanded the number Covered Schools to 12 and is now investing \$2.1 million to meet the needs of the students and communities they serve during the 2015-16 school year. Cumulatively, the Covered Schools Initiative has helped schools realize over \$870,000 in operational savings and alleviated the Archdiocese of Chicago of nearly \$3.9 million cost of running these academic institutions.

#### Leadership Development

In response to both national trends in principal and teacher attrition and the current realities in Chicago schools, Big Shoulders established a scalable model for leadership cultivation in its network. The *Leadership Development (LDP) and Teacher Development (TDP) programs* work in tandem to create and sustain the structures for improving the administrative and instructional practices that are vital to realizing positive student outcomes. The *Leadership Development Program (LDP)* supports talented teachers as they progress through the administrator licensure process by providing guidance for placements, ongoing professional development, and access to a collaborative community of practitioners. These developing leaders benefit from opportunities to fine-tune their organizational and fiscal management skills and deepen their instructional leadership capacity. The program also provides training for current Big Shoulders principals on high-level administrative topics such as establishing progress monitoring systems in schools, cultivating teacher leadership, and strategic plan development. Two Leadership Development Program candidates or alumni currently hold leadership positions in Covered Schools.

Retention of skilled new teachers is another challenge for schools nationally. With the *Teacher Development Program (TDP)*, Big Shoulders has utilized the LDP model for professional development to address the critical problem and root causes of chronic turnover of new classroom teachers. This upstream intervention was launched as a three-year pilot during the 2015-16 school year. Through a two-pronged approach, it relies on an intensive pre-service recruitment process to route new teachers into Big Shoulders Fund schools which is followed by a two-year professional development series.

#### Academic Enrichment Programs

While scholarships ensure access to Big Shoulders Fund schools and Leadership Development Programs aim to ensure the quality of leadership and instruction, schools are often in need of further support, financial and other, to ensure students have the right resources they need develop the knowledge, skills, and abilities of 21<sup>st</sup> century citizens. Through partnerships with area

| Schedule O (Form 990 or 990-EZ) (2016) | F                              | Page 7. |
|--|--------------------------------|---------|
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universities and expert educators, Big Shoulders has developed an array of programs that reinforce and enhance the vigorous academic culture of our schools to ensure students continue to grow.

Through an interdisciplinary continuum of academic enrichment programs Big Shoulders and partners address the challenges and barriers to quality instruction including, but not limited to: greater curricular coherence and alignment from Kindergarten through fifth grade to middle school grades as well as from middle to high school grades, greater utilization of questioning strategies by teachers in instruction, and increased access to instructional resources. Teachers participating in professional development opportunities offered reported the program has helped them establish strong cultures of learning in their classroom, their students are engaged at much higher levels in problem-solving, and students have developed more confidence in their abilities.

Efforts to elevate instruction and learning are significantly bolstered through support for **technology integration** in Big Shoulders Fund schools. From digital learning labs to individual technology devices and interactive software programs, Big Shoulders helps schools develop the infrastructure to support classrooms that are wired for quality education. These technologies allow teachers to deliver highly engaging instruction and individualize support to meet each student where they are in their learning journeys.

#### Assessing Student Growth & Achievement

Big Shoulders measures success through a number of student- and school-focused dimensions. For students, Big Shoulders provides access to quality, values-based schools. Student achievement is one measure of Big Shoulders Fund's effectiveness. The ultimate objective here is to verifiably narrow the achievement gap for low-income, minority students in Big Shoulders schools through improvements in curriculum and instruction specifically in reading, mathematics, and science. Students at Big Shoulders schools on average consistently test well above national norms and outperform local and national averages in mathematics and reading at statistically significant levels. The third party researcher that conducted the analysis in the table below found these findings particularly significant because Big Shoulders Fund schools serve a more diverse and lower income population than the national sample.

Comparison of 2015 Terra Nova Scale Scores for Big Shoulders Fund Schools vs National Average

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|         | Grade           | Fund Schools | National Norm | Difference |
|---------|-----------------|--------------|---------------|------------|
|         | 3rd             | 626          | 615           | +11        |
| Reading | 5 <sup>th</sup> | 659          | 648           | +11        |
|         | 7 <sup>th</sup> | 679.         | 663           | +16        |
|         | 3 <sup>rd</sup> | 612          | 588           | +24        |
| Math    | 5 <sup>th</sup> | 649          | 640           | +9         |
|         | 7 <sup>th</sup> | 685          | 669           | +16        |
|         | 3rd             | . 627        | 601           | +26        |
| Science | 5 <sup>th</sup> | 660          | 647           | +13        |
|         | 7 <sup>th</sup> | 677          | 670           | +7         |

For students making the transition from eighth to ninth grade, Big Shoulders provides students and their families the support to continue on to quality high schools through scholarships, guidance on the school selection process, and bridge programs to ensure students are prepared for increasing academic challenges and personal responsibilities. Last year, 74 percent of graduating eighth grade students went to quality Catholic, selective, and quality charter high schools.

### Long-term Success: College, Career, and Engaged Citizenry

The rigorous education students receive in Big Shoulders schools drives their continued growth and readies them for the increasing academic challenges and personal responsibilities of higher education and career. The strongest indicators of their success are that they get accepted to college, persist, and attain a degree. Research indicates that enrollment in a four-year institution in the year following high school graduation is positively correlated with a greater likelihood of persistence. Through a partnership with National Student Clearinghouse (NSC), Big Shoulders has tracked the college enrollment and persistence rates of its scholars since 2009. Over the last eight years, 85 percent of Big Shoulders Fund's graduating renewable scholars have enrolled in college the year following high school and 91 percent of those who enroll persist to a second year. By comparison, only 5 out of 10 students who graduate from Chicago Public Schools in the same time frame have entered college and, nationally only 76 percent of students from low-income, high minority, urban areas who enroll in college will persist.

Big Shoulders Fund scholars continue to outperform their peers when it comes to degree attainment. NSC utilizes a six-year benchmark as an indicator of timely and successful college completion. Data collected by an independent third-party found that 51 percent of Big Shoulders

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alumni who have enrolled in college since 2011 have earned a bachelor's degree. For context, recent NSC data found that just 23 percent of charter high school graduates and 15 percent of low-income, high-minority, urban students have obtained a bachelor's degree.

### **OVERVIEW OF THE BIG SHOULDERS FUND**

Big Shoulders Fund is an independent charitable organization that serves inner-city Catholic schools and provides a quality, values-based education for Chicago's children, thereby contributing to stronger communities. It is guided by the following principles:

- 1. A rigorous education is crucial to breaking the cycle of poverty.
- 2. Big Shoulders Fund schools are anchors in their communities that promote safety, stability, and a vibrant learning culture.
- 3. Every child of all races and creeds deserves the opportunity to pursue a quality education at a Catholic school.
- 4. Exceptional leaders are necessary for exceptional schools.
- 5. Successful schools require access to curricular and operational assistance that will support them through periods of change and beyond.
- 6. Partners who invest their resources or expertise are essential to achieving success in our schools and for our students.

### Who We Serve

For nearly three decades, Big Shoulders has provided support to inner-city Chicago Catholic schools. These schools, however, make significant contributions to the stability of neighborhoods and set high standards for educational achievement and urban civility. Today, Big Shoulders works in partnership with 77 elementary and high schools to serve nearly 20,000 children, awarding approximately \$19-21 million in grants and scholarships annually. It is unique among not-for-profits in that its endowment covers all administrative and fundraising expenses, thus ensuring 100 percent of donor funds raised benefit schools and students.

Widespread poverty is a substantial barrier that must be overcome in order to bring Big Shoulders Fund's mission to fruition. All Big Shoulders schools are Title I eligible/participants in which a minimum of 20 percent of attending students are living at or below poverty level. Annually, however, approximately 66 percent of all students served live at or below poverty level. Eighty percent of these students are minorities.

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### Commitment to Sustainable Growth & Accountability

The Board of Directors of the Big Shoulders Fund is co-chaired by Mr. James J. O'Connor, retired Chairman & CEO of Commonwealth Edison and Unicom, Mr. John A. Canning, Jr., Chairman of Madison Dearborn Partners, and Monsignor Kenneth Velo, Senior Executive at DePaul University. The full board is composed of over 180 of Chicago's corporate and civic leaders. Big Shoulders is preparing for the future by engaging the next generation of leaders via the Auxiliary Board and Chairmen's Advisory Council. These individuals provide time, talent, treasure in the effort to raise awareness of and funding for Big Shoulders' mission. Members of these groups have a combined membership of 370 individuals who have committed over 2,000 service hours annually. These groups have been recognized among the best performing young professional boards in the City by Crain's Chicago Business.

Big Shoulders has substantially grown its annual investment in schools, from \$13 million in 2010 to over \$21 million last fiscal year. Big Shoulders Fund's commitment to programmatic quality is matched by its commitment to sound financial management as evidenced by over two decades of maintaining operating expenses that are equal to or less than 10 percent of annual income. For the tenth consecutive year, Big Shoulders was recognized by Charity Navigator, a national evaluator of nonprofit organizations, with its highest Four-Star rating.

Thanks to the generous support of friends like you, Big Shoulders remains steadfast in its mission and has expanded on its initial strategic vision by providing wrap-around programs and supports to students, families, and schools. While the need for access to quality education in our great City persists, our collective engagement in this mission can positively transform schools and communities and empower children grow to lead lives of self-sufficiency and purpose. We deeply appreciate your tremendous partnership and look forward to continuing to help this and future generations of students achieve their greatest potential.

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

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

| Code:     | Description: | Other Programs: Generally academic enrichment activities for students,         |  |  |
|-----------|--------------|--|--|--|
| Expenses  | 1,113,893.   | such as outdoor education, and learning about investments and the              |  |  |
| Grants Of | 1,063,560.   | stock market; additional support for schools holding fund-raising events;      |  |  |
| Revenue.  | 0.           | supporting volunteer school clean-up and maintenance activities;               |  |  |
| -         |              | Grants to schools as designated by donors -agency (pass-through) transactions. |  |  |
|           |              | See supporting schedule reconciling grant expenses and net expense.            |  |  |

#### Supporting Statement of:

Form 990 p 2/Line 4a Expenses

| Description                        | Amount     |
|------------------------------------|------------|
| Student Scholarship Programs:      |            |
| Total Grants & Assistance Payments | 7,690,190. |
| Less: Agency Payments              | -96,489.   |
|                                    |            |
| Net Grant Expense 7,593,701        |            |
|                                    |            |
| Other Expense                      | 541,331.   |
|                                    |            |
| Total                              | 8,135,032. |

#### Supporting Statement of:

Form 990 p 2/Line 4b Expenses

| Description                        | Amount     |
|------------------------------------|------------|
| School Operations:                 |            |
| Total Grants & Assistance Payments | 4,097,292. |
| Less: Agency Payments              | -6,000.    |
|                                    |            |
| Net Grant Expense 4,091,292        |            |
|                                    |            |
| Other Expense                      | 474,989.   |
| Total                              | 4,566,281. |

#### Supporting Statement of:

Form 990 p 2/Line 4c Expenses

| Description                                   | Amount     |
|---|------------|
| Academic Enrichment & Leadership Development: |            |
| Total Grants & Assistance Payments            | 1,402,572. |
| Less: Agency Payments                         | -25,000.   |
|   |            |
| Net Grant Expense 1,377,572                   |            |
|   |            |
| Other Expense                                 | 1,113,984. |
| Total   | 2,491,556. |

### Supporting Statement of:

Form 990 p 2/Other Expenses-1

| Description                        | Amount     |
|------------------------------------|------------|
| Other Programs:                    |            |
| Total Grants & Assistance Payments | 1,063,560. |
| Less: Agency Payments              | -490,690.  |
|                                    |            |
| Net Grant Expense 572,870          |            |
|                                    |            |
| Other Expense                      | 541,023.   |
|                                    |            |
| Total                              | 1,113,893. |