# **Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

		year, or tax year beg	jinning	, 2011	, and endir		, 20	(45,0)
B Check I	C Name of	-				D Employer I	dentification number	
	SAVE	THE CHILDREN FEI	DERATION, INC.			06-072	26487	
	dress Doing Bus							
Na		nd street (or P.O. box if mail i	is not delivered to street add	dress)	Room/suite	E Telephone	number	
Init		LTON ROAD				(203) 22	21-4031	
$\overline{}$		n, state or country, and ZIP +	r 4					
ret		ORT, CT 06880				G Gross recei	pts \$ 690,70	4,935.
	nung	nd address of principal officer.				H(a) is this a graph affiliates?		por many
		LTON ROAD, WEST	PORT, CT 06880			H(b) Are all affil	lates included? Ye	s No
		501(c)(3) 501(c) (		4947(a)(1)	or 52	7 If "No," atta	ach a list. (see instructions	s)
		ETHECHILDREN.ORG	G				mption number	
	of organization: X	Corporation Trust	Association Other	r <b>&gt;</b>	L Year o	f formation: 1932 M	State of legal domici	ile: CT
Part I	Summary							
1	Briefly describe th	e organization's mission	or most significant activi	ities:				
ايو	SAVE THE CH	ILDREN IS AN IN	TERNATIONAL NO	NPROFIT C	HILDREN	'S RELIEF AND	)	
anc	DEVELOPMENT	ORG. WHOSE MIS	SION IS TO INS	SPIRE BREA	KTHROUG	HS IN THE WAY	,	
L L	THE WORLD T	REATS CHILDREN,	AND TO ACHIEV	/E IMMEDIA	TE AND	LASTING CHANG	E	
Governance	Check this box	if the organization	discontinued its operat	tions or dispose	d of more tha	an 25% of its net asse	ts.	
න් 3	Number of voting	members of the governing	g body (Part VI, line 1a)			3	3	33.
Activities 9 9 4 b	Number of indepe	ndent voting members of	the governing body (Pa	art VI, line 1b)			4	32.
5	Total number of ir	dividuals employed in cal	alendar year 2011 (Part \	V, line 2a)			5	994.
	Total number of v	olunteers (estimate if nece:	essary)				6	49.
72	a Total unrelated bu	siness revenue from Part \	VIII, column (C), line 12				7a	0
	Net unrelated bus	ness taxable income from	Form 990-T, line 34 .			<del></del>	7b	
						Prior Year	Current	
g 8	Contributions and	grants (Part VIII, line 1h) .				529,965,50		
Sevenue 9 10	Program service re	evenue (Part VIII, line 2g) .				5,758,23		9,090.
2 10	Investment incom	e (Part VIII, column (A), lin	nes 3, 4, and 7d)			4,875,46		0,338.
11	Other revenue (Pa	rt VIII, column (A), lines 5	5, 6d, 8c, 9c, 10c, and 1	1e)		1,250,88		9,060.
12	Total revenue - ad	d lines 8 through 11 (mus	st equal Part VIII, column	n (A), line 12).		541,850,05		
13	Grants and similar	amounts paid (Part IX, co	olumn (A), lines 1-3)			162,282,63		
14	Benefits paid to or	for members (Part IX, cold	lumn (A), line 4)				0	0
ဖ္မ 15	Salaries, other cor	npensation, employee ber	52. 150,823	3,056.				
g 16a	Professional fundr	aising fees (Part IX, colum	7,284,79		2,660.			
X b	Total fundraising	expenses (Part IX, column	(D), line 25) ▶ 2	27,045,351			(av a	
17	Other expenses (F	art IX, column (A), lines 1	1a-11d, 11f-24e)			201,198,71	9. 209,349	9.568
18	Total expenses. A	ld lines 13-17 (must equa	al Part IX, column (A), lir	ne 25)		516,090,81		
19	Revenue less expe	nses Subtract line 18 from	m line 12			25,759,24		
Ses	Total assets (Part ) Total liabilities (Pa	Parties North Control of the Control				Beginning of Current		
[ 20	Total assets (Part )	(, line 16)				315,121,12		
21 22	Total liabilities (Pa	t X, line 26)				135,885,83		
교 22	Net assets or fund	balances. Subtract line 2	1 from line 20			179,235,29		
	Signature Blo							
Part II		are that I have examined this	return, including accompa	anying schedules a	and statements	s, and to the best of my k	nowledge and belief, li	t is true.
Part II	naities of perjury, I dec	on of preparer (other than off	icar) is based on all !-			KUUMUUU		ne ne a de la compania del compania de la compania del compania de la compania del la compania de la compania dela compania del la compania de la compania del la compania de la compania de la compania
Part II	nalties of perjury, I dec and complete. Declarati	on of preparer (other than offi	icer) is based on all informa	ation of which pre	eparer nas any			
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Part II  Jinder pe correct, a  ign ere  aid reparer se Orivi	Signature of or  Frint/Type or print or  Print/Type preparer  Mary-Evel  Firm's name  Firm's address	fficer  Chard K. 7  ame and title  sname  yn Antonetti	Preparer's signature  Afeny which  LAZA HARTFORD,	Jr.	CFO	Date  VP Fina  Check  self-employe  Firm's EIN	Ingust 10 Ince & The Pill Pill Pour Pour Pour Pour Pour Pour Pour Pour	9,2012 reasu,

Form 990 (2011) Page 2 **Statement of Program Service Accomplishments** Part III 1 Briefly describe the organization's mission: SAVE THE CHILDREN IS AN INTERNATIONAL NONPROFIT CHILDREN'S RELIEF AND DEVELOPMENT ORGANIZATION WHOSE MISSION IS TO INSPIRE BREAKTHROUGHS IN THE WAY THE WORLD TREATS CHILDREN, AND TO ACHIEVE IMMEDIATE AND LASTING CHANGE IN THEIR LIVES. 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No If "Yes," describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program Yes If "Yes," describe these changes on Schedule O. 4 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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 78,497,615. ) (Revenue \$ **4a** (Code: ) (Expenses \$ 161,399,958. including grants of \$ 1 3,919,726. **)** EMERGENCY RESPONSE - SAVE THE CHILDREN AIMS TO BE THE GLOBAL LEADER IN EMERGENCY RESPONSE FOR CHILDREN AFFECTED BY DISASTERS AND CRISIS. OUR EMERGENCY PRIORITIES ARE 1) EMERGENCY RESPONSE -SAVE LIVES AND ALLEVIATE SUFFERING: PROVIDE LARGE-SCALE, HIGH QUALITY PROGRAMS FOR CHILDREN IN EMERGENCIES AND 2) DISASTER RISK REDUCTION - HELP COMMUNITIES PREPARE: WORK WITH COMMUNITIES IN COUNTRIES HIGHLY PRONE TO DISASTERS TO ASSESS RISK, DEVELOP COMMUNITY EMERGENCY RESPONSE ACTION PLANS, AND MITIGATE POTENTIAL DISASTERS. FOR MORE INFORMATION, SEE SCHEDULE O. ) (Expenses \$ \_\_\_\_\_\_122,172,468. including grants of \$ 32,790,908. ) (Revenue \$ **4b** (Code: EDUCATION - EDUCATION IS THE FOUNDATION ON WHICH COMMUNITIES CAN BUILD AND SUSTAINCHANGE IN THE LIVES OF CHILDREN. IN 2011 SAVE THE CHILDREN REACHED 6.4 MILLION CHILDREN AND ADULTS WITH DIRECT EDUCATION PROGRAMMING, AND AN ADDITIONAL 14.9 MILLION INDIRECTLY WITH PROGRAMS FOR EARLY CHILDHOOD DEVELOPMENT, BASIC EDUCATION AND LITERACY AND ADOLESCENT AND NON-FORMAL EDUCATION. FOR MORE INFORMATION, SEE SCHEDULE O. 31,287,557. ) (Revenue \$ ) (Expenses \$ \_\_\_<sub>110,157,967</sub>. including grants of \$ \_\_ HEALTH & NUTRITION - SAVE THE CHILDREN WORKS TO ENSURE THAT CHILDREN AND THEIR FAMILIES HAVE ACCESS AND CAN USE KEY HEALTH AND NUTRITION SERVICES, AND ADOPT HEALTH-PROMOTING BEHAVIORS IN BOTH DEVELOPMENT AND EMERGENCY SITUATIONS.WE USE EVIDENCE-BASED INTERVENTIONS AND INNOVATIONS TO ADDRESS THE MAJOR CAUSES OF ILLNESS, DEATH AND MALNUTRITION AND CONTINUE TO DEVELOP INNOVATIVE STRATEGIES TO DELIVER THESE SERVICES EFFECTIVELY AS BROADLY AS POSSIBLE ESPECIALLY IN RESOURCE-POOR AND EMERGENCY SITUATIONS. FOR MORE INFORMATION, SEE SCHEDULE O. **4d** Other program services (Describe in Schedule O.) 138,398,629 including grants of \$ 71,297,998. ) (Revenue \$ (Expenses \$ 4e Total program service expenses ▶ 532,129,022.

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Part W Chocklist of Postuired Schodules

Part	Checklist of Required Schedules		V	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		77	
•	complete Schedule A	2	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		Λ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		Х
		3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	4	х	
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	-	21	
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,			
		5		Х
6	Part III			- 21
Ü	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? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
-	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes,"			
	complete Schedule D, Part IV	9		Х
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	Х	
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	11b	Х	
С	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	11c		X
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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI, XII, and XIII	12a	X	
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, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	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	14b	Х	
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	140	21	
15	organization or entity located outside the United States? 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 assistance	-13		
10	to individuals located outside the United States? 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
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
2 <del>- </del> a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		Х
	· · · · · · · · · · · · · · · · · · ·	24b		21
D	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			3.7
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II .	26		X
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L. Part IV	28b	Х	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
00	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N</i> ,			
J 1	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
32	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	-		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
2.4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		21
34		34	Х	
05.0	IV, and V, line 1		X	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Λ	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	ا ا		37
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

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Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			. X
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		Yes	No
	Enter the number of Forms W-20 included in line 1a. Enter -o- it not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1c	Х	
22	reportable gaming (gambling) winnings to prize winners?  Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10	21	
Za	Statements, filed for the calendar year ending with or within the year covered by this return 2994			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions).			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b		Х
	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			
		4a	Х	
b	account)?			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	.		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a	Х	
h	and services provided to the payor?  If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.5		
C	required to file Form 8282?	7c		Х
d	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?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Х	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	, , , , , , , , , , , , , , , , , , , ,			
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders   11a			
	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources			
b	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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?	13a		
	<b>Note.</b> 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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Form 990 (2011) SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below. and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI............................. Χ Section A. Governing Body and Management Nο 33 1a 1a 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 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 32 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 Х 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 X 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . X 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . . . X 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 6 Χ 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, Χ 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? Χ 8b Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο Χ 10a **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . . . . . . . Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Χ c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c Χ Х 13 13 Χ 14 14 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? Х 15a The organization's CEO, Executive Director, or top management official 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions.)

### Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶\_ ATTACHMENT\_ 1\_

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) available for public inspection. Indicate how you made these available. Check all that apply.

Own website | Another's website | X | Upon request

organization's exempt status with respect to such arrangements?

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

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

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

**b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the

organization: ▶<sub>RICHARD</sub> TROWBRIDGE JR, 54 WILTON ROAD WESTPORT, CT 06880 203-221-4177

Form **990** (2011)

16a

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Part VII

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

#### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

- 1a 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 currer	nt officer, director, or trustee.
--	-----------------------------------

(A) Name and Title	(B) Average hours per week (describe hours for	box,	unle	Pos heck ss pe	erson	e than o	an	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W <u>2</u> 1888 miss)	organization and related organizations
(1) SUSAN BLUMENTHAL										
TRUSTEE-ROTATED OFF IN 2011	1.00	Х							0	0
(2) ROXANNE MANKIN-CASON										
TRUSTEE	1.00	Х							0	0
(3) ANDREA COLLINS										-
TRUSTEE	1.00	Х						C	0	0
(4) SUSAN DECKER										
TRUSTEE	1.00	Х						C	0	0
(5) MARTHA DELAURENTIIS										
TRUSTEE	1.00	X						C	0	0
(6) GRETCHEN DYKSTRA										
TRUSTEE-ROTATED OFF IN 2011	1.00	X						C	0	0
(7) WILLIAM FRIST										
TRUSTEE	1.00	X						C	0	0
(8) ANNE MULCAHY										
CHAIR	1.00	Х						C	0	0
(9) AMELIA VICINI										
TRUSTEE	1.00	X						C	0	0
(10) CHARLOTTE GUYMAN										
TRUSTEE	1.00	X						C	0	0
(11) SUNIL SANI										
TRUSTEES	1.00	X						C	0	0
_(12) BRAD IRWIN										
TRUSTEE	1.00	Х						C	0	0
(13)_LAWRENCE HOROWITZ								_	_	_
TRUSTEE	1.00	X						С	0	0
(14) RICHARD SCHNIEDERS	1									_
TRUSTEE	1.00	X						C	0	Form <b>990</b> (2011)

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Form 990 (2011) Page 8

d Total (add lines 1b and 1c)	Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es,	and I	Higl	hest Compensat	ed Employees (d	continued)	)
No.   Price   Price	• •	' '			•	•			` '	l ',		-
15   GARY KNELL		hours per week	box,	unle:	heck ss pe d a c	mor erson direc	is both tor/trust	an tee)	compensation from	compensation from related	oth compe	ner nsation
TRUSTEE		related organizations in Schedule	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		(W-2/1099-MISC)	organi and re	ization elated
16   MARK MACTAS	15) GARY KNELL											
VICE CHAIR		1.00	X						0	0		0
17) JOE MANDATO	16) MARK MACTAS											
TRUSTEE       1.00 X       0         18) HEATH MCLENDON       0       0         TRUSTEE       1.00 X       0       0         19) HENRY MILLER       0       0       0         TRUSTEE       1.00 X       0       0         21) BRAD PALMER       0       0       0         TRUSTEE       1.00 X       0       0         22) CHARLES PERRIN       0       0       0         TRUSTEE       1.00 X       0       0         23) COKIE ROBERTS       VICE CHAIR-ROTATED OFF IN 2011 1.00 X       0       0         24) CAROLE SIMPSON       0       0       0         TRUSTEE - ROTATED OFF IN 2011 1.00 X       0       0       0         25) JUDITH REICHMAN       0       0       0         TRUSTEE       1.00 X       0       0         25) JUDITH REICHMAN       0       0       0         TRUSTEE       1.00 X       0       0         25) JUDITH REICHMAN       0       0       0         C Total from continuation sheets to Part VII, Section A       5,659,334       0       655,3         d Total (add lines 1b and 1c)       5,659,334       0       655,3	VICE CHAIR	1.00	X						0	0		0
18	17) JOE MANDATO											
TRUSTEE       1.00 X       0         19) HENRY MILLER       0       0         TRUSTEE       1.00 X       0         20) TOM MURPHY       0       0         TRUSTEE       1.00 X       0         21) BRAD PALMER       0       0         TRUSTEE       1.00 X       0         22) CHARLES PERRIN       0       0         TRUSTEE       1.00 X       0         23) COKIE ROBERTS       0       0         VICE CHAIR-ROTATED OFF IN 2011       1.00 X       0         24) CAROLE SIMPSON       0       0         TRUSTEE -ROTATED OFF IN 2011       1.00 X       0         25) JUDITH REICHMAN       0       0         TRUSTEE       1.00 X       0         1b Sub-total       >       0       0         c Total from continuation sheets to Part VII, Section A       >       5,659,334       0       655,3         d Total (add lines 1b and 1c)       >       5,659,334       0       655,3         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	TRUSTEE	1.00	X						0	0		0
19   HENRY MILLER	18) HEATH MCLENDON											
TRUSTEE       1.00 X       0         20) TOM MURPHY       0       0         TRUSTEE       1.00 X       0         21) BRAD PALMER       0       0         TRUSTEE       1.00 X       0         22) CHARLES PERRIN       0       0         TRUSTEE       1.00 X       0         23) COKIE ROBERTS       0       0         VICE CHAIR-ROTATED OFF IN 2011       1.00 X       0         24) CAROLE SIMPSON       0       0         TRUSTEE ROTATED OFF IN 2011       1.00 X       0         25) JUDITH REICHMAN       0       0         TRUSTEE       1.00 X       0       0         1b Sub-total       0       0       0         c Total from continuation sheets to Part VII, Section A       5,659,334       0       655,3         d Total (add lines 1b and 1c)       >       5,659,334       0       655,3         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	TRUSTEE	1.00	X						0	0		0
20) TOM MURPHY  TRUSTEE  1.00 X  0  21) BRAD PALMER  TRUSTEE  1.00 X  0  0  22) CHARLES PERRIN  TRUSTEE  1.00 X  0  0  23) COKIE ROBERTS  VICE CHAIR-ROTATED OFF IN 2011 1.00 X  0  24) CAROLE SIMPSON  TRUSTEE-ROTATED OFF IN 2011 1.00 X  0  25) JUDITH REICHMAN  TRUSTEE  1.00 X  0  0  0  1b Sub-total  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	19) HENRY MILLER											
TRUSTEE       1.00 X       0         21) BRAD PALMER       0       0         TRUSTEE       1.00 X       0         22) CHARLES PERRIN       0       0         TRUSTEE       1.00 X       0         23) COKIE ROBERTS       0       0         VICE CHAIR-ROTATED OFF IN 2011       1.00 X       0         24) CAROLE SIMPSON       0       0         TRUSTEE-ROTATED OFF IN 2011       1.00 X       0         25) JUDITH REICHMAN       0       0         TRUSTEE       1.00 X       0         1b Sub-total       0       0         c Total from continuation sheets to Part VII, Section A       5,659,334       0       655,3         d Total (add lines 1b and 1c)       5,659,334       0       655,3         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	TRUSTEE	1.00	X						0	0		0
21) BRAD PALMER  TRUSTEE  1.00 X  0  22) CHARLES PERRIN  TRUSTEE  1.00 X  0  0  23) COKIE ROBERTS  VICE CHAIR-ROTATED OFF IN 2011 1.00 X  0  24) CAROLE SIMPSON  TRUSTEE  1.00 X  0  0  25) JUDITH REICHMAN  TRUSTEE  1.00 X  0  0  1b Sub-total  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c).  1.00 X  0  5,659,334.  0 655,3	20) TOM MURPHY											
TRUSTEE 1.00 X 0 0  22) CHARLES PERRIN  TRUSTEE 1.00 X 0 0  23) COKIE ROBERTS  VICE CHAIR-ROTATED OFF IN 2011 1.00 X 0 0  24) CAROLE SIMPSON  TRUSTEE-ROTATED OFF IN 2011 1.00 X 0 0  25) JUDITH REICHMAN  TRUSTEE 1.00 X 0 0  1b Sub-total  c Total from continuation sheets to Part VII, Section A 0 0 655,3  d Total (add lines 1b and 1c)	TRUSTEE	1.00	X						0	0		0
TRUSTEE	21) BRAD PALMER											
TRUSTEE       1.00 X       0         23) COKIE ROBERTS       0       0         VICE CHAIR-ROTATED OFF IN 2011       1.00 X       0         24) CAROLE SIMPSON       0       0         TRUSTEE-ROTATED OFF IN 2011       1.00 X       0         25) JUDITH REICHMAN       0       0         TRUSTEE       1.00 X       0         1b Sub-total       >       0       0         c Total from continuation sheets to Part VII, Section A       >       5,659,334       0       655,3         d Total (add lines 1b and 1c)       >       5,659,334       0       655,3         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	TRUSTEE	1.00	X						0	0		0
23) COKIE ROBERTS	22) CHARLES PERRIN											
VICE CHAIR-ROTATED OFF IN 2011       1.00 X       0       0         24) CAROLE SIMPSON       0       0         TRUSTEE-ROTATED OFF IN 2011       1.00 X       0       0         25) JUDITH REICHMAN       0       0         TRUSTEE       1.00 X       0       0         c Total from continuation sheets to Part VII, Section A       ►       5,659,334.       0       655,3         d Total (add lines 1b and 1c)       ►       5,659,334.       0       655,3         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of		1.00	X						0	0		0
24) CAROLE SIMPSON       0       0         TRUSTEE-ROTATED OFF IN 2011       1.00 X       0         25) JUDITH REICHMAN       0       0         TRUSTEE       1.00 X       0         b Sub-total       > 0       0         c Total from continuation sheets to Part VII, Section A       > 5,659,334       0       655,3         d Total (add lines 1b and 1c)       > 5,659,334       0       655,3         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	23) COKIE ROBERTS											
TRUSTEE - ROTATED OFF IN 2011       1.00 X       0         25) JUDITH REICHMAN       0       0         TRUSTEE       1.00 X       0         1b Sub-total       >       0       0         c Total from continuation sheets to Part VII, Section A       >       5,659,334.       0       655,3         d Total (add lines 1b and 1c)       >       5,659,334.       0       655,3         2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	VICE CHAIR-ROTATED OFF IN 2011	1.00	X						0	0		0
25) JUDITH REICHMAN  TRUSTEE  1.00 X  0  0  1b Sub-total  c Total from continuation sheets to Part VII, Section A  d Total (add lines 1b and 1c)  Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	24) CAROLE SIMPSON											
TRUSTEE         1.00 x         0         0           1b Sub-total         0         0         0           c Total from continuation sheets to Part VII, Section A         5,659,334         0         655,3           d Total (add lines 1b and 1c)         5,659,334         0         655,3           2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of	TRUSTEE-ROTATED OFF IN 2011	1.00	X						0	0		0
1b Sub-total	25) JUDITH REICHMAN											
c Total from continuation sheets to Part VII, Section A	TRUSTEE	1.00	X						0	0		0
c Total from continuation sheets to Part VII, Section A	1b Sub-total							$\blacktriangleright$	0	0		0
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of								$\blacktriangleright$	5,659,334.		655	5,328.
	d Total (add lines 1b and 1c)							<b>&gt;</b>	5,659,334.	0	655	5,328.
1	2 Total number of individuals (including but not reportable compensation from the organization				ed a	bov	e) wh	o re	eceived more than	\$100,000 of		
Yes											Y	es No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated	3 Did the organization list any former office	er directo	or. or	trı	ıste	e.	kev e	emn	lovee or highes	t compensated		
employee on line 1a? If "Yes," complete Schedule J for such individual											3	Х
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the										sation from the		

3	Did the organization list any former officer, director, or trustee, key employee, or highest compensated			
	employee on line 1a? If "Yes," complete Schedule J for such individual	3	Х	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual			
	for services rendered to the organization? If "Yes" complete Schedule I for such person	5	Х	1

### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 24

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	plo	ye	es,	and F	ligl	hest Compensat	ed Employees (d	continued)
(A) Name and title	(B) Average hours per week (describe	box,	unles er and	Pos heck ss pe	rson Iirect	e than o	an ee)	(D)  Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
26) PERNILLE SPIERS-LOPEZ										
TRUSTEE	1.00	X						C	0	C
27) DAWN SWEENEY										
TRUSTEE	1.00	X						C	0	C
28) GEORGE STEPHANOPOLOUS TRUSTEE-ROTATED OFF IN 2011	1.00	Х						C	0	С
29) HELENE SULLIVAN TRUSTEE	1.00	Х						C	0	С
30) AUSTIN HEARST TRUSTEE	1.00	Х						C	0	C
31) RANDALL EISENBERG TRUSTEE	1.00	Х						C	0	С
32) WILLIAM HABER TRUSTEE	1.00	Х						С	0	С
33) PHILIP GEIER VICE CHAIR	1.00	Х						С	0	С
34) DAVID MASTROCOLA TRUSTEE	1.00	Х						С	0	С
35) ANDREA RICH TRUSTEE	1.00	Х						C	0	С
36) CHARLES F. MACCORMACK PRESIDENT/CEO (THRU 8/11)	35.00	Х		Х				425,324.	0	48,862.
1b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	_						<b>&gt; &gt; &gt;</b>			
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste			e) who	re	eceived more than	\$100,000 of	I
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched										Yes No
4 For any individual listed on line 1a, is the organization and related organizations graindividual.	sum of repeater than	oortab	ole c 50,0	com 00?	per	satior "Yes	n aı	nd other compens	sation from the le J for such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue co	mpen	sati	on 1	fron	n any	un	related organization	on or individual	5 X
Section B. Independent Contractors	, , , , , , , , , , , , , , , , , , , ,									
Complete this table for your five highest component compensation from the organization. Report of year.										

(A) Name and business address	(B) Description of services	(C) Compensation

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

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Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	ye	es,	and F	lig	hest Compensat	ed Employees (c	ontinue	ed)	
(A) Name and title	(B) Average				C) sition			(D) Reportable	<b>(E)</b> Reportable	Es	(F) stimated	
	hours per week (describe hours for related organizations in Schedule O)	box,	unles	ss pe	erson	e than of the the the the than of the the the the than of the than of the than of the the than of the the the than of the than of the the the than	an	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com fr org an	nount of other pensation om the anization d related anization	on n
37) CAROLYN MILES PRESIDENT/CEO (BEGINNING 9/11)	35.00	Х		Х				348,121.	0		45,3	62.
38) RONALD WILLIAMS TRUSTEE	1.00	Х						0	0			0
39) DAVID WESTIN TRUSTEE	1.00	Х						0	0			0
40) RICHARD STONER EXECUTIVE VP/COO	35.00			Х				269,910.	0		37,7	64.
41) BARBARA ERICKSON  VP, RESOURCE DEVELOPMENT	35.00			Х				247,908.	0		30,4	56.
42) MARK SHRIVER SENIOR VP, US PROGRAMS	35.00			Х				241,796.	0		45,3	62.
43) SUSAN E. RIDGE  VP, MARKETING & COMMUNICATIONS	35.00			Х				232,211.	0		21,0	50.
44) KATHY J. SPANGLER  VP, US PROGRAMS	35.00			Х				225,491.	0		8,4	166.
45) RODNEY DAVIS  VP, HUMAN RESOURCES	35.00			Х				217,415.	0		35,2	139.
46) ELLEN D. WILLMOTT  VP/ASST SEC/GEN COUNSEL	35.00			Х				203,520.	0		28,1	.16.
47) DIANA K. MYERS  VP, INT'L PROGRAM LEADERSHIP	35.00			Х				200,999.	0		20,1	.99.
1b Sub-total c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c)	_						<b>*</b> * *					
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste	d al	bov	e) who	o re	eceived more than	\$100,000 of			
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu										3	Yes	No
4 For any individual listed on line 1a, is the sorganization and related organizations gre	sum of repeater than	ortab \$15	ole c 50,0	om 00?	per	sation "Yes	n aı s,"	nd other compens	sation from the le J for such			
individual										4	X	

3	Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	x	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual			
	for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X	

### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Form 990 (2011)			•			• •		h 1 O - 1	a d Farant			age <b>8</b>
Part VII Section A. Officers, Directors, Tru		y Em	plo			and I	lig			ontinue		
(A) Name and title	Average hours per week (describe hours for related	box,	unles er and	Pos heck ss pe	erson	e than one is both an tor/trustee)		(D)  Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	an com fr org	(F) stimated nount of other upensation tom the anization	on n
	organizations in Schedule O)	Individual trustee or director	Institutional trustee	7	Key employee	Highest compensated employee	7	,			d related anization	
48) MICHAEL KLOSSON	25 00			3,7				100 435			00 1	2.4
VP, POLICY AND DHR 49) THOMAS KRIFT	35.00			Х				198,435.	0		20,1	34.
	35 00			37				106 145			11 7	EO
VP, INTERNATIONAL OPERATIONS	35.00			Х				196,145.	0		41,7	54.
50) SARAH A. GILLMAN VP/CFO/TREASURER(THRU 10/11)	35.00			Х				194,103.	0		36,1	10
51) RICHARD TROWBRIDGE	33.00			Δ				194,103.	0		30,1	10.
VP/CFO/TREASURER (BEG 10/11)	35.00			Х				190,403.	0		39,7	72
52) ANDREA WILLIAMSON-HUGHES	33.00							170,403.	0		37,1	12.
SECRETARY	35.00			Х				105,321.	0		25,8	36
53) KATHLEEN LOEHR	33.00			21				103,321.	0		23,0	50.
AVP, ADVISOR TO VP, RD	35.00			Х				116,789.	0		4 3	05.
54) ANNE-MARIE GREY	33.00							110,700.	0		1,3	05.
VP, RESOURCE DEVELOPMENT	35.00			Х				115,393.	0		10,1	50
omitted. A full copy of Part VII and So Children Federation, Inc., 54 Wilton Ro sending an email to twebster@savech	ad, Wes	stpor						•	,			
58) DAVID A. OOT  ASSOCIATE VP, HLTH & NUTRITION	35.00					x		188,359.	o		19,2	13.
1h Sub-total							_	200,000.				
c Total from continuation sheets to Part VII, S			• •	• •	• •							
d Total (add lines 1b and 1c)	_						•					
Total number of individuals (including but not reportable compensation from the organization)	limited to t		liste				o re	eceived more than	\$100,000 of			
· · · · · · · · · · · · · · · · · · ·											Yes	No
3 Did the organization list any former office	er directo	or or	tri	ıste	e	kev e	emn	olovee or highes	t compensated			
employee on line 1a? If "Yes," complete Sched										3	Х	
4 For any individual listed on line 1a, is the organization and related organizations gro	sum of rep	ortab	ole d	com	per	nsatio	n aı	nd other compens	sation from the			
individual										4	X	
5 Did any person listed on line 1a receive or												
for services rendered to the organization? If "Y	es," comple	te Sch	nedu	ıle J	J for	such	per	rson		5	Х	
Section B. Independent Contractors												
1 Complete this table for your five highest com- compensation from the organization. Report of year.												
							T	<b>/-</b> :				

(A) Name and business address	(B) Description of services	(C) Compensation

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

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Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nploy	yees	, and l	Hig	hest Compensat	ed Employe	3S (coi	ntinuec	1)	
(A)	(B)			(C)			(D)	(E)		(	(F)	
Name and title	Average			Positio			Reportable	Reportable	;		mated	
	hours per	,			ore than on is both		compensation	compensation	from		ount of ther	
	week (describe	office			ctor/trus		from the	related organization			ensatio	n
	hours for	Inc				_	organization	(W-2/1099-MI	- 1		n the	
	related	dire	itit l	y en ficer	ploy	Former	(W-2/1099-MISC)	(** = *********************************	,	_	nization	
	organizations in Schedule	ual t	iona	Officer	· ee	,					related ization	
	O)	Individual trustee or director	盲	/ee	npe					Ü		
		ee	Institutional trustee		Highest compensated employee							
					ed							
NB: Name and salary information for field-bas	ed staff lis	sted i	in Pa	art VI	I and	Sch	nedule J have be	en omitted.	A full	сору	of Pa	art
VII and Schedule J may be obtained without c	ost by writ	ing to	o Sa	ve th	e Chi	Idre	en Federation, In	c., 54 Wilton	Road	, Wes	tport	,
CT 06880, or by calling 1-800-728-3843, or by	y sending	an e	mail	to tw	ebste	er@	savechildren.org	J.				
	1	1			_	1						
61) RUDOLPH VON BERNUTH												
DIR OF ALLIANCE COOP IN EMERG	35.00					X	220,043.		0	3	35,6	35.
	ı	1						1				
	-											
					+				-			
									-+			
	-											
	-											
	-											
1b Sub-total	•					▶						
c Total from continuation sheets to Part VII, S	ection A					<b>&gt;</b>						
d Total (add lines 1b and 1c)						<b>&gt;</b>						
2 Total number of individuals (including but not		hose	listed	d abo	ve) wh	o re	eceived more than	\$100,000 of				
reportable compensation from the organization	n ▶	183	<u>l</u>									
									ſ		Yes	No
3 Did the organization list any former office												
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ind	lividu	al						3	Х	
4 For any individual listed on line 1a, is the												
organization and related organizations gro								le J for su	ch		37	
individual									•	4	Х	
5 Did any person listed on line 1a receive or										-	Х	
for services rendered to the organization? <i>If "You Section B. Independent Contractors</i>	es, compre	te Sci	reaui	e J IC	or Sucri	per	rson			5	Λ	
Complete this table for your five highest com	nensated i	nden	andaı	nt co	ntracto	ore t	that received more	than \$100 0	00 of			
compensation from the organization. Report of										s tax		
year.	•				,		J	J				
(A)							(B)			(C)		
Name and business add	Iress						Description of se	ervices	Cor	mpensa	ation	
2 Total number of independent contractors (in				ited	to tho	se I	isted above) who	received				
more than \$100,000 in compensation from th	e organizat	ion 🕽	▶									

JSA 1E1055 2.000

Page 9

Par	rt VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns 1	<b>a</b> 1,083,618.				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1	b				
fts, r An	С		C 509,742.				
j g	d		d				
ons	е	Government grants (contributions)1	<b>e</b> 238,736,991.				
outi	f	All other contributions, gifts, grants,	_				
Ē			<b>f</b> 347,751,898.				
a So a	g	Noncash contributions included in lines 1a-1f: \$\footnote{Total.} Add lines 1a-1f \tag{1}		F00 000 040			
<u>e</u>	-"	Total. Add lilles Ta-11	Business Code	588,082,249.			
Program Service Revenue	2a	FEE FOR SERVICE CONTRACTS	624200	5,909,090.	5,909,090.		
Re	b	THE TON BERVIOL CONTINUED		3,303,030.	3,303,030.		
ice/	,						
Ser	d						
E	e						
ogra	f	All other program service revenue					
<u> </u>	g	Total. Add lines 2a-2f	<u> ▶</u>	5,909,090.			
	3	Investment income (including dividends,	interest, and				
		other similar amounts)		2,245,820.			2,245,820.
	4	Income from investment of tax-exempt bo		0			
	5	Royalties (i) Real	(ii) Personal	0			
	_		<u> </u>				
	6a		703.				
	b	2000: 10:110: 07.00:000 1 1 1					
	c d	11011101111001110011100111001110		29,841.			29,841.
		(i) Securiti	es (ii) Other	2570111			257011.
	7a	Gross amount from sales of assets other than inventory 92,939,	210. 141,264.				
	b	Less: cost or other basis					
		and sales expenses 90,135,	956.				
	С	Gain or (loss)	254. 141,264.				
	d	Net gain or (loss)	<u> </u>	2,944,518.			2,944,518.
ne	8a	Gross income from fundraising					
'en		events (not including \$509,742.					
Şe.		of contributions reported on line 1c).					
Other Revenue		See Part IV, line 18					
Ę	b	Less: direct expenses  Net income or (loss) from fundraising ever		20,105.			20,105.
0		Gross income from gaming activities.	113 1 1 1 1 1 1 1 1 1	20,103.			20,103.
	Ja	See Part IV, line 19	_ a   _				
	b	Less: direct expenses					
	1	Net income or (loss) from gaming activitie		0			
	10a	Gross sales of inventory, less returns and allowances	<b>a</b> 530.				
	b	Less: cost of goods sold	<b>b</b> 530.				
	С	Net income or (loss) from sales of inventor		0			
		Miscellaneous Revenue	Business Code				
	11a	SC MEMBER EQUITABLE COST RECOVERY	611600	800,097.			800,097.
	b	MISCELLANEOUS RECEIPTS	624200	447,772.			447,772.
	C .	CONTRACT FEE INCOME	900099	21,245.			21,245.
	d	All other revenue		1,269,114.			
	12	Total. Add lines 11a-11d  Total revenue. See instructions		600,500,737.	5,909,090.		6,509,398.
	-	. C.a. Toronaoi Oco mondonono i i i i i		000,000,101.	3,202,030.		Form <b>990</b> (2011)

Form 990 (2011)

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX (B) Program service (D) Fundraising (A) Total expenses Do not include amounts reported on lines 6b, Management and 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 27,401,490. 27,401,490. Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 186,472,588. 186,472,588. Benefits paid to or for members Compensation of current officers, directors, 4,439,171. 1,662,982. 2,251,187. 525,002. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 214,885. 214,885 109,513,284. 95,233,583. 7,076,098. 7,203,603. 7 Other salaries and wages Pension plan accruals and contributions (include section 2,414,861. 605,703. 493,715. 401(k) and 403(b) employer contributions) 3,514,279 28,765,611. 24,896,031. 2,163,635. 1,705,945. 4,375,826. 3,296,621. 562,590. 516,615. 10 Fees for services (non-employees): 1,630,568. 1,630,568. a Management 23,033. 786,590. 286,517. 477,040. 1,202,742. 433,213. 769,529. 6,092,660. 6,092,660. e Professional fundraising services. See Part IV, line 17 1,297,966. 330,604. 965,443. 1,919. f Investment management fees 17,823,493. 15,034,122. 2,789,371. -386,941. 719,750. 71,679 1,035,012. 12 Advertising and promotion 107,756,239. 103,346,143. 1,448,711. 2,961,385. 13 7,206,426. 2,522,211. 3,387,048. 1,297,167. 14 Information technology 15 Royalties 10,520,943. 9,763,188. 362,214. 395,541. 16 26,113,888. 24,880,097. 698,177. 535,614. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 1,977,464. 1,975,042. 810 1,612. Conferences, conventions, and meetings 19 0 21 Payments to affiliates 1,862,805. 951,447. 601,828 309,530. 22 Depreciation, depletion, and amortization . . . . 772,845. 657,017. 71,419. 44,409. Insurance 23 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.) 28,800,983. 28,800,983. a OTHER PROJECT COSTS b FIELD TRAINING 2,222,292. 2,222,292. 857,730. c CREDIT CARD FEES 858,423. 353. 340. 238,167. 84,210. d MEMBERSHIP\_DUES\_\_\_\_\_ 114,468. 39,489. -2,442,016. -394,775. -3,153,957. 1,106,716. e All other expenses \_\_\_\_\_\_ 580,139,362. 532,129,022. 20,964,989. 27,045,351. Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720) 0

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_	rt X	Balance Sheet			Tage 11
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	95,649,108.	1	68,885,700.
	2	Savings and temporary cash investments	27,816,586.	2	39,297,592.
	3	Pledges and grants receivable, net	48,970,905.	3	62,339,040.
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, ke	ey		
		employees, and highest compensated employees. Complete Part II of	of		
	6	Schedule L Receivables from other disqualified persons (as defined under sectio 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributin employers and sponsoring organizations of section 501(c)(9) voluntar employees' beneficiary organizations (see instructions)	g ry		0
ets	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	17,729,624.	8	13,015,354.
•	9	Prepaid expenses and deferred charges		9	15,981,369.
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 37,273,416	5.		
	b	Less: accumulated depreciation 10b 21,530,953	3. 15,424,548.	10c	15,742,463.
	11	Investments - publicly traded securities		11	52,223,173.
	12	Investments - other securities. See Part IV, line 11		12	64,079,669.
	13	Investments - program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11		15	5,006,479.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	336,570,839.
	17	Accounts payable and accrued expenses		17	26,419,189.
	18	Grants payable	95,911,718.	18	104,797,015.
	19	Deferred revenue	955,976.	19	497,198.
	20	Tax-exempt bond liabilities	0	20	0
Liabilities	21 22	Escrow or custodial account liability. Complete Part IV of Schedule I Payables to current and former officers, directors, trustees, ke		21	0
iii	22	employees, highest compensated employees, and disqualified persons			
Ë		Complete Part II of Schedule L		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		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	11,384,849.	25	10,346,205.
	26	Total liabilities. Add lines 17 through 25	135,885,831.	26	142,059,607.
es		Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	107,759,896.	27	108,147,315.
Bal	28	Temporarily restricted net assets	45,191,241.	28	58,292,552.
Fund Balances	29	Permanently restricted net assets	26,284,158.	29	28,071,365.
or Fu		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			
its	30	Capital stock or trust principal, or current funds		30	
Net Assets or	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ť.	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ne	33	Total net assets or fund balances	179,235,295.	33	194,511,232.
_	34	Total liabilities and net assets/fund balances	315,121,126.	34	336,570,839.

— 1	Total revenue (must equal Part VIII, column (A), line 12)	1	600,5	00,737.
2	Total expenses (must equal Part IX, column (A), line 25)	2	580,1	39,362.
3	Revenue less expenses. Subtract line 2 from line 1	3	20,3	61,375.
	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	179,2	35,295.
5	Other changes in net assets or fund balances (explain in Schedule O)		-5,0	85,438.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))	6	194,5	11,232.
	Figure in Otataments and Departing			

Part XII Financial Statements and Reporting

	Check if Schedule O contains a response to any question in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a separate basis, consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	X	

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

# **Public Charity Status and Public Support**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Nan	ne of t	he organization							Emplo	yer iden	tification nu	mber
SAY	VE T	HE CHILDREN FE	EDERATION, IN	C.						06	-0726487	7
Pa	rt I	Reason for Publ	lic Charity Status	<b>s</b> (All organizations mu	ıst con	nplete	this pa	art.) Se	e instr	uctions		
The	orga	nization is not a priv	ate foundation bed	cause it is: (For lines 1 th	rough	11, che	eck only	one bo	x.)			
1		A church, convention	on of churches, or	association of churches	describ	ed in s	ection	170(b)(	(1)(A)(i)	-		
2				(1)(A)(ii). (Attach Schedul								
3				ervice organization descr			-					
4				erated in conjunction wi	ith a h	ospita	I descr	ibed in	sectio	n 170(k	o)(1)(A)(iii)	. Enter the
		hospital's name, cit										
5		= :		nefit of a college or univ	ersity	owned	l or ope	erated b	oy a go	vernme	ntal unit d	escribed in
_		section 170(b)(1)(A		·								
6	$\vdash$		-	or governmental unit des						., .		
7	X	=		es a substantial part of it	s supp	ort fro	m a go	vernme	ental ur	iit or fro	om the gei	neral public
•		described in sectio			l.4. F	) - ut II \						
8	$\vdash$			on 170(b)(1)(A)(vi). (Com				o o ntrib	tiono		arabia faaa	and arasa
9		_	·-	es: (1) more than 331/3% exempt functions - sub								_
		•		ome and unrelated busi	•				٠,			
		· · ·		ne 30, 1975. See section						11 511	tax) IIOIII	Dusinesses
10		· · · · ·		ted exclusively to test for						<b>.</b>		
11		-	-	rated exclusively for the	-	-				-	or to ca	rry out the
	ш	•	•	ipported organizations de			•					•
				es the type of supporting					-			
		a Type I	<b>b</b> Type	II c Type	III - Fu	unction	ally inte	grated		d	Type III -	Other
е		By checking this I	box, I certify that	the organization is not	contr	olled o	directly	or ind	irectly	by one	or more	disqualified
		persons other than	foundation mana	gers and other than one	or mo	re pub	licly su	pported	d organ	izations	described	d in section
		509(a)(1) or section	n 509(a)(2).									
f		_		n determination from th	e IRS	that it	is a T	уре І, Т	Type II,	or Typ	e III suppo	orting
		organization, check										📙
Q	l		006, has the orga	nization accepted any gif	t or co	ntributi	on from	n any of	the			
		following persons?										
				ectly controls, either alor			er with	person	s desc	ribed in		Yes No
		• •		dy of the supported organ	iization	?					11g	
				scribed in (i) above?	hava2						11g(	
L				on described in (i) or (ii) a							11g(	
h		ame of supported	(ii) EIN	ut the supported organization			(A) Did v	ou notify	6.63	lo tho	(vii) An	nount of
		organization	(11) = 114	(described on lines 1-9	organi	Is the zation in	the orga	anization		ls the zation in		port
				above or IRC section (see instructions))	your go	listed in overning		. (i) of upport?		rganized U.S.?		
				(GGG IIIGII GGIIGIIG))	Yes	Ment?	Yes	No	Yes	No		
(A)												
/D\												
(B)												
(C)												
(D)												
(E)												
<del></del> ,												
Tot	al											

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

Schedule A (Form 990 or 990-EZ) 2011 Page 2

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	455,115,120.	109,730,246.	437,508,125.	529,965,504.	588,082,249.	2,120,401,244.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	455,115,120.	109,730,246.	437,508,125.	529,965,504.	588,082,249.	2,120,401,244.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
•	shown on line 11, column (f)						16,761,002.
<u>6</u> Sec	Public support. Subtract line 5 from line 4. tion B. Total Support						2,103,640,242.
	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
		`,	. ,	` ,	. ,	· ,	
7 8	Amounts from line 4	455,115,120.	109,730,246.	437,508,125.	529,965,504.	588,082,249.	2,120,401,244.
0	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,412,174.	1,658,324.	1,368,829.	2,315,698.	2,307,523.	16,062,548.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	89,031.		27,151.			116,182.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) ATCH 1	498,904.	-172,470.	9,102.	1,201,221.	1,269,114.	2,805,871.
11	Total support. Add lines 7 through 10						2,139,385,845.
12	Gross receipts from related activities, etc. (s						23,668,907.
13	First five years. If the Form 990 is for organization, check this box and stop here		· · · · · · · · · · · ·				
	tion C. Computation of Public Sup						
14	Public support percentage for 2011 (lin		-			14	98.33 % 97.45 %
15	Public support percentage from 2010					15	
16a	331/3% support test - 2011. If the o						
	this box and <b>stop here.</b> The organization						
b	331/3% support test - 2010. If the o						
47-	check this box and <b>stop here.</b> The orga						
17a	10%-facts-and-circumstances test - 2	_					
	10% or more, and if the organization					-	•
	Part IV how the organization meets t			_			
	organization						
D	10%-facts-and-circumstances test - 2	_					
	15 is 10% or more, and if the organization in Part IV how the organization						-
	Explain in Part IV how the organization				-	•	
18	supported organization  Private foundation. If the organization	did not check a	a box on line 13	, 16a, 16b, 17a	, or 17b, check	this box and see	
	instructions	<u> </u>				abadula A (Farm (	
					•	- I I. I - A /F 0	.00 000 EZ\ 0044

Schedule A (Form 990 or 990-EZ) 2011 Page **3** 

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

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

Sec	tion A. Public Support			•		,	
	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
1	Gifts, grants, contributions, and membership fees					( )	
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
•	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
h	received from disqualified persons  Amounts included on lines 2 and 3						
~	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b.						
8	Public support (Subtract line 7c from						
<del></del>	line 6.)						
	tion B. Total Support	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2001	(6) 2000	(0) 2000	(4) 2010	(6) 2011	(i) rotai
	Amounts from line 6						
	payments received on securities loans,						
	rents, royalties and income from similar						
<b>L</b>	Sources.						
D	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is regularly						
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
4.5	(Explain in Part IV.)						
13	, , ,						
	and 12.)	0	l. C	0.1.1.6.0	COL. I.		(-)(0)
14	First five years. If the Form 990 is for	-			•		
<del></del>	organization, check this box and stop here tion C. Computation of Public Sup						
15	Public support percentage for 2011 (line 8			mp (f))		45	%
16						15	
	Public support percentage from 2010 Sche tion D. Computation of Investmen			<u> </u>		16	-/0
	Investment income percentage for 2011 (li			13 column (f))		17	%
17 18							<u>%</u> %
18	Investment income percentage from 2010					18	
туа	331/3% support tests - 2011. If the org	-					. —
L	17 is not more than 331/3%, check th		_				
a	331/3% support tests - 2010. If the orga						
20	line 18 is not more than 331/3%, check <b>Private foundation.</b> If the organization		•	•	. ,		
20	a.a ioanaanon n uic organization	ara mot oncon	a box on mic	, .ou, or 13L	, oncor una Di	on and occ mon	400000 F

JSA 1E1221 1.000 Schedule A (Form 990 or 990-EZ) 2011 Page **4** 

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

2008 TAX YEAR

SCHEDULE A, PART II

THE 2008 RETURN WAS PREPARED FOR OCTOBER 1, 2008 TO DECEMBER 31, 2008

ONLY DUE TO A CHANGE IN ACCOUNTING PERIOD.

					ATTACHMENT 1	
SCHEDULE A, PART II - C	THER INCOM	E				
DESCRIPTION	2007	2008	2009	2010	2011	TOTAL
INSURANCE CLAIMS RECOVERY	199,426.					199,426.
MISCELLANEOUS RECEIPTS	40,270.	128.	9,102.	655,083.	447,772.	1,152,355.
SALE OF MAILING LIST	71,217.	7,046.				78,263.
FEDERAL EXCISE TAX REFUND	121,292.					121,292.
PARTNERSHIP INCOME	66,699.	-179,644.				-112,945.
COURSE AND SEMINAR FEES				100,155.		100,155.
SC MEMBER EQUITABLE COST RECOV				445,983.	800,097.	1,246,080.
CONTRACT FEE INCOME					21,245.	21,245.
<del>-</del>						

<u>498,904.</u> <u>-172,470.</u> <u>9,102.</u> <u>1,201,221.</u> <u>1,269,114.</u> <u>2,805,871.</u>

TOTALS

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

# Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

-	DED ARTON THE	Employer identification number
SAVE THE CHILDREN FEL	DERATION, INC.	06-0726487
Organization type (check one):		
Organization type (check one):  Filers of:  Section:  Form 990 or 990-EZ  X 501(c)(03 ) (enter number) organization  4947(a)(1) nonexempt charitable trust not treated as a private foundation  527 political organization  501(c)(3) exempt private foundation  4947(a)(1) nonexempt charitable trust treated as a private foundation  4947(a)(1) nonexempt charitable trust treated as a private foundation  501(c)(3) taxable private foundation  Check if your organization is covered by the General Rule or a Special Rule.  Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See natructions.  Seneral Rule  For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.		
Drganization type (check one):  Filers of:  Section:  Form 990 or 990-EZ  X 501(c)(03 ) (enter number) organization  4947(a)(1) nonexempt charitable trust not treated as a private foundation  527 political organization  501(c)(3) exempt private foundation  4947(a)(1) nonexempt charitable trust treated as a private foundation  4947(a)(1) nonexempt charitable trust treated as a private foundation  501(c)(3) taxable private foundation  Check if your organization is covered by the General Rule or a Special Rule.  Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.  General Rule  For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.  Special Rules  X For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contributor of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1.  For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.  For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.		
	Section:    30 or 990-EZ	ndation
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation  527 political organization  501(c)(3) exempt private foundation  4947(a)(1) nonexempt charitable trust treated as a private foundation  501(c)(3) taxable private foundation  ered by the <b>General Rule</b> or a <b>Special Rule</b> .	
Form 990-PF	501(c)(3) exempt private foundation	(1) nonexempt charitable trust <b>not</b> treated as a private foundation  (1) nonexempt private foundation (1) nonexempt charitable trust treated as a private foundation (3) taxable private foundation  (3) taxable private foundation  (4) anization can check boxes for both the General Rule and a Special Rule. See  (5) See See See See See See See See See Se
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
		or more (in money or
Form 990-PF  501(c)(3) exempt private foundation  4947(a)(1) nonexempt charitable trust treated as a private foundation  501(c)(3) taxable private foundation  Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.  General Rule  For an organization filling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or		
under sections 509(a the greater of <b>(1)</b> \$5,	a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 000 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	e year, a contribution of
during the year, total	contributions of more than \$1,000 for use exclusively for religious, charital	ble, scientific, literary,
during the year, cont not total to more that year for an <i>exclusivel</i> applies to this organi	ributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but the n \$1,000. If this box is checked, enter here the total contributions that were y religious, charitable, etc., purpose. Do not complete any of the parts unlest ization because it received nonexclusively religious, charitable, etc., contributions.	ese contributions did the received during the test the <b>General Rule</b> toutions of \$5,000 or
990-EZ, or 990-PF), but it <b>mus</b> t	s not covered by the General Rule and/or the Special Rules does not file So t answer "No" on Part IV, line 2, of its Form 990; or check the box on line F PF, to certify that it does not meet the filing requirements of Schedule B (For	l of its Form 990-EZ or on

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization SAVE THE CHILDREN FEDERATION, INC.

Employer identification number 06-0726487

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _		\$157,809,912.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2 _		\$29,663,565.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3 _		\$14,572,128.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4 _		\$27,609,565.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)

Name of organization SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

Part II	Noncash Property	(see instructions	). Use duplicate co	opies of Part II if ac	Iditional space is needed.

alli	Troncastri roperty (see instructions). Ose duplicate copies	on i art ii ii additional space is nee	aca.
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	AGRICULTURAL COMMODITIES RECEIVED FOR PURPOSES OF FAMINE RELIEF EFFORTS		
		\$\$	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	AGRICULTURAL COMMODITIES RECEIVED FOR PURPOSES OF FAMINE RELIEF EFFORTS		
		\$\$.	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		    \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organization SAVE THE CHILDREN FEDERATION, INC. **Employer identification number** 06-0726487 Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations

For c	total more than \$1,000 for the year	enter the total of excl	usively religious,	charitable, etc.,
	ibutions of <b>\$1,000 or less</b> for the duplicate copies of Part III if addition	• `		ee instructions.) ►\$
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held
		(e) Transfe	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	onship of transferor to transferee
(a) No				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
-				
		(e) Transfe	er of gift	
	Transferee's name, address, ar			onship of transferor to transferee
-				
(a) No				T
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
_				
_				
		(e) Transfo	er of gift	1
			-	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	onship of transferor to transferee
_				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
_				
				-
				-
		(e) Transfo	er of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	onship of transferor to transferee
—				

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

### **SCHEDULE C**

(Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

➤ See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) org	anizations: Complete Part III.			
Nam	e of organization			Employer identif	fication number
SAV	E THE CHILDREN FEDER	RATION, INC.		06-072	26487
Pai	rt I-A Complete if the o	rganization is exempt under s	section 501(c) or i	s a section 527 organ	ization.
1	Provide a description of the	organization's direct and indirect p	olitical campaign ac	tivities in Part IV.	
2	Political expenditures			<b>▶</b> \$	0
3	Volunteer hours				
Par	t I-B Complete if the o	rganization is exempt under s	ection 501(c)(3).		
1		cise tax incurred by the organization			
2		cise tax incurred by organization m			
3		a section 4955 tax, did it file Form			
4a b	If "Yes," describe in Part IV.				
Par	rt I-C Complete if the o	rganization is exempt under s	section 501(c), ex	cept section 501(c)(3)	
1	Enter the amount directly e	xpended by the filing organization	for section 527 ex	empt function	
2		ng organization's funds contributed	•		
		es			
3	·	enditures. Add lines 1 and 2. En			
4		e Form 1120-POL for this year?			Yes No
5		and employer identification numb			
		<ul> <li>s. For each organization listed, entributions received that were prom</li> </ul>			
		nd or a political action committee			
		-			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
				,	delivered to a separate political organization. If
					none, enter -0
					<u> </u>
(1)					
(2)					
(2)					
(2)					
(3)					
(4)					
(-)					
(5)					
(6)					

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

Pa	art II-A Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	l filed Form 5768 (elec	tion under
Α	Check ▶ if the filing organization	belongs to an affiliated group (and list in Pa	art IV each affiliated gro	oup member's
	name, address, EIN, exp	enses, and share of excess lobbying expend	ditures).	
В	Check ▶ if the filing organization	checked box A and "limited control" provisi	ions apply.	
		bying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amounts paid or incurred.)	organization's totals	group totals
1 a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	13,973.	
b	Total lobbying expenditures to influence	a legislative body (direct lobbying)	363,875.	
С	Total lobbying expenditures (add lines 1	a and 1b)	377,848.	
d			531,751,174.	
е		d lines 1c and 1d)	532,129,022.	
f	Lobbying nontaxable amount. Enter the			
	columns.	-	1,000,000.	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25	5% of line 1f)	250,000.	
h	Subtract line 1g from line 1a. If zero or le	ess, enter -0-	0	0
i	Subtract line 1f from line 1c. If zero or le	ss, enter -0-	0	0
j	If there is an amount other than zero on	either line 1h or line 1i, did the organization file	Form 4720	
	reporting section 4911 tax for this year?			Yes No
		4 Vacuation Davied Haday Costion 504/h		

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Exper	nditures During 4-Yo	ear Averaging Period	l	
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	(e) Total
2 a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
c Total lobbying expenditures	3,926.	124,749.	462,597.	377,848.	969,120.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	2,591.	32,130.	43,252.	13,973.	91,946.

Schedule C (Form 990 or 990-EZ) 2011 Page **3** 

did the filing organization attempt to influence foreign, national, state or local uding any attempt to influence public opinion on a legislative matter or ough the use of:  nagement (include compensation in expenses reported on lines 1c through 1i)? ments? nbers, legislators, or the public? published or broadcast statements? organizations for lobbying purposes? with legislators, their staffs, government officials, or a legislative body? trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)? the amount of any tax incurred under section 4912 the amount of any tax incurred by organization managers under section 4912 inization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).  ally all (90% or more) dues received nondeductible by members?	(a) Yes No		(b) Amou	nt	
did the filing organization attempt to influence foreign, national, state or local uding any attempt to influence public opinion on a legislative matter or ough the use of:  nagement (include compensation in expenses reported on lines 1c through 1i)? ments?  nbers, legislators, or the public? published or broadcast statements? organizations for lobbying purposes?  with legislators, their staffs, government officials, or a legislative body? trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)? the amount of any tax incurred under section 4912 the amount of any tax incurred by organization managers under section 4912 nization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).			Amou	nt	
uding any attempt to influence public opinion on a legislative matter or ough the use of:  nagement (include compensation in expenses reported on lines 1c through 1i)? ments? nbers, legislators, or the public? published or broadcast statements? organizations for lobbying purposes? with legislators, their staffs, government officials, or a legislative body? trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)? the amount of any tax incurred under section 4912 the amount of any tax incurred by organization managers under section 4912 nization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).	(c)(5), or				
nagement (include compensation in expenses reported on lines 1c through 1i)? ments? nbers, legislators, or the public? published or broadcast statements? organizations for lobbying purposes? vith legislators, their staffs, government officials, or a legislative body? trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)? le amount of any tax incurred under section 4912 le amount of any tax incurred by organization managers under section 4912 nization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).	(c)(5), or				
ments?  nbers, legislators, or the public?  published or broadcast statements?  organizations for lobbying purposes?  vith legislators, their staffs, government officials, or a legislative body?  trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i  is in line 1 cause the organization to be not described in section 501(c)(3)?  the amount of any tax incurred under section 4912  the amount of any tax incurred by organization managers under section 4912  nization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).	(c)(5), or				
ments?  nbers, legislators, or the public?  published or broadcast statements?  organizations for lobbying purposes?  vith legislators, their staffs, government officials, or a legislative body?  trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i  is in line 1 cause the organization to be not described in section 501(c)(3)?  the amount of any tax incurred under section 4912  the amount of any tax incurred by organization managers under section 4912  nization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).	(c)(5), or				
published or broadcast statements? organizations for lobbying purposes? with legislators, their staffs, government officials, or a legislative body? trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)? the amount of any tax incurred under section 4912 the amount of any tax incurred by organization managers under section 4912 nization incurred a section 4912 tax, did it file Form 4720 for this year?  Lete if the organization is exempt under section 501(c)(4), section 501(6).	(c)(5), or				
organizations for lobbying purposes?  with legislators, their staffs, government officials, or a legislative body?  trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)?  the amount of any tax incurred under section 4912  the amount of any tax incurred by organization managers under section 4912  nization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).	(c)(5), or				
organizations for lobbying purposes?  with legislators, their staffs, government officials, or a legislative body?  trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i  is in line 1 cause the organization to be not described in section 501(c)(3)?  the amount of any tax incurred under section 4912  the amount of any tax incurred by organization managers under section 4912  nization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).	(c)(5), or				
with legislators, their staffs, government officials, or a legislative body?  trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)? lee amount of any tax incurred under section 4912 lee amount of any tax incurred by organization managers under section 4912 nization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).	(c)(5), or				
trations, seminars, conventions, speeches, lectures, or any similar means?  1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)? le amount of any tax incurred under section 4912 le amount of any tax incurred by organization managers under section 4912 nization incurred a section 4912 tax, did it file Form 4720 for this year?  lete if the organization is exempt under section 501(c)(4), section 501(6).	c)(5), or				_
1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)? le amount of any tax incurred under section 4912 le amount of any tax incurred by organization managers under section 4912 nization incurred a section 4912 tax, did it file Form 4720 for this year? lete if the organization is exempt under section 501(c)(4), section 501(6).	c)(5), or				
1c through 1i s in line 1 cause the organization to be not described in section 501(c)(3)? le amount of any tax incurred under section 4912 le amount of any tax incurred by organization managers under section 4912 nization incurred a section 4912 tax, did it file Form 4720 for this year? lete if the organization is exempt under section 501(c)(4), section 501(6).	c)(5), or				
is in line 1 cause the organization to be not described in section 501(c)(3)?  the amount of any tax incurred under section 4912  the amount of any tax incurred by organization managers under section 4912  nization incurred a section 4912 tax, did it file Form 4720 for this year?  the if the organization is exempt under section 501(c)(4), section 501(6).	c)(5), or				
the amount of any tax incurred under section 4912 the amount of any tax incurred by organization managers under section 4912 inization incurred a section 4912 tax, did it file Form 4720 for this year?  Lete if the organization is exempt under section 501(c)(4), section 501(6).	c)(5), or				
nization incurred a section 4912 tax, did it file Form 4720 for this year?	c)(5), or				
nization incurred a section 4912 tax, did it file Form 4720 for this year? lete if the organization is exempt under section 501(c)(4), section 501(6).	c)(5), or				
(6).	c)(5), or				
ally all (90% or more) dues received nondeductible by members?		sectio	n		
ally all (90% or more) dues received nondeductible by members?				Yes	No
			1		
ation make only in-house lobbying expenditures of \$2,000 or less?			2		
ation agree to carry over lobbying and political expenditures from the prior year?			3		
ete if the organization is exempt under section 501(c)(4), section 501( (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" 0 red "Yes."				, is	
nts and similar amounts from members		1			
	nts of				
		2a			
ast year		2b			
		2c			
unt reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	s	3			
•					
	bbying				
		-			
		5			
	nondeductible lobbying and political expenditures (do not include amounties for which the section 527(f) tax was paid).  ast year  unt reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due sent and the amount on line 2c exceeds the amount on line 3, what portion a organization agree to carryover to the reasonable estimate of nondeductible lobe penditure next year?  of lobbying and political expenditures (see instructions)	nondeductible lobbying and political expenditures (do not include amounts of the section 527(f) tax was paid).  ast year  unt reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues sent and the amount on line 2c exceeds the amount on line 3, what portion of the corganization agree to carryover to the reasonable estimate of nondeductible lobbying penditure next year?  of lobbying and political expenditures (see instructions)  emental Information  provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A	nondeductible lobbying and political expenditures (do not include amounts of ses for which the section 527(f) tax was paid).  2a ast year  2b 2c unt reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues sent and the amount on line 2c exceeds the amount on line 3, what portion of the organization agree to carryover to the reasonable estimate of nondeductible lobbying penditure next year?  4 of lobbying and political expenditures (see instructions)  5 provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and	nondeductible lobbying and political expenditures (do not include amounts of ses for which the section 527(f) tax was paid).  2a  ast year  2b  2c  unt reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues sent and the amount on line 2c exceeds the amount on line 3, what portion of the organization agree to carryover to the reasonable estimate of nondeductible lobbying penditure next year?  4 of lobbying and political expenditures (see instructions)  5 provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B	nondeductible lobbying and political expenditures (do not include amounts of ses for which the section 527(f) tax was paid).  2a  ast year  2b  2c  unt reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues sent and the amount on line 2c exceeds the amount on line 3, what portion of the eroganization agree to carryover to the reasonable estimate of nondeductible lobbying penditure next year?  of lobbying and political expenditures (see instructions)  semental Information

Schedule C (Form 990 or 990-EZ) 2011 Page **4** 

Part IV Supplemental Information (continued)

# SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Nam	e of the organization				E	mployer identification number
_	VE THE CHILDREN FEDERATION, INC.					06-0726487
Pa	organizations Maintaining Donor Advisorganization answered "Yes" to Form 990		r Sir	milar Funds o	or Ac	counts. Complete if the
		(a) Donor ad	vised	funds		(b) Funds and other accounts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year.					
5	Did the organization inform all donors and donor ad	visors in writing th	at the	e assets held i	n don	or advised
	funds are the organization's property, subject to the o	organization's exclu	sive l	egal control?		Yes 🔲 No
6	Did the organization inform all grantees, donors, and					
	only for charitable purposes and not for the benefit of				•	
_	conferring impermissible private benefit?					
	Conservation Easements. Complete if the				Form	990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the o	= '	ııı ınaı	1		
	Preservation of land for public use (e.g., recrea	tion or education)	$\vdash$			historically important land area
	Protection of natural habitat			Preservation	of a	certified historic structure
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held	d a qualified conser	vatio	n contribution	in the	form of a conservation
	easement on the last day of the tax year.					
						Held at the End of the Tax Year
а	Total number of conservation easements				_ 2a	
b	Total acreage restricted by conservation easements				_ 2b	
С	Number of conservation easements on a certified his	storic structure inclu	ıded i	n (a)	_ 2c	
d	Number of conservation easements included in (c) a	cquired after 8/17/	06, a	nd not on a		
	historic structure listed in the National Register				_ 2d	
3	Number of conservation easements modified, transf					by the organization during the
	tax year ▶					
4	Number of states where property subject to conserv					
5	Does the organization have a written policy regarding violations, and enforcement of the conservation ease	- :				-
6	Staff and volunteer hours devoted to monitoring, ins					
	<b>&gt;</b>	<b>5</b> ,	J			3 ,
7	Amount of expenses incurred in monitoring, inspecting	ng, and enforcing c	onsei	rvation easem	ents c	luring the year
	<b>▶</b> \$					
8	Does each conservation easement reported on line 2					
_	(i) and section 170(h)(4)(B)(ii)?					
9	In Part XIV, describe how the organization reports of					•
	balance sheet, and include, if applicable, the text of organization's accounting for conservation easement		orgar	nization's finan	iciai s	tatements that describes the
Da					C:	miles Accets
Га	rt III Organizations Maintaining Collections of Complete if the organization answered "	Yes" to Form 990	, Par	t IV, line 8.	er Sii	illiai Assets.
1a	If the organization elected, as permitted under SFA	S 116 (ASC 958),	not t	to report in its	reve	nue statement and balance sheet
	If the organization elected, as permitted under SFA works of art, historical treasures, or other similar public service, provide, in Part XIV, the text of the foo					
b	If the organization elected, as permitted under SF works of art, historical treasures, or other similar	assets held for pu				
	public service, provide the following amounts relating (i) Revenues included in Form 990, Part VIII, line 1					<b>*</b>
	(ii) Assets included in Form 990, Part X					
•						
2	If the organization received or held works of art,					its for financial gain, provide the
_	following amounts required to be reported under SFA					<b>.</b> .
a b	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X					• • • • • • • • • • • • • • • • • • • •
IJ	7,000to moladed in Form 330, Falt A					· · · · <b>&gt;</b> φ

Schedule D (Form 990) 2011 Page 2

Par	t III Organizations Maintaini	ng Collections of	Art, Historica	al Treasure	s, or (	Other S	Similar Assets	(continu	ıed)	
3	Using the organization's acquisition collection items (check all that app		other records,	check any o	of the	followi	ng that are a si	gnificant	use o	of its
а	Public exhibition		d	Loan or ex	kchang	e progr	ams			
b	Scholarly research		е	Other						
С	Preservation for future ge	enerations								
4	Provide a description of the organ	nization's collections	s and explain	how they fu	rther t	he orga	anization's exem	npt purpo	se in	Part
	XIV.									
5	During the year, did the organization	on solicit or receive o	donations of ar	t, historical t	reasure	es, or o	ther similar			
	assets to be sold to raise funds rath	ner than to be mainta	ained as part o	f the organiz	ation's	collect	ion?	Yes	s [	No
Par	Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.									
1a	Is the organization an agent, truste				ions or	other	assets not			٦
	included on Form 990, Part X?							Yes	S	No
b	If "Yes," explain the arrangement in	Part XIV and comp	lete the followi	ng table:						
							Amount			
	Beginning balance									
	Additions during the year				-					
е	Distributions during the year				-					
f	Ending balance									
	Did the organization include an am		Part X, line 21?	'				Yes	S	No
	If "Yes," explain the arrangement in							_		
Par	t V Endowment Funds. Con									
		(a) Current year	(b) Prior yea		vo years		(d) Three years back		ur years	back
	Beginning of year balance	107,564,982.	89,333,8		893,2		82,789,556			
b	Contributions	8,782,908.	15,991,2	237. 18,	233,5	504.	134,698	•		
С	Net investment earnings, gains,									
_	and losses	-1,300,932.	6,703,7		7,017,594.		-14,919,940			
	Grants or scholarships	4,533,972.	4,377,4	162. 3,	,526,275.		15,277	•		
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses	2,381,187.	86,3		284,256.		95,802			
g	End of year balance	108,131,799.					67,893,235			
2	Provide the estimated percentage	-		ne 1g, columi	n (a)) h	eld as:				
а	Board designated or quasi-endown		)_%							
	Permanent endowment ►23_0									
С	Temporarily restricted endowment									
_	The percentages in lines 2a, 2b, ar	•								
3a	Are there endowment funds not in the possession of the organization that are held and administered for the									
	organization by:							- m	Yes	No
	(i) unrelated organizations							. 3a(i)		X
_	(ii) related organizations									X
b	If "Yes" to 3a(ii), are the related org		•					. 3b		
4	Describe in Part XIV the intended u									
Par	Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.									
	Description of property		other basis (bitment)	Cost or other b (other)	asis	(c) Accu		(d) Book v	alue	
	Land			1,026,7					26,7	
	Buildings			12,818,1		5,32	6,161.	7,4	91,9	984.
С	Leasehold improvements			476,6	92.	11	2,187.	3	364,	505.
d	Equipment			13,237,3	49.	12,14	8,734.	1,0	188,6	515.
	Other			9,714,4			3,871.	5,7	70,5	570.
Tota	I. Add lines 1a through 1e. (Column	(d) must equal Forn	n 990, Part X, o	column (B), lii	ne 10(c	c).)	▶	15,7	42,4	163.

Schedule D (Form 990) 2011 Page **3** 

Part VII Investments - Other Securities.	See Form 990, Part X, line 1	2.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CORPORATE BONDS	2,114,339.	FMV
(B) COMMON COLLECTIVE TRUST FUND		FMV
(C) HEDGE FUNDS	42,435,527.	FMV
(D) PRIVATE EQUITY	2,158,764.	FMV
(E) REAL ESATE PARTNERSHIPS	91,038.	FMV
(F)		
(G)		
(H)		
(I)	64 070 660	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 1:		10
Part VIII Investments - Program Related		
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		•
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15	3.)	
Part IX Other Assets. See Form 990, F	art X, line 15.	
	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 1:		
Part X Other Liabilities. See Form 990		
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes (2) FOREIGN NATL. EMPLOYEES-SEVER	ANCE 5,402,839	0
(3) LOAN PROGRAM FUND ASSETS HELD	J, 402, 83	9.
(4) IN TRUST BY OTHERS	872,650	6
(5) POST RETIREMENT BENEFITS OTHER		
(6) THAN PENSIONS	4,070,710	0.
(7)	1,0,0,71	<u> </u>
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col. (B	) line 25.) <b>\rightarrow</b> 10,346,205	5.
		e organization's financial statements that reports the

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

JSA 1E1270 1.000

Scheau	ie D (Form 990) 2011			Page 4
Part		nent	S	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		600,500,737.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		580,139,362.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		20,361,375.
4	Net unrealized gains (losses) on investments	4		-5,271,025.
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		
8	Other (Describe in Part XIV.)	8		185,590.
9	Total adjustments (net). Add lines 4 through 8	9		-5,085,435.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		15,275,940.
Part		urn		
1	Total revenue, gains, and other support per audited financial statements	L	1	620,550,535.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments 2a -5,271,02	_		
b	Donated services and use of facilities 25,836,31	4.		
С	Recoveries of prior year grants 2c			
d	Other (Describe in Part XIV.) 2d 172,26	7.		
е	Add lines 2a through 2d	🗀	2e	20,737,556.
3	Subtract line 2e from line 1	L	3	599,812,979.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 756,00			
b	Other (Describe in Part XIV.)  4b -68,24	2.		
С	Add lines 4a and 4b		4c	687,758.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	600,500,737.
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	etur	n	
1	Total expenses and losses per audited financial statements	L	1	605,274,595.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities 25,836,31	4.		
b	Prior year adjustments 2b			
С	Other losses 2c			
d	Other (Describe in Part XIV.)  2d 54,91	9.		
е	Add lines 2a through 2d	. <u>.</u> L	2e	25,891,233.
3	Subtract line 2e from line 1	L	3	579,383,362.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b  4a 756,00	0.		
b	Other (Describe in Part XIV.)			
С	Add lines 4a and 4b	L	4c	756,000.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	580,139,362.
	XIV Supplemental Information			
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 3, 5, and 9; Part III, lines 1a and 4; Part III, lines 3, 5, and 9; Part III, lines 1a and 4;	ırt IV,	lines	s 1b and 2b;
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp Iditional information.	iete t	ınıs p	part to provide
arry at				
SEE	PAGE 5			

### Part XIV Supplemental Information (continued)

USE OF ENDOWMENT FUNDS

SCHEDULE D, PART XI, LINE 8

THE POLICY GOVERNING THE INVESTMENT OF SC'S ENDOWMENT IS TWOFOLD: TO

PROVIDE A REASONABLE AND PRUDENT LEVEL OF CURRENT EXPENDABLE INCOME IN

ACCORDANCE WITH THE SPENDING POLICY SET BY THE FINANCE AND ADMINISTRATION

COMMITTEE OF SC'S BOARD OF TRUSTEES (5% OF THE AVERAGE OF THE ENDOWMENT'S

TOTAL MARKET VALUE FOR THE EIGHT QUARTERS PRECEDING AND INCLUDING JUNE

30TH OF THE PREVIOUS YEAR); AND TO SUPPORT SC AND ITS MISSION OVER THE

LONG TERM BY ENSURING THAT THE FUTURE GROWTH OF THE ENDOWMENT IS

SUFFICIENT TO OFFSET NORMAL INFLATION PLUS REASONABLE SPENDING, THEREBY

PRESERVING THE CONSTANT DOLLAR VALUE AND PURCHASING POWER OF THE

ENDOWMENT FOR THE BENEFIT OF FUTURE GENERATIONS OF CHILDREN IN NEED.

UNCERTAIN TAX POSITIONS

SCHEDULE D, PART X, LINE 2

THE INTERNAL REVENUE SERVICE HAS RULED THAT, PURSUANT TO SECTION

501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE), SAVE THE CHILDREN

FEDERATION, INC. (SCUS) IS EXEMPT FROM FEDERAL INCOME TAXES AND IS A

PUBLICLY SUPPORTED ORGANIZATION, AS DEFINED IN SECTION 509(A)(1) OF THE

CODE. AS A NOT-FOR-PROFIT ORGANIZATION, SC IS ALSO EXEMPT FROM STATE AND

LOCAL INCOME TAXES.

SCUS FOLLOWS THE GUIDANCE OF ACCOUNTING STANDARDS CODIFICATION (ASC) 740,

ACCOUNTING FOR INCOME TAXES (ASC 740), RELATED TO UNCERTAINTIES IN INCOME

TAXES, WHICH PRESCRIBES A THRESHOLD OF MORE LIKELY THAN NOT FOR

RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE

Schedule D (Form 990) 2011

### Part XIV Supplemental Information (continued)

TAKEN IN A TAX RETURN. SCUS BELIEVES IT HAS TAKEN NO SIGNIFICANT

UNCERTAIN TAX POSITIONS.

RECONCILIATION OF CHANGE IN NET ASSETS

SCHEDULE D, PART XI, LINE 8

FOREIGN CURRENCY EXCHANGE GAIN : \$ 185,590

OTHER REVENUE INCLUDED IN AUDITED FINANCIAL STATEMENTS BUT NOT IN FORM 990

SCHEDULE D, PART XII, LINE 2D

FOREIGN CURRENCY EXCHANGE GAIN : \$ 172,267

OTHER REVENUE INCLUDED IN FORM 990 BUT NOT IN AUDITED FINANCIAL

STATEMENTS

SCHEDULE D, PART XII, LINE 4B

RENTAL EXPENSE : \$ (31,862)

EVENTS EXPENSE : \$ (35,850)

COST OF GOODS SOLD : \$ (530)

-----

TOTAL LINE 4B : \$ (68,242)

Page 5

OTHER EXPENSE INCLUDED IN AUDITED FINANCIAL STATEMENTS BUT NOT IN FORM 990

SCHEDULE D, PART XIII, LINE 2D

FOREIGN CURRENCY EXCHANGE GAIN : \$ (13,323)

RENTAL EXPENSE : \$ 31,862

EVENTS EXPENSE : \$ 35,850

COST OF GOODS SOLD **:** \$ 530

\_\_\_\_\_

TOTAL LINE 2D : \$ 54,919

### SCHEDULE F (Form 990)

### **Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990. ► See separate instructions.

SAVE TH	E CHILDREN	I FEDERATION	. TNC

Employer identification number 06-0726487

Par	Form 990, Part IV, line 14		Outside the C	Jnited States. Complete	if the organization answe	red "Yes" to		
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the							
	grants or assistance?					X Yes No		
2	For grantmakers. Describe in assistance outside the United Sta		ganization's pi	rocedures for monitoring	the use of its grants a	and other		
3	Activities per Region. (The follow	ving Part I, line	3 table can be	e duplicated if additional sp	pace is needed.)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1)	CENTRAL AMERICA/CARIBBEAN	6.	1,041.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	5,382,196.		
(2)	EAST ASIA AND THE PACIFIC	8.	137.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	16,922,247.		
(3)	EUROPE	2.		GRANTMAKING	RELIEF AND DEVELOPMENT	7,554,060.		
(4)	MIDDLE EAST AND NORTH AFRICA	8.	215.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	5,125,614.		
(5)	NORTH AMERICA	1.		GRANTMAKING	RELIEF AND DEVELOPMENT	237,987.		
(6)	RUSSIA/INDEPENDENT STATES	4.	178.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	3,840,243.		
(7)	SOUTH AMERICA	4.	95.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	926,502.		
(8)	SOUTH ASIA	7.	1,583.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	56,010,458.		
(9)	SUB-SAHARAN AFRICA	16.	1,274.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	40,682,803.		
(10)	CENTRAL AMERICA/CARIBBEAN			GRANTMAKING		2,782,843.		
(11)	MIDDLE EAST AND NORTH AFRICA			GRANTMAKING		762,030.		
(12)	RUSSIA/INDEPENDENT STATES			GRANTMAKING		425,103.		
(13)	SOUTH ASIA			GRANTMAKING		24,484,707.		
(14)	SUB-SAHARAN AFRICA			GRANTMAKING		21,226,466.		
(15)								
(16)								
(17)								
3a b		56.	4,523.			186,363,259.		
^	Totals (add lines 3a and 3h)	E 6	4 522			106 262 250		

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

Schedule F (Form 990) 2011

	Part IV, line 15, for any re Part II can be duplicated if			Check this bo	ox ir no one recipi	ent received n	nore than \$5,00		(C) Madhad at
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	BUILDING SCH	18,000.	WIRE			
(2)			SUB-SAHARAN AFRICA	SUPPORT ALL	56,393.	WIRE			
(3)			RUSSIA	DEVELOPMENT	44,798.	WIRE			
(4)			MIDDLE EAST/NORTH AFRICA	SPONSORSHIP	164,912.	CHECK			
(5)			MIDDLE EAST/NORTH AFRICA	WARNACO (ECC	10,337.	CHECK			
(6)			MIDDLE EAST/NORTH AFRICA	SPONSORSHIP	117,941.	CHECK			
(7)			SUB-SAHARAN AFRICA	SUPPORT ALL	38,959.	CHECK			
(8)			SUB-SAHARAN AFRICA	TO PROVIDE S	265,312.	WIRE			
(9)			SUB-SAHARAN AFRICA	TO DONATE AG	520,035.	WIRE			
(10)			SUB-SAHARAN AFRICA	SUPPORT ALL	1,969,956.	CHECK			
(11)			SOUTH ASIA	NAUSHERO FER	480,135.	WIRE			
(12)			SOUTH ASIA	3RD PAYMENT	582,833.	WIRE			
(13)			SOUTH ASIA	INFECTION MA	19,701.	WIRE			
(14)			CENT. AMERICA/CARIBBEAN	PAYMENT COL.	9,330.	CHECK			
(15)			EAST ASIA/PACIFIC	HIV PREVENTI	270,564.	WIRE			
(16)			SOUTH ASIA	HIV	305,788.	CHECK			
	r total number of recipient orga e IRS, or for which the grantee								

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	ived more than \$5,000.						990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	HIV PREVENTI	638,299.	WIRE			
(2)			SOUTH ASIA	PAYMENT FOR	15,000.	WIRE			
(3)			CENT. AMERICA/CARIBBEAN	SUPPORT GENE	44,697.	CHECK			
(4)			SOUTH AMERICA	SUPPORT	16,500.	WIRE			
(5)			CENT. AMERICA/CARIBBEAN	PROVIDE SUPP	19,834.	CHECK			
(6)			CENT. AMERICA/CARIBBEAN	TRAINING	10,000.	CHECK			
(7)			CENT. AMERICA/CARIBBEAN	LAKAY TIMOUN	27,150.	CHECK			
(8)			MIDDLE EAST/NORTH AFRICA	SCHOOL BASED	50,665.	CHECK			
(9)			SUB-SAHARAN AFRICA	ECD POST INT	119,275.	WIRE			
(10)			SOUTH ASIA	Q2- SNL-INDI	117,192.	WIRE			
(11)			SOUTH ASIA	INDIA FLOODI	154,766.	WIRE			
(12)			SOUTH ASIA	FACILITATING	31,340.	WIRE			
(13)			EAST ASIA/PACIFIC	ENSURING ACC	6,452.	CHECK			
(14)			SOUTH ASIA	HEALTH	5,617.	CHECK			
(15)			SOUTH ASIA	HIV	744,687.	CHECK			
(16)			EAST ASIA/PACIFIC	CMAM COMMMUN	14,095.	WIRE			
by th	r total number of recipient orga e IRS, or for which the grantee	or counsel has pro-	vided a section 501(c)(3) e	quivalency letter			· <b>&gt;</b>		
3 Ente	r total number of other organiza	ations or entities					▶	Schedule F	(Form 990) 2011

JSA

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4	Part II can be duplicate			(1) 5		(f) Manner of	(a) Amount of	(h) Description	(i) Method o
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
1)			EAST ASIA/PACIFIC	CONDUCT HYGI	8,235.	CHECK			
2)			EAST ASIA/PACIFIC	CONDUCT HYGI	5,645.	CHECK			
3)			EAST ASIA/PACIFIC	INFANT & YOU	7,021.	CHECK			
4)			SOUTH ASIA	IMPLEMENTATI	50,653.	CHECK			
5)			SUB-SAHARAN AFRICA	TO PROVIDE S	13,986.	CHECK			
6)			MIDDLE EAST/NORTH AFRICA	MCSW (MATERN	16,006.	CHECK			
7)			MIDDLE EAST/NORTH AFRICA	MCH PROJECT	32,137.	CHECK			
8)			SUB-SAHARAN AFRICA	ENHANCING CH	26,584.	WIRE			
9)			SUB-SAHARAN AFRICA	SUPPORT ALL	31,455.	CHECK			
10)			EAST ASIA/PACIFIC	HIV PREVENTI	993,199.	WIRE			
11)			CENT. AMERICA/CARIBBEAN	PROVIDE SUPP	10,595.	CHECK			
12)			SOUTH AMERICA	REALIZING TH	19,677.	CHECK			
13)			EAST ASIA/PACIFIC	INFANT & YOU	7,021.	CHECK			
14)			EAST ASIA/PACIFIC	INFANT & YOU	7,021.	CHECK			
15)			EAST ASIA/PACIFIC	INFANT & YOU	5,887.	CHECK			
16)			CENT. AMERICA/CARIBBEAN	TRAINING	18,877.	CHECK			

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who recei	ived more than \$5,000						990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	ACCESS TO QU	14,165.	CHECK			
(2)			EAST ASIA/PACIFIC	INTENSIFIED	742,691.	WIRE			
(3)			SOUTH ASIA	FIXED PRICE	23,375.	WIRE			
(4)			SUB-SAHARAN AFRICA	TO PROVIDE S	22,982.	CHECK			
(5)			EAST ASIA/PACIFIC	BASIC EDUCAT	46,629.	WIRE			
(6)			SOUTH ASIA	STRENGTHENIN	104,998.	WIRE			
(7)			SUB-SAHARAN AFRICA	SUPPORT ALL	11,367.	WIRE			
(8)			SOUTH ASIA	IMPLEMENTATI	41,335.	WIRE			
(9)			SUB-SAHARAN AFRICA	SUPPORT ALL	891,967.	WIRE			
(10)			RUSSIA	INCREASING P	103,621.	WIRE			
(11)			SUB-SAHARAN AFRICA	TO PROVIDE S	59,692.	CHECK			
(12)			SOUTH ASIA	MEDICINE			5,242.	VITAMIN A	FMV
(13)			SOUTH ASIA	EDUCATION P	408,252.	CHECK			
(14)			SOUTH ASIA	MYAP PROJECT	149,288.	CHECK			
(15)			SOUTH ASIA	EMPOWERING O	132,085.	WIRE			
(16)			SOUTH ASIA	HEALTH PROG	129,292.	CHECK			
by th	total number of recipient orga e IRS, or for which the grantee total number of other organiza	or counsel has prov	vided a section 501(c)(3)	equivalency letter		_	exempt •	Schedule F	(Form 990) 2011

Page 2 Schedule F (Form 990) 2011

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Metho valuation (book, Fith apprais other)
)			CENT. AMERICA/CARIBBEAN	SUPPORT GENE	344,523.	CHECK			
)			SOUTH ASIA	SUPPORT FOR	15,105.	WIRE			
)			SUB-SAHARAN AFRICA	CHILD PROTEC	149,113.	WIRE			
)			EAST ASIA/PACIFIC	CONSOLIDATIN	18,572.	WIRE			
			SUB-SAHARAN AFRICA	SUPPORT ALL	51,736.	CHECK			
			SUB-SAHARAN AFRICA	SUPPORT ALL	68,253.	WIRE			
			SUB-SAHARAN AFRICA	SUPPORT ALL	46,705.	CHECK			
			SUB-SAHARAN AFRICA	SUPPORT ALL	44,049.	CHECK			
			SOUTH ASIA	IMPROVING LI	389,767.	WIRE			
))			CENT. AMERICA/CARIBBEAN	MAT.& TRAINI	9,997.	CHECK			
)			CENT. AMERICA/CARIBBEAN	TRAINING SUP	5,193.	WIRE			
2)			CENT. AMERICA/CARIBBEAN	TRAINING TEA	8,435.	CHECK			
3)			CENT. AMERICA/CARIBBEAN	PAYMENT HEAL	16,884.	CHECK			
l)			SOUTH ASIA	HIV	678,271.	CHECK			
)			MIDDLE EAST/NORTH AFRICA	SPONSORSHIP	15,113.	CHECK			
6)			MIDDLE EAST/NORTH AFRICA	UNICEF PROJE	9,780.	CHECK			

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	ived more than \$5,000.						990, ▶ □
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			MIDDLE EAST/NORTH AFRICA	SPONSORSHIP	97,467.	CHECK			
(2)			CENT. AMERICA/CARIBBEAN	PAYMENT COL.	11,673.	WIRE			
(3)			RUSSIA	TO IMPROVE Q	61,934.	WIRE			
(4)			RUSSIA	DEVELOPING H	5,784.	WIRE			
(5)			CENT. AMERICA/CARIBBEAN	CHILD PROTEC	15,768.	CHECK			
(6)			CENT. AMERICA/CARIBBEAN	TRAINING	15,658.	WIRE			
(7)			SUB-SAHARAN AFRICA	SPONSORSHIP	111,799.	CHECK			
(8)			EAST ASIA/PACIFIC	HIV PREVENTI	230,412.	WIRE			
(9)			SOUTH ASIA	EDUCATION PR	908,430.	CHECK			
(10)			SOUTH ASIA	HEALTH	587,186.	CHECK			
(11)			SOUTH AMERICA	CONTRIBS FOR	54,082.	CHECK			
(12)			CENT. AMERICA/CARIBBEAN	SUPPORT GENE	15,000.	CHECK			
(13)			CENT. AMERICA/CARIBBEAN	PROJECT IMPL	1,349,057.	WIRE			
(14)			CENT. AMERICA/CARIBBEAN	PROVIDE SUPP	49,737.	CHECK			
(15)			CENT. AMERICA/CARIBBEAN	PROVIDE SUPP	24,649.	CHECK			
(16)			MIDDLE EAST/NORTH AFRICA	SPONSORSHIP	64,432.	CHECK			
by th	r total number of recipient orga e IRS, or for which the grantee r total number of other organiza	or counsel has pro	vided a section 501(c)(3) e	quivalency letter					

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	ived more than \$5,000.						990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	SUPPORT ALL	24,698.	WIRE			
(2)			SUB-SAHARAN AFRICA	SUPPORT ALL	21,422.	WIRE			
(3)			RUSSIA	TO SUPPORT T	16,493.	WIRE			
(4)			CENT. AMERICA/CARIBBEAN	THE PURPOSE	5,355.	CHECK			
(5)			MIDDLE EAST/NORTH AFRICA	WARNACO (ECC	19,432.	CHECK			
(6)			MIDDLE EAST/NORTH AFRICA	ISHRAQ PLUS	34,794.	WIRE			
(7)			SOUTH ASIA	MYAP PROJECT	231,922.	CHECK			
(8)			CENT. AMERICA/CARIBBEAN	TRAINING	5,420.	CHECK			
(9)			SUB-SAHARAN AFRICA	SUPPORT ALL	43,407.	WIRE			
(10)			SUB-SAHARAN AFRICA	TO IMPLEMENT	585,185.	CHECK			
(11)			SOUTH ASIA	HIV	224,258.	CHECK			
(12)			SUB-SAHARAN AFRICA	ECONOMIC STR	17,498.	CHECK			
(13)			CENT. AMERICA/CARIBBEAN	HEALTH	8,640.	CHECK			
(14)			CENT. AMERICA/CARIBBEAN	GENERAL HEAL	544,528.	CHECK			
(15)			SUB-SAHARAN AFRICA	SUPPORT ETHI	99,204.	CHECK			
(16)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	8,055.	WIRE			
by the	total number of recipient orga e IRS, or for which the grantee total number of other organiza	or counsel has prov	vided a section 501(c)(3) e	quivalency letter			<b></b> ▶	0.1	(Form 990) 2011

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuatio (book, FM appraisa other)
)			EAST ASIA/PACIFIC	EDUCATING AN	14,345.	CHECK			
)			SUB-SAHARAN AFRICA	SUPPORT FOR	10,000.	WIRE			
			SUB-SAHARAN AFRICA	SUPPORT PROG	89,783.	WIRE			
)			SOUTH ASIA	IMPROVING AC	1,681,462.	WIRE			
			SOUTH ASIA	HIV	139,976.	CHECK			
			EAST ASIA/PACIFIC	HIV PREVENTI	691,655.	WIRE			
			EAST ASIA/PACIFIC	HIV PREVENTI	728,930.	WIRE			
			EAST ASIA/PACIFIC	INTENSIFIED	889,884.	WIRE			
			EAST ASIA/PACIFIC	SCALING UP T	494,703.	WIRE			
))			SUB-SAHARAN AFRICA	SUPPORT ALL	16,055.	CHECK			
)			SOUTH ASIA	EDUCATION	882,188.	CHECK			
2)			SOUTH ASIA	HIV	116,333.	CHECK			
3)			EAST ASIA/PACIFIC	A SYSTEMATIZ	16,332.	CHECK			
1)			MIDDLE EAST/NORTH AFRICA	REDUCING CHI	223,895.	CHECK			
5)			EAST ASIA/PACIFIC	ENSURING ACC	5,891.	CHECK			
6)			EAST ASIA/PACIFIC	INFANT & YOU	7,021.	CHECK			

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	ived more than \$5,000.						990, <b>▶</b> □
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	TO PROVIDE S	201,078.	CHECK			
(2)			EAST ASIA/PACIFIC	ENSURING ACC	12,425.	CHECK			
(3)			SUB-SAHARAN AFRICA	SUPPORT ALL	22,746.	CHECK			
(4)			SOUTH AMERICA	ACCESS TO QU	11,150.	CHECK			
(5)			SOUTH AMERICA	ACCESS TO QU	8,231.	CHECK			
(6)			SOUTH AMERICA	ACCESS TO QU	5,303.	CHECK			
(7)			SOUTH AMERICA	ACCESS TO QU	9,652.	CHECK			
(8)			SOUTH AMERICA	ACCESS TO QU	10,987.	CHECK			
(9)			EAST ASIA/PACIFIC	ENSURING EDU	6,630.	CHECK			
(10)			EAST ASIA/PACIFIC	ENSURING EDU	6,049.	CHECK			
(11)			CENT. AMERICA/CARIBBEAN	SUPPORT GENE	19,041.	CHECK			
(12)			MIDDLE EAST/NORTH AFRICA	SPONSORSHIP	97,039.	CHECK			
(13)			EAST ASIA/PACIFIC	BASIC EDUCAT	109,184.	WIRE			
(14)			EAST ASIA/PACIFIC	BASIC EDUCAT	43,864.	WIRE			
(15)			SUB-SAHARAN AFRICA	SUPPORT ALL	145,389.	WIRE			
(16)			SUB-SAHARAN AFRICA	PMT OF NEONA	8,190.	CHECK			
by th	r total number of recipient orga e IRS, or for which the grantee r total number of other organiza	or counsel has pro-	vided a section 501(c)(3) e	quivalency letter			<b>▶</b>		

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	ived more than \$5,000.						990, <b>▶</b> □
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	BASIC EDUCAT	55,373.	CHECK			
(2)			EAST ASIA/PACIFIC	BASIC EDUCAT	45,369.	CHECK			
(3)			EAST ASIA/PACIFIC	BASIC EDUCAT	67,101.	CHECK			
(4)			SUB-SAHARAN AFRICA	IMPROVING NE	327,025.	CHECK			
(5)			SUB-SAHARAN AFRICA	TO PROVIDE S	235,505.	CHECK			
(6)			EAST ASIA/PACIFIC	MAINSTREAMIN	59,492.	WIRE			
(7)			SUB-SAHARAN AFRICA	IMPROVING NE	595,964.	WIRE			
(8)			EAST ASIA/PACIFIC	HIV PREVENTI	195,412.	WIRE			
(9)			EAST ASIA/PACIFIC	SCALING UP T	6,002.	WIRE			
(10)			SUB-SAHARAN AFRICA	TO PROVIDE S	556,631.	WIRE			
(11)			SOUTH ASIA	HIV	176,244.	CHECK			
(12)			RUSSIA	PRE-SCHOOL A	28,238.	WIRE			
(13)			SOUTH ASIA	MYANMAR EMER	18,000.	WIRE			
(14)			SOUTH ASIA	HIV	182,550.	CHECK			
(15)			MIDDLE EAST/NORTH AFRICA	UNICEF PROJE	20,888.	CHECK			
(16)			SUB-SAHARAN AFRICA	TO PROVIDE S	65,442.	CHECK			
by th	r total number of recipient orga e IRS, or for which the grantee	or counsel has pro	vided a section 501(c)(3) e	quivalency letter			exempt		
<u>3</u> ⊑⊓le	r total number of other organiza	ations of entitles					<b>-</b>		

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	eived more than \$5,00						▶□
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	HIV PREVENTI	1,257,147.	WIRE			
(2)			EAST ASIA/PACIFIC	HIV PREVENTI	619,705.	WIRE			
(3)			SUB-SAHARAN AFRICA	EFFECTIVE ST	48,320.	WIRE			
(4)			SUB-SAHARAN AFRICA	PAYMENT TO M	24,160.	WIRE			
(5)			SUB-SAHARAN AFRICA	TO PROVIDE S	81,819.	CHECK			
(6)			SUB-SAHARAN AFRICA	TO PROVIDE S	357,045.	CHECK			
(7)			SUB-SAHARAN AFRICA	MEL GHANA Y1	55,851.	WIRE			
(8)			SUB-SAHARAN AFRICA	ECONOMIC STR	17,483.	CHECK			
(9)			EAST ASIA/PACIFIC	INTENSIFIED	420,149.	WIRE			
(10)			EAST ASIA/PACIFIC	SCALING UP T	187,502.	WIRE			
(11)			EAST ASIA/PACIFIC	ENSURING EDU	6,049.	WIRE			
(12)			EAST ASIA/PACIFIC	INFANT & YOU	12,908.	CHECK			
(13)			EAST ASIA/PACIFIC	CONDUCT HYGI	5,645.	CHECK			
(14)			EAST ASIA/PACIFIC	INFANT & YOU	7,021.	CHECK			
(15)			EAST ASIA/PACIFIC	CHILD-FRIEND	6,573.	CHECK			
(16)			EAST ASIA/PACIFIC	CMAM COMMMUN	14,122.	CHECK			
	total number of recipient orga e IRS, or for which the grantee								

JSA

1E1275 1.000

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
(1)			EAST ASIA/PACIFIC	CONDUCT HYGI	8,235.	CHECK			
(2)			EAST ASIA/PACIFIC	ENSURING EDU	6,049.	CHECK			
(3)			SUB-SAHARAN AFRICA	SUPPORT ALL	30,062.	WIRE			
4)			CENT. AMERICA/CARIBBEAN	PROJECT IMPL	846,993.	WIRE			
5)			SUB-SAHARAN AFRICA	TO PROVIDE S	20,911.	WIRE			
6)			SUB-SAHARAN AFRICA	TO PROVIDE S	7,174.	CHECK			
7)			SUB-SAHARAN AFRICA	ECONOMIC STR	17,647.	CHECK			
8)			EAST ASIA/PACIFIC	CMAM COMMMUN	14,048.	WIRE			
9)			EAST ASIA/PACIFIC	CONDUCT HYGI	8,224.	CHECK			
10)			EAST ASIA/PACIFIC	CONDUCT HYGI	5,645.	CHECK			
11)			SOUTH AMERICA	ACCESS TO QU	8,502.	CHECK			
12)			MIDDLE EAST/NORTH AFRICA	UNICEF PROJE	15,198.	CHECK			
13)			MIDDLE EAST/NORTH AFRICA	UNICEF PROJE	7,801.	CHECK			
14)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	194,680.	WIRE			
15)			SUB-SAHARAN AFRICA	ECONOMIC STR	17,586.	CHECK			
16)			SUB-SAHARAN AFRICA	ENHANCING CH	24,670.	WIRE			

	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuatior (book, FM' appraisal other)
			SUB-SAHARAN AFRICA	TO PROVIDE S	117,059.	CHECK			
ı									
			SUB-SAHARAN AFRICA	TO PROVIDE S	233,603.	CHECK			
			SUB-SAHARAN AFRICA	SUPPORT	37,448.	CHECK			
)			SUB-SAHARAN AFRICA	ECONOMIC STR	18,000.	CHECK			
)			SOUTH ASIA	IMPLEMENTATI	344,115.	CHECK			
			SOUTH ASIA	SCHOOL HEALT	31,745.	CHECK			
			SOUTH ASIA	STRENGTHENIN	24,316.	WIRE			
			SUB-SAHARAN AFRICA	TO DONATE AG	49,125.	WIRE			
			SUB-SAHARAN AFRICA	TO DONATE AG	886,363.	CHECK			
))			SOUTH ASIA	FIXED PRICE	11,570.	WIRE			
l <b>)</b>			SOUTH ASIA	PROMOTING PE	79,581.	WIRE			
2)			EAST ASIA/PACIFIC	BASIC EDUCAT	59,488.	WIRE			
3)			RUSSIA	DEVELOPMENT	58,422.	WIRE			
1)			SOUTH ASIA	SCHOOL HEALT	10,547.	WIRE			
5)			EAST ASIA/PACIFIC	BASIC EDUCAT	33,785.	WIRE			
			EAST ASIA/PACIFIC	WORKING FOR	31,846.	WIRE			

JSA

1E1275 1.000

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	ived more than \$5,00						990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	HIV PREVENTI	34,178.	WIRE			
(2)			EAST ASIA/PACIFIC	INTENSIFIED	810,547.	WIRE			
(3)			SUB-SAHARAN AFRICA	TO PROVIDE S	125,538.	WIRE			
(4)			SUB-SAHARAN AFRICA	TO PROVIDE S	35,357.	CHECK			
(5)			SUB-SAHARAN AFRICA	TO PROVIDE S	661,892.	CHECK			
(6)			SUB-SAHARAN AFRICA	SUPPORT ALL	43,049.	WIRE			
(7)			SUB-SAHARAN AFRICA	TO PROVIDE S	180,763.	CHECK			
(8)			SOUTH ASIA	HIV	287,927.	CHECK			
(9)			SUB-SAHARAN AFRICA	SUPPORT ALL	60,558.	WIRE			
(10)			EAST ASIA/PACIFIC	PROCESS DOCU	10,049.	WIRE			
(11)			RUSSIA	SUPPORT PROG	17,180.	CHECK			
(12)			EAST ASIA/PACIFIC	BASIC EDUCAT	80,246.	WIRE			
(13)			SOUTH AMERICA	ACCESS TO QU	6,208.	CHECK			
(14)			SOUTH ASIA	EDUCATION	668,508.	CHECK			
(15)			SUB-SAHARAN AFRICA	SUPPORT ALL	30,542.	WIRE			
(16)			SUB-SAHARAN AFRICA	SUPPORT ALL	58,291.	WIRE			
by th	r total number of recipient orga e IRS, or for which the grantee r total number of other organiza	or counsel has pro-	vided a section 501(c)(3	3) equivalency letter		- 	<b>-</b>		

JSA

1E1275 1.000

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method or valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	STRENGTHENIN	40,340.	WIRE			
(2)			SUB-SAHARAN AFRICA	SUPPORT ALL	31,861.	WIRE			
(3)			SUB-SAHARAN AFRICA	SUPPORT ALL	38,947.	WIRE			
(4)			SUB-SAHARAN AFRICA	SUPPORT ALL	44,471.	WIRE			
(5)			SUB-SAHARAN AFRICA	SUPPORT ALL	38,377.	WIRE			
(6)			SUB-SAHARAN AFRICA	SUPPORT ALL	38,689.	WIRE			
(7)			MIDDLE EAST/NORTH AFRICA	MCH PROJECT	34,703.	CHECK			
(8)			MIDDLE EAST/NORTH AFRICA	MCSW (MATERN	14,680.	CHECK			
(9)			SOUTH ASIA	ESTABLISHING	25,572.	WIRE			
(10)			MIDDLE EAST/NORTH AFRICA	SPONSORSHIP	98,941.	CHECK			
(11)			EAST ASIA/PACIFIC	STRENGTHENIN	64,443.	WIRE			
(12)			SUB-SAHARAN AFRICA	SUPPORT ALL	19,054.	WIRE			
(13)			SOUTH ASIA	FOOD SECURIT	305,504.	CHECK			
(14)			SOUTH ASIA	MYAP PROJECT	81,158.	CHECK			
(15)			EAST ASIA/PACIFIC	SUPPORT PROG	73,020.	WIRE			
(16)			EAST ASIA/PACIFIC	SUPPORT PROJ	103,427.	WIRE			

JSA

1E1275 1.000

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	ived more than \$5,000.						990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	HALABY MURPH	85,335.	WIRE			
(2)			SOUTH AMERICA	SUPPORT SURV	51,600.	WIRE			
(3)			SUB-SAHARAN AFRICA	BURKINA FASO	254,856.	WIRE			
(4)			NORTH AMERICA	REIMBURSEMEN	22,000.	WIRE			
(5)			SUB-SAHARAN AFRICA	SUPPORT PROG	151,209.	WIRE			
(6)			SUB-SAHARAN AFRICA	REIMBURSE EX	29,062.	WIRE			
(7)			SUB-SAHARAN AFRICA	SUPPORT PROJ	26,800.	WIRE			
(8)			CENT. AMERICA/CARIBBEAN	SUPPORT THE	596,378.	WIRE			
(9)			SOUTH ASIA	INDIA FLOODI	60,877.	WIRE			
(10)			SOUTH ASIA	MCHIP PROJEC	134,903.	WIRE			
(11)			SOUTH ASIA	SUPPORT THE	1,477,539.	WIRE			
(12)			SOUTH ASIA	HP FOUNDATIO	66,123.	WIRE			
(13)			EUROPE/ICELAND/GREENLAND	FMS SUPPORT	688,582.	WIRE			
(14)			EUROPE/ICELAND/GREENLAND	INVESTMENT S	1,226,028.	WIRE			
(15)			SOUTH ASIA	REGIONAL OFF	1,398,771.	WIRE			
(16)			EUROPE/ICELAND/GREENLAND	SCI DUES	2,010,994.	WIRE			
by th	r total number of recipient orga e IRS, or for which the grantee r total number of other organiza	or counsel has prov	vided a section 501(c)(3) e	quivalency letter		_	<b></b> ▶		
	The state of the s							Schedule F	(Form 990) 2011

JSA

1E1275 1.000

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM\ appraisal other)
[1)			SOUTH ASIA	SUPPORT ALL	12,921,259.	WIRE			
2)			EUROPE/ICELAND/GREENLAND	SUPPORT COST	1,998,890.	WIRE			
3)			SOUTH ASIA	SUPPORT PROG	13,396,734.	WIRE			
4)			EAST ASIA/PACIFIC	SUPPORT PROG	477,259.	WIRE			
5)			RUSSIA	SUPPORT PROG	2,638,636.	WIRE			
6)			SOUTH ASIA	SUPPORT PROG	300,190.	WIRE			
7)			SOUTH ASIA	SUPPORT PROG	4,721,022.	WIRE			
8)			EUROPE/ICELAND/GREENLAND	READY STEADY	854,650.	WIRE			
9)			EAST ASIA/PACIFIC	SUPPORT THE	1,182,244.	WIRE			
10)			NORTH AMERICA	SUPPORT THE	151,709.	WIRE			
11)			EAST ASIA/PACIFIC	CHCH EARTHQU	15,000.	WIRE			
12)			CENT. AMERICA/CARIBBEAN	SUPPORT PROG	591,254.	WIRE			
13)			SUB-SAHARAN AFRICA	SUPPORT THE	1,413,707.	WIRE			
14)			SUB-SAHARAN AFRICA	SUPPORT THE	222,123.	WIRE			
15)			SUB-SAHARAN AFRICA	TO PROVIDE S	299,091.	WIRE			
16)			SUB-SAHARAN AFRICA	UNDESIGNATED	49,900.	WIRE			

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method or valuation (book, FMV, appraisal, other)
(1)			EUROPE/ICELAND/GREENLAND	EDUCATION PR	70,624.	WIRE			
(2)			SOUTH ASIA	EDUCATION, H	684,100.	WIRE			
(3)			MIDDLE EAST/NORTH AFRICA	REDUCING CHI	35,000.	WIRE			
(4)			SUB-SAHARAN AFRICA	SUPPORT ALL	962,138.	WIRE			
(5)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	69,930.	WIRE			
(6)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	822,507.	WIRE			
(7)			SUB-SAHARAN AFRICA	SUPPORT PROJ	2,707,845.	WIRE			
(8)			EUROPE/ICELAND/GREENLAND	SUPPORT SURV	14,400.	WIRE			
(9)			SOUTH AMERICA	SUPPORT THE	203,000.	WIRE			
(10)			SUB-SAHARAN AFRICA	SUPPORT THE	681,211.	WIRE			
(11)			MIDDLE EAST/NORTH AFRICA	SUPPORT THE	57,000.	WIRE			
(12)			SUB-SAHARAN AFRICA	SUPPORT THE	8,991,654.	WIRE			
(13)			MIDDLE EAST/NORTH AFRICA	SUPPORT THE	2,721,296.	WIRE			
(14)			SUB-SAHARAN AFRICA	MATCH TO LIN	12,779.	WIRE			
(15)			SUB-SAHARAN AFRICA	UNDESIGNATED	170,000.	WIRE			
(16)			SOUTH ASIA	4TH PMT OFDA	21,116.	WIRE			

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SAVE THE CHILDREN FEDERATION, INC.

Schedule F (Form 990) 2011

1	(a) Name of	(b) IRS code	(c) Region	(d) Purpose of	(e) Amount of	(f) Manner of	(g) Amount of	(h) Description	(i) Method of valuation
	organization	section and EIN (if applicable)	,, ,	grant	ćash grant	cash disbursement	non-cash assistance	of non-cash assistance	(book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	AAO-J&J SC U	23,321.	WIRE			
(2)			EAST ASIA/PACIFIC	ALCATEL CHIN	32,246.	WIRE			
(3)			SOUTH ASIA	EDUCATION	25,715.	CHECK			
(4)			SOUTH ASIA	EDUCATION, H	607,004.	WIRE			
(5)			EAST ASIA/PACIFIC	FUNDA FOR SC	42,720.	WIRE			
(6)			EAST ASIA/PACIFIC	FUNDA FOR SC	42,720.	WIRE			
(7)			SOUTH AMERICA	FUNDS FOR SC	22,356.	WIRE			
(8)			EAST ASIA/PACIFIC	FUNDS FOR SC	11,906.	WIRE			
(9)			EUROPE/ICELAND/GREENLAND	GOOGLE SUBGR	55,373.	WIRE			
(10)			SOUTH ASIA	HALABY M FUN	7,299.	WIRE			
(11)			SUB-SAHARAN AFRICA	KANGAROO MOT	17,200.	WIRE			
(12)			SUB-SAHARAN AFRICA	ODFA-PASTORA	720,563.	WIRE			
(13)			EUROPE/ICELAND/GREENLAND	PAYMENT TO S	103,328.	WIRE			
(14)			SUB-SAHARAN AFRICA	PROTCTING CH	57,523.	WIRE			
(15)			SUB-SAHARAN AFRICA	PROTECTING C	438,801.	WIRE			
(16)			EAST ASIA/PACIFIC	PSI DISEASE	32,643.	WIRE			

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Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	eived more than \$5,000.						990, ▶
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	REIMBURSE EX	8,289.	WIRE			
(2)			SUB-SAHARAN AFRICA	REIMBURSE EX	13,533.	WIRE			
(3)			SUB-SAHARAN AFRICA	SAVE THE CHI	18,053.	WIRE			
(4)			EUROPE/ICELAND/GREENLAND	SCALE UP OF	384,203.	WIRE			
(5)			SUB-SAHARAN AFRICA	SCALE-UP OF	16,890.	WIRE			
(6)			EUROPE/ICELAND/GREENLAND	SCIC - 12401	75,048.	WIRE			
(7)			EAST ASIA/PACIFIC	SRI LANKA-RE	262,692.	WIRE			
(8)			EAST ASIA/PACIFIC	SUPPORT ACTI	80,478.	WIRE			
(9)			SOUTH AMERICA	SUPPORT ACTI	24,686.	WIRE			
(10)			SUB-SAHARAN AFRICA	SUPPORT ALL	862,263.	WIRE			
(11)			EAST ASIA/PACIFIC	SUPPORT MULT	3,068,025.	WIRE			
(12)			SUB-SAHARAN AFRICA	SUPPORT PROJ	319,857.	WIRE			
(13)			SOUTH ASIA	SUPPORT THE	3,724,293.	WIRE			
(14)			SUB-SAHARAN AFRICA	SUPPORT THE	515,226.	WIRE			
(15)			EAST ASIA/PACIFIC	SUPPORT THE	109,655.	WIRE			
(16)			SOUTH AMERICA	SUPPORT THE	321,388.	WIRE			
by th	r total number of recipient orga e IRS, or for which the grantee r total number of other organiza	or counsel has pro	vided a section 501(c)(3) e	quivalency letter					

Part II	Grants and Other Assist Part IV, line 15, for any re Part II can be duplicated if	ecipient who rece	ived more than \$5,000.						990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	SUPPORT THE	6,615,372.	WIRE			
(2)			SUB-SAHARAN AFRICA	SUPPORT THE	80,868.	WIRE			
(3)			SOUTH ASIA	TECHNOLOGIES	88,898.	WIRE			
(4)			EAST ASIA/PACIFIC	THAILAND FLO	20,000.	WIRE			
(5)			SUB-SAHARAN AFRICA	TO DISBURSE	200,284.	WIRE			
(6)			SUB-SAHARAN AFRICA	TO PROVIDE S	955,293.	WIRE			
(7)			SUB-SAHARAN AFRICA	UNDESIGNATED	100,000.	WIRE			
(8)			SUB-SAHARAN AFRICA	YOUTHSAVE AD	74,096.	WIRE			
(9)			SUB-SAHARAN AFRICA	MCHIP-RWANDA	60,406.	WIRE			
(10)			SUB-SAHARAN AFRICA	TO PROVIDE S	218,339.	CHECK			
(11)			SOUTH ASIA	HEALTH	719,916.	CHECK			
(12)			MIDDLE EAST/NORTH AFRICA	MCH (DEVELOP	13,569.	WIRE			
(13)			SOUTH ASIA	CHILD PROTEC	10,007.	WIRE			
(14)			SOUTH ASIA	RECEOVERY AS	153,937.	WIRE			
(15)			SOUTH ASIA	IMPROVING LI	492,259.	WIRE			
(16)			SOUTH ASIA	RESTORING ED	106,761.	WIRE			
by th	r total number of recipient orga e IRS, or for which the grantee	or counsel has pro-	vided a section 501(c)(3) e	quivalency letter		_	<b></b> ▶		
J EIILE	r total number of other organiza	ations of childes						Schedule F	(Form 990) 2011

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1E1275 1.000

	Part IV, line 15, for any re Part II can be duplicated if			. Check this bo	ox if no one recipi	ent received r	nore than \$5,00		►
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	IMPROVING AC	933,361.	WIRE			
(2)			SOUTH ASIA	CHILD PROTEC	21,437.	WIRE			
(3)			SOUTH ASIA	ESTABLISHING	13,404.	WIRE			
(4)			SOUTH ASIA	IMPROVING AC	123,205.	WIRE			
(5)			SOUTH ASIA	STRENGTHENIN	51,391.	WIRE			
(6)			SOUTH ASIA	PROMOTING PR	10,223.	WIRE			
(7)			EAST ASIA/PACIFIC	HEALTH	93,951.	WIRE			
(8)			SUB-SAHARAN AFRICA	MALI AG LEND	48,534.	CHECK			
(9)			CENT. AMERICA/CARIBBEAN	CHILD PROTEC	9,650.	CHECK			
(10)			SOUTH ASIA	MYAP PROJECT	276,147.	CHECK			
(11)			SOUTH ASIA	PROMOTING PE	23,782.	WIRE			
(12)			SOUTH ASIA	IMPLEMENTATI	249,005.	WIRE			
(13)			SUB-SAHARAN AFRICA	MYAP SUBGRAN	240,118.	CHECK			
(14)			SOUTH AMERICA	ACCESS TO QU	8,940.	CHECK			
(15)			SOUTH ASIA	IMPLEMENTATI	32,754.	WIRE			
(16)			SOUTH ASIA	PROTECTION A	606,018.	WIRE			
by th	r total number of recipient orga e IRS, or for which the grantee r total number of other organiza	or counsel has pro	vided a section 501(c)(3)	equivalency letter			exempt  •		

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FM\ appraisal, other)
)			EAST ASIA/PACIFIC	HIV PREVENTI	197,067.	WIRE			
)			SOUTH ASIA	MYAP PROJECT	105,781.	CHECK			
)			SUB-SAHARAN AFRICA	THE PURPOSE	160,554.	CHECK			
.)			SUB-SAHARAN AFRICA	TO PROVIDE S	351,009.	CHECK			
)			SOUTH AMERICA	ACCESS TO QU	7,637.	CHECK			
)			SUB-SAHARAN AFRICA	CHILD PROTEC	95,173.	WIRE			
)			SOUTH AMERICA	ACCESS TO QU	10,948.	CHECK			
)			RUSSIA	TO INCREASE	67,545.	WIRE			
)			EAST ASIA/PACIFIC	INFANT & YOU	7,021.	CHECK			
0)			EUROPE/ICELAND/GREENLAND	FINALPAYMENT	71,941.	WIRE			
1)			SOUTH ASIA	EDUCATION PR	146,846.	CHECK			
2)			SOUTH AMERICA	RESILIENT CO	26,154.	CHECK			
3)			SOUTH ASIA	EDUCATION PR	39,240.	WIRE			
4)			EAST ASIA/PACIFIC	INTENSIFIED	355,683.	WIRE			
5)			EAST ASIA/PACIFIC	SCALING UP T	111,108.	WIRE			
6)			EAST ASIA/PACIFIC	BASIC EDUCAT	30,968.	CHECK			
	r total number of recipient e IRS, or for which the gr		ve that are recognized as o						

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1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	BASIC EDUCAT	13,011.	WIRE			
(2)			EAST ASIA/PACIFIC	BASIC EDUCAT	22,747.	WIRE			
(3)			EAST ASIA/PACIFIC	BASIC EDUCAT	41,503.	WIRE			
(4)			EAST ASIA/PACIFIC	BASIC EDUCAT	34,907.	WIRE			
(5)			EAST ASIA/PACIFIC	BASIC EDUCAT	32,707.	WIRE			
(6)			EAST ASIA/PACIFIC	BASIC EDUCAT	43,095.	WIRE			
(7)			EAST ASIA/PACIFIC	BASIC EDUCAT	53,900.	WIRE			
(8)			EAST ASIA/PACIFIC	BASIC EDUCAT	18,208.	WIRE			
(9)			EAST ASIA/PACIFIC	EMERGENCY RE	13,991.	WIRE			
(10)			EAST ASIA/PACIFIC	BASIC EDUCAT	8,042.	WIRE			
(11)			EAST ASIA/PACIFIC	BASIC EDUCAT	29,733.	WIRE			
(12)			SUB-SAHARAN AFRICA	CHILD LABOUR	79,607.	WIRE			
(13)			SOUTH ASIA	HIV	252,174.	CHECK			
(14)			MIDDLE EAST/NORTH AFRICA	ISHRAQ PLUS	19,215.	WIRE			
(15)			EAST ASIA/PACIFIC	CHILDREN TAL	71,235.	WIRE			
(16)			CENT. AMERICA/CARIBBEAN	AID			691,600.	LATRINE SLAB	FMV

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	Part II can be duplicated it	additional space							(i) Method of
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	valuation (book, FMV, appraisal, other)
(1)			SOUTH ASIA	MEDICIDE			12,480.	VITAMIN A	FMV
(2)			CENT. AMERICA/CARIBBEAN	AID			6,848.	MODULAR MATE	FMV
(3)			SUB-SAHARAN AFRICA	MEDICIDE			9,710.	VITAMIN A (1	FMV
(4)			SUB-SAHARAN AFRICA	MEDICIDE			156,183.	VITAMIN A(20	FMV
(5)			SOUTH ASIA	MEDICIDE			8,912.	ALBENDAZOLE	FMV
(6)			SOUTH ASIA	MEDICIDE			11,210.	VITAMIN A	FMV
(7)			MIDDLE EAST/NORTH AFRICA	MEDICIDE			38,202.	PHARMECEUTIC	FMV
(8)			SUB-SAHARAN AFRICA	MEDICIDE			79,464.	AC016510-PUR	FMV
(9)			SOUTH ASIA	MEDICIDE			260,187.	VITAMIN A	FMV
(10)			CENT. AMERICA/CARIBBEAN	MEDICIDE			15,503.	ALBENDAZOLE	FMV
(11)			CENT. AMERICA/CARIBBEAN	MEDICIDE			33,929.	VITAMIN A	FMV
(12)			SOUTH ASIA	AID			15,951.	CONDOMS	FMV
(13)			RUSSIA	AID			93,968.	BED NETS	FMV
(14)			RUSSIA	MEDICIDE			148,759.	ALPHACYPERME	FMV
(15)			RUSSIA	AID			217,959.	BED NETS	FMV
(16)			RUSSIA	AID			336,906.	BED NETS	FMV

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FMV appraisal, other)
)			NORTH AMERICA	AID			64,278.	EXPENSES PAI	FMV
)			SOUTH ASIA	MEDICIDE			10,566.	VITAMIN A	FMV
)			SOUTH ASIA	MEDICIDE			25,508.	ALBENDAZOLE	FMV
)			SUB-SAHARAN AFRICA	MEDICIDE			20,567.	ALBENDAZOLE	FMV
1			SUB-SAHARAN AFRICA	MEDICIDE			181,231.	VITAMIN A (2	FMV
1			SUB-SAHARAN AFRICA	MEDICIDE			978,870.	ALBENDAZOLE	FMV
1									
))									
l)									
2)									
3)									
4)									
5)									
6)									
Ente	r total number of recipient								26.
υy ιπ Ento	e IRS, or for which the grant total number of other org	antee or counsernas pro	viueu a section 501(C)(3	) equivalency letter					36.

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) FOOD FOR INDIGENTS- BANGLADESH	SOUTH ASIA	139919.			921,640.	FOOD COMMOD	FMV
(2) FOOD FOR INDIGENTS- ETHIOPIA	SUB-SAHARAN AFRICA	346746.			18,020,215.	FOOD COMMOD	FMV
(3) FOOD FOR INDIGENTS- GUATEMALA	CENT. AMERICA/CARIBBEAN	139080.			2,742,514.	FOOD COMMOD	FMV
(4) FOOD FOR INDIGENTS- MALAWI	SUB-SAHARAN AFRICA	17915.			608,187.	FOOD COMMOD	FMV
(5) FOOD FOR INDIGENTS- MALI	SUB-SAHARAN AFRICA	61191.			668,377.	FOOD COMMOD	FMV
(6) FOOD FOR INDIGENTS- MOZAMBIQUE	SUB-SAHARAN AFRICA	290640.			1,929,687.	FOOD COMMOD	FMV
(7) FOOD FOR INDIGENTS- HAITI	CENT. AMERICA/CARIBBEAN	9228.			40,329.	FOOD COMMOD	FMV
(8) FOOD FOR INDIGENTS- TAJIKISTAN	RUSSIA	176400.			425,103.	FOOD COMMOD	FMV
(9) FOOD FOR INDIGENTS- GAZA	MIDDLE EAST/NORTH AFRICA	6690.			762,030.	FOOD COMMOD	FMV
(10) FOOD FOR INDIGENTS- PAKISTAN	SOUTH ASIA	2186734.			23,563,068.	FOOD COMMOD	FMV
(11)							
(12)							
<u>(</u> 13)							
<u>(14)</u>							
<u>(</u> 15)							
<u>(</u> 16)							
(17)							
(18)							

Schedule F (Form 990) 2011
Page 4
Part IV Foreign Forms

rait	roreign 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)	X	Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		<b>Yes</b>	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	X	⁄es	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)		⁄es	X 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)	X	Yes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	X	Yes	No

THE ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

## Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE F, PART I, LINE 2

SAVE THE CHILDREN FEDERATION, INC. CONDUCTS PERIODIC FINANCIAL AND

PROGRAM REPORTS ALONG WITH SCHEDULED AUDITS TO MONITOR THE USE OF GRANT

FUNDS. THESE INCLUDE MONTHLY BUDGET VERSUS ACTUAL ANALYSIS COMPARING BOTH

SPENDING AGAINST THE LIFE OF GRANTS AMOUNTS AS WELL AS THE PROJECTED

ANNUAL AMOUNTS. SPENDING AGAINST EACH GRANT HAS TO BE APPROVED BY THE

APPROPRIATE SUPERVISOR UNDER THE SEGREGATION OF DUTIES INTERNAL CONTROLS

CREATED FOR ALL FIELD OFFICES. THESE INTERNAL CONTROLS ARE REVIEWED AND

UPDATED AS APPROPRIATE BY THE HEAD FINANCE STAFF PERSON FOR THAT OFFICE,

IN CONJUNCTION WITH THE AREA CONTROLLER, AND TESTED ON A REGULAR BASIS

THROUGH INTERNAL AND EXTERNAL AUDITS.

NUMBERS OF RECIPIENTS OF GRANTS OR ASSISTANCE

SCHEDULE F, PART III, COLUMN C

THE NUMBER OF RECIPIENTS FOR FOOD AND FREIGHT ASSISTANCE IN BOLIVIA,
ETHIOPIA, MALAWI, MOZAMBIQUE, HAITI, CENTRAL ASIA, GAZA, NEPAL AND
PAKISTAN INCLUDES DIRECT AND INDIRECT FOOD PROGRAM BENEFICIARIES, WHICH
WAS ESTIMATED THROUGH PROGRAM MONITORING AND FOOD DISTRIBUTION RECORDS.

THE NUMBERS OF RECIPIENTS FOR FOOD ASSISTANCE IN BANGLADESH ARE ONLY DIRECT BENEFICIARIES RECEIVING RATION AND/ OR BENEFICIARY OF PROGRAM ACTIVITIES.

THE NUMBER OF RECIPIENTS RECEIVING FOOD ASSISTANCE IN ETHIOPIA IS

Schedule F (Form 990) 2011 Page **5** 

## Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

DETERMINED BY FOOD MONITORING BY THE PSNP AND JEOP PROGRAMS.

THE NUMBER OF RECIPIENTS RECEIVING FOOD ASSISTANCE IN GUATEMALA IS THE TOTAL BENEFICIARY COUNT FOR THE TWO TITLE II PROGRAMS, SYAP AND MYAP.

THE TOTAL RECIPIENTS RECEIVING FOOD ASSISTANCE IN MALI ARE ONLY DIRECT BENEFICIARIES RECEIVING SAFETY DISTRIBUTION, HEALTH CENTER DISTRIBUTION OR FFW DISTRIBUTION.

THE NUMBER OF RECIPIENTS FOR FOOD ASSISTANCE IN PAKISTAN WAS ESTIMATED

THROUGH A SYSTEM OF REGISTERED BENEFICIARIES THAT CHECKS AGAINST A LIST

AS EACH FAMILY RECEIVES THEIR RATION.

## **SCHEDULE G** (Form 990 or 990-EZ)

## Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Inspection

ame of the organization					Employer Identification	on number
SAVE THE CHILDREN FEDERATION	E THE CHILDREN FEDERATION, INC.				06-0726487	7
Fundraising Activities. Co	mplete if the organ	nization a	nswered '	"Yes" to Form 9	90, Part IV, line	17.
Part I Form 990-EZ filers are no	ot required to comp	lete this p	oart.			
1 Indicate whether the organization r	aised funds through	any of the	following	activities. Check a	all that apply.	
a X Mail solicitations	e		_	non-government g		
<b>b</b> X Internet and email solicitations				government grants		
c X Phone solicitations g X Special fundraising events						
	d X In-person solicitations					
<u> </u>						
2a Did the organization have a written or key employees listed in Form 99						X Yes No
or key employees listed in Form 98	30, Fait VII) OF EILILY	iii coiiiled	Mon with p	TOTESSIONAL TURIOTA	ising services?	21 Tes NC
<b>b</b> If "Yes," list the ten highest paid in	ndividuals or entities	(fundraise	ers) pursua	nt to agreements	under which the	fundraiser is to b
compensated at least \$5,000 by th		(101101010	, p	g		
•					(v) Amount paid to	
(i) Name and address of individual	(ii) Activity		ndraiser have or control of	(iv) Gross receipts	(or retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	(ii) Activity		outions?	from activity	fundraiser listed in col. (i)	organization
		Yes	No		coi. (i)	
1 PUBLIC OUTREACH		163	110			
SEATTLE WA	FUNDRAISING	X		1,266,018.	971,377.	294,641
2 CYGNUS DONOR	FUNDRAISING	Α		1,200,010.	9/1,3//.	294,041
CHICAGO IL			X		40 000	40 000
	COUNSEL		Λ		40,000.	-40,000
3 GRASSROOTS CAMPAIGNS, INC		37		2 522 000	0 145 240	1 270 640
DENVER CO	FUNDRAISING	X		3,523,990.	2,145,342.	1,378,648
4 EPSILON DATA MANAGEMENT	FUNDRAISING			E 000 1EE	006 200	6 121 055
COLUMBUS OH	COUNSEL		X	7,028,177.	896,322.	6,131,855
5 DONOR CARE CENTER						
NORTH CANTON OH	FUNDRAISING		X	956,754.	533,188.	423,566
6 DIRECT POINT	FUNDRAISING					
ONTARIO CANADA	COUNSEL		X	1,343,604.	713,163.	630,441
7 COMMON KNOWLEDGE	FUNDRAISING					
MILL VALLEY CA	COUNSEL		X		60,273.	-60,273
8 APPCO GROUP						
NEW YORK NY	FUNDRAISING	X		126,409.	238,928.	-112,519
9 DONORWORX						
ONTARIO CANADA	FUNDRAISING	X		65,833.	494,067.	-428,234
0						
otal			<u></u> ▶	14,310,785.		
3 List all states in which the organiz	zation is registered o	or licensed	d to solicit	contributions or	has been notified	it is exempt from
registration or licensing.						
LL STATES						
		<b></b>				

	(				
Part II	Fundraising Events. Complete	if the organization ansv	vered "Yes" to Form 99	00, Part IV, line 18, or r	eported more
	than \$15,000 of fundraising ever	nt contributions and gros	s income on Form 990	-EZ, lines 1 and 6b. L	ist events with
	gross receipts greater than \$5,00	00.			

			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total events
			LIVC-SPRING EVT	BLUM - JAPAN	4.	(add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
ne						
Revenue	1	Gross receipts	329,960.	148,536.	87,201.	565,697
æ	2	Less: Charitable				
		contributions	310,960.	125,376.	73,406.	509,742.
	3	Gross income (line 1 minus		·	·	
		line 2)	19,000.	23,160.	13,795.	55,955
		- ,	·	·		
	4	Cash prizes				
	5	Noncash prizes				
ses	6	Rent/facility costs	29,000.		6,850.	35,850
eus	Ĭ		==,,,,,,,,			00,000
Direct Expenses	7	Food and beverages				
벙	•	r ood and borolagoo				
ire	8	Entertainment				
	ľ	Entertainment				
	g	Other direct expenses				
	ľ	other direct expenses				
	10	Direct expense summary. Add lines 4	1 through 9 in column (d)	1	_	( 35,850.)
	11	Net income summary. Combine line 3	3 column (d) and line 1	'		20,105
	rt I					·
1 4		than \$15,000 on Form 990-E	anization answered i 7 line 6a	es to rollinggo, Fai	tiv, line 19, or repo	rteu more
		•,		(b) Dull taba/instant		(d) Total gaming (add
Jue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						
ď	1	Gross revenue				
_	•					
S	2	Cash prizes				
se	_	Cush ph2co				
Direct Expenses	વ	Noncash prizes				
Ж	٦	Noncash phizes				
ect	4	Rent/facility costs				
Ö	7	Rentificantly costs				
	5	Other direct expenses				
		Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	ľ	Volunteer labor	NO	NO	NO	
	7	Direct expense summary. Add lines 2	through 5 in column (d)		_	(
	<b>'</b>	Direct expense summary. Add lines 2	- tillough o in column (u)			/
	Q	Net gaming income summary. Comb	ine line 1 column d and	l line 7	_	
	0	Net gaming income summary. Comb	ine line 1, column a, and	1 III C 7	· · · · · · · · · · · · · · · · · · ·	
9	F	nter the state(s) in which the organizat	tion operates gaming act	tivities:		
-		the organization licensed to operate g				Yes No
		UNI - U I-t				I es NO
ı.	- 11	110, CAPIGITI.				
10:		/ere any of the organization's gaming I	licenses revoked suspe	nded or terminated duri	 ng the tax vear?	Yes No
		WV W wal-to-				
ı.	- 11	100, Oxpidiii.				

Sched	ule G (Form 990 or 990-EZ) 2011 Page <b>3</b>
11	Does the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Name ▶
	Address ►
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party:
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶\$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year ▶ \$
Par	
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).
FUN	DRAISING ACTIVITIES
CCII	EDULE G, PART I, LINE 2B
эсп	EDULE G, PART I, LINE 25
GRO	SS RECEIPTS FIGURES REPORTED IN COLUMN (IV) FOR PUBLIC OUTREACH, APPCO
GRO	UP, DONORWORX AND GRASSROOTS REPRESENT ALL REVENUES RECEIVED IN 2011
GEN	ERATED FROM DONORS ACQUIRED IN 2011 BY EACH FUNDRAISER, INCLUDING
MON	THLY SPONSORSHIP CONTRIBUTIONS, ONE TIME REVENUE AND OTHER AGENCY
CON	TRIBUTIONS.
CON	IKIDO I TONO:

Sched	ule G (Form 990 or 990-EZ) 2011 Page <b>3</b>
11 12	Does the organization operate gaming activities with nonmembers?  Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:  The organization's facility
a b	The organization's facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
•	amount of gaming revenue retained by the third party ▶ \$  If "Yes," enter name and address of the third party:
C	if res, enter name and address of the tillid party.
	Name ►
	Address ▶
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Director/officer
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$
Par	Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
¢ 2	part to provide any additional information (see instructions).  ,085,922 IN ADDITIONAL REVENUE WAS RECEIVED IN 2011, GENERATED FROM
γJ	,003,922 IN ADDITIONAL REVENUE WAS RECEIVED IN 2011, GENERALED FROM
DON	ORS ACQUIRED FROM CAMPAIGNS IN 2008 TO 2010 THROUGH PUBLIC OUTREACH
AND	GRASSROOTS. PAYMENT FIGURES REPORTED IN COLUMN (V) REPRESENT TOTAL
COM	PENSATION PAID UP FRONT TO THE FUNDRAISER DURING THIS TAX YEAR. THE
FIG	URES REPORTED IN COLUMN (VI) FOR PUBLIC OUTREACH AND GRASSROOTS
REF	LECT THE INITIAL RESULTS BUT DO NOT REFLECT THE TOTAL LIFETIME
CONT	TRIBITIONS THAT WILL BE GENERATED AS A RESULT OF THE FUNDRAISER'S 2011

Sched	lule G (Form 990 or 990-EZ) 2011 Page <b>3</b>
11	Does the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	records.
	Name ►
	Trume P
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party:
	Name ►
	Address ▶
16	Gaming manager information:
	Manua N
	Name
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:  Is the organization required under state law to make charitable distributions from the gaming proceeds to
а	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year ▶ \$
Par	
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).
CAM:	PAIGN. AS A RESULT OF THE 2011 EXPENDITURES, INCREMENTAL REVENUE WILL
בע	ACQUIRED EACH SUBSEQUENT YEAR FROM THE RECURRING MONTHLY CONTRIBUTORS.
DE A	ACQUIRED EACH SUBSEQUENT TEAR FROM THE RECURRING MONTHEIT CONTRIBUTORS.
TO'	TAL PROJECTED LIFETIME REVENUE FOR THE SPONSORS ACQUIRED IN 2011
THR	OUGH PUBLIC OUTREACH, APPCO GROUP, DONORWORX AND GRASSROOTS IN \$
9,3	18,810.
THE	LIFETIME VALUE IS A NET PRESENT VALUE ESTIMATE OF CURRENT AND FUTURE

Sched	ule G (Form 990 or 990-EZ) 2011 Page <b>3</b>
11	Does the organization operate gaming activities with nonmembers?  Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Name ▶
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
154	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
-	amount of gaming revenue retained by the third party  \$\bigs\  \bigs\  \bigs\
С	If "Yes," enter name and address of the third party:
	Name ▶
	Address ►
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶\$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year 🕨 \$
Par	Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b,
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).
INC	OME BY VENDOR, LESS ASSOCIATED COSTS. IT ASSUMES A MONTHLY
mnn.	MINISTON DATE DAGED ON WIGHORIGAL AMERICAN MERICAN A 1 FO INCREMENT
TER.	MINATION RATE BASED ON HISTORICAL AVERAGES WITH A 1.5% INCREASE IN
D ז V	MENT ADDED TO EACH VEAD OF THE DEOIFCTION AND A 12 DISCOUNT DATE
PAI	MENT ADDED TO EACH YEAR OF THE PROJECTION AND A 4% DISCOUNT RATE.
FUN	DRAISER CONTRACTS THAT DO DISTINGUISH BETWEEN SERVICE FEE AND EXPENSE
_ 514.	
REI	MBURSEMENT:
1.	DONOR CARE CENTER: CONTRACT ITEMIZES FEES FOR SERVICES BASED UPON

Sched	ule G (Form 990 or 990-EZ) 2011 Page <b>3</b>
11	Does the organization operate gaming activities with nonmembers?
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	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Nama N
	Name ►
	Address >
	Address
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party:
	Name ►
	Address ►
16	Caming manager information:
16	Gaming manager information:
	Name ►
	Name ▶
	Gaming manager compensation ▶\$
	3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3 -
	Description of services provided ▶
	Director/officer
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license? Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$
Par	
ı aı	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).
SIM	ILAR FUNDRAISING PROJECTS FOR OTHER CHARITIES, AND SPECIFIES THAT
EXP	ENSE REIMBURSEMENT IS AT COST. DONOR CARE WAS REIMBURSED \$ 1,280
FOR	POSTAGE AND \$ 1,275 FOR PRINTING EXPENSES.
2.	EPSILON DATA MANAGEMENT : CONTRACT STATEMENT OF WORK ITEMIZES FEES FOR
SER	VICES ( E.G., MAILING UNDER 250K PIECES BILLED AT COST + 11.65%
143 F	WID AND GRADE BUAR GUARING TO DEGRONGIBLE FOR OUR OF TRANSPORT COORD
MAR.	KUP) AND STATES THAT CHARITY IS RESPONSIBLE FOR OUT-OF- POCKET COSTS
SUC	H AS TRAVEL, POSTAGE, FREIGHT AND COURIER SERVICES AT COST, EPSILON

Sched	ule G (Form 990 or 990-EZ) 2011 Page <b>3</b>
11	Does the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
14	records:
	Name ▶
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
h	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
-	amount of gaming revenue retained by the third party ▶ \$
c	If "Yes," enter name and address of the third party:
J	
	Name ►
	Address ►
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶ \$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license? Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year 🕨 \$
Par	Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).
WAS	REIMBURSED 1,258,729 FOR PRINTING EXPENSES.
2	COMMON KNOWIEDGE. ACDEEMENT CETC FEEG FOD CEDVICES AND CHIDITATES THAT
3. (	COMMON KNOWLEDGE: AGREEMENT SETS FEES FOR SERVICES AND STIPULATES THAT
TRA	VEL EXPENSES WILL BE BILLED AT COST.
4.	CYPNUS APPLIED RESEARCH: CONTRACT SETS FEES FOR SERVICES AND SPECIFIES
TRA	VEL EXPENSES AND PRINTING WILL BE BILLED AT COST.
7	) FUNDDATCED COMPDACES THAT DO NOT TERMIZE SERVICE EEES AND EVDENCE
D	) FUNDRAISER CONTRACTS THAT DO NOT ITEMIZE SERVICE FEES AND EXPENSE

Sched	ule G (Form 990 or 990-EZ) 2011 Page <b>3</b>
11	Does the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	records.
	Name ►
	Address ▶
15 a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
	amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party:
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ▶
	Gaming manager compensation ▶\$
	Description of services provided ▶
	Director/officer Employee Independent contractor
17	Mandatory distributions:
., а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
_	retain the state gaming license? Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year 🕨 \$
Par	Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b,
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).
KEII	MBURSEMENT:
1.P	UBLIC OUTREACH LUMPS SERVICES AND EXPENSES TOGETHER INTO THREE
CAT	EGORIES OF FEES - COST OF FUNDRAISING PER HOUR; FLOAT FEE FOR
ADM:	INISTRATIVE SERVICES OF \$ 18,040 AND DATA ENTRY AT \$ 1.56/GIFT.
2.G	RASSROOTS CONTRACT CONTAINS COMPENSATION INFORMATION PER CANVASSING
SHI	FT ONLY AND MAKES NO MENTION OF REIMBURSEMENT OF EXPENSES.
3.D	IRECT POINT GROUP - AGREEMENT CONTAINS COMPENSATION TERMS FOR MONTHLY

Sched	ule G (Form 990 or 990-EZ) 2011
11	Does the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ►
	Address ►
150	Does the organization have a contract with a third party from whom the organization receives gaming
тэа	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
h	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
D	amount of gaming revenue retained by the third party  \$\bigs\  \bigs\  \bigs\
С	If "Yes," enter name and address of the third party:
	Name ▶
	Address ►
16	Gaming manager information:
	Maria N
	Name ►
	Gaming manager compensation ▶\$
	Description of services provided ▶
	☐ Director/officer ☐ Employee ☐ Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license? Yes No
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$
Par	
· ai	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this
	part to provide any additional information (see instructions).
AND	HOURLY RATES AND DOES NOT PROVIDE REIMBURSEMENT OF COSTS.
4.A	PPCO GROUP - AGREEMENT SETS FORTH FEES FOR SERVICES, PRINT COSTS AND
3514	TANK GETT DE TELLET. GO GETG
ADM	INISTRATIVE COSTS.

Sched	ule G (Form 990 or 990-EZ) 2011 Page <b>3</b>
11	Does the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and
	records:
	Mana N
	Name ►
	Address ▶
45.	
15 a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
h	revenue?
D	amount of gaming revenue retained by the third party  \$\bigs\  \bigs\  \bigs\
С	If "Yes," enter name and address of the third party:
•	
	Name ►
	Address ►
16	Gaming manager information:
	Name ►
	Gaming manager compensation ▶\$
	Description of services provided ▶
	Director/officer Employee Independent contractor
	birector/officer Employee maependent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations
	or spent in the organization's own exempt activities during the tax year ▶ \$
Par	
	columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
SCH	EDULE G, PART I, LINE 3
DCII	EDOLL C, IIMI I, LINE S
SAV	E THE CHILDREN IS REGISTERED IN ALL STATES REQUIRING REGISTRATION. WE
SOL	ICIT CONTRIBUTIONS IN ALL 50 STATES AND THE DISTRICT OF COLUMBIA.

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

OMB No. 1545-0047

2011 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

**Employer identification number** Name of the organization SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash (f) Method of valuation (a) Name and address of organization (b) EIN (c) IRC section (g) Description of (e) Amount of non-(h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance cash assistance or assistance (1) AB COMBS - PERRY CO BOE 61-6001294 PERRY COUNTY 315 PARK AVENUE HAZARD, KY 41701 95,594 TO SUPPORT IN-SCHOOL (2) AB COMBS - PERRY CO BOE 315 PARK AVENUE HAZARD, KY 41701 61-6001294 PERRY COUNTY 14,000. BOOKS TO SUPPORT IN-SCHOOL (3) ACADEMY FOR EDUCATIONAL DEVELOPMENT 1825 CONNECTICUT AVENUE 20009 13-6110212 b01(C)(3) 354,366. TO PROVIDE SUPPORT F (4) ACADEMY FOR EDUCATIONAL DEVELOPMENT 1825 CONNECTICUT AVENUE 20009 13-6110212 b01(C)(3) 57,637. "TO PROVIDE TECHNICA (5) ACADEMY FOR EDUCATIONAL DEVELOPMENT (AED) 1825 CONNECTICUT AVENUE 20009 13-6110212 5<u>01(C)(3)</u> 331,538. BASIC EDUCATION AUBURN UNIVERSITY AUBURN, AL 36849 63-6000724 501(C)(3) 167,721 TO SUPPORT IN-SCHOOL (7) ALAMOSA ELEMENTARY 209 VICTORIA ALAMOSA, CO 81101 84-6011793 ALAMOSA COUNTY 31,084 LITERACY, ESSS, AND/ (8) ALAMOSA ELEMENTARY 209 VICTORIA ALAMOSA, CO 81101 84-6011793 ALAMOSA COUNTY 19,140. (9) ALICEVILLE ELEMENTARY SCHOOL PO BOX 32 ALICEVILLE, AL 35442 63-6001036 PICKENS COUNTY 44,331 TO SUPPORT IN-SCHOOL (10) ALPAUGH USD PO BOX 9 ALPAUGH, CA 93201 77-0031861 ALPAUGH USD 56,428 TO SUPPORT IN-SCHOOL (11) ALPAUGH USD PO BOX 9 ALPAUGH, CA 93201 77-0031861 ALPAUGH USD 10.788. FMV TO SUPPORT IN-SCHOOL (12) ALTA ELEMENTARY SCHOOL - TA 675 WEST MANNING AVENUE REEDLEY, CA 93654 58-2103066 kcusp 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Name of the organization						Employer identifica	tion number
SAVE THE CHILDREN FEDERATION, INC.						06-072648	7
Part I General Information on Grants and	Assistance	•					
<ol> <li>Does the organization maintain records to sul the selection criteria used to award the grants</li> <li>Describe in Part IV the organization's procedu</li> </ol>	or assistance	?					X Yes No
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for ar Part II can be duplicated if additional	y recipient	that received i	more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	nt received more t	han \$5,000.
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AMER HRT ASSOC-LA OBSTY COU SC							
4962 FLORIDA BLVD., SUITE 402	13-5613797	501(C)(3)	39,896.				USP ADVOCACY SUB-GRA
(2) AMERICAN HEART ASSOC-LAS VEGAS							
4445 S. HONES BLVD., SUITE 1	13-5613797	501(C)(3)	7,200.				CAMPAIGN FOR HEALTHY
(3) AMERICAN HEART ASSOCTN			·				
1818 PATTERSON STREET NASHVILLE, TN 37203	13-5613797	501(C)(3)	74,931.				USP ADVOCACY SUB-GRA
(4) AMERICAN UNIVERSITY							
7501 WISCONSIN AVENUE BETHESDA MD 20814	53-0196549	501(C)(3)	36,006.				FIRST PAYMENT FOR SU
(5) AMITE COUNTY ELEMENTARY SCHOOL							
533 MAGGIE STREET LIBERTY, MS 39645	64-6000075	AMITE COUNTY	196,166.				TO SUPPORT IN-SCHOOL
(6) AMITE COUNTY SCHOOL DISTRICT - AMITE COUNTY							
533 MAGGIE STREET LIBERTY, MS 39645	64-6000075	AMITE COUNTY		17,548.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(7) ANDREWS ELEMENTARY SCHOOL							
13072 COUNTY LINE ROAD ANDREWS, SC 29510	57-6000354	GEORGETOWN COUN	97,457.				TO SUPPORT IN-SCHOOL
(8) ANDREWS ELEMENTARY SCHOOL							
13072 COUNTY LINE ROAD ANDREWS, SC 29510	57-6000354	GEORGETOWN COUN		19,384.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(9) AR ADVOCATES FOR CHILDREN&FAMI							
UNION STATION, SUITE 306	71-0492205	501(C)(3)	21,813.				USP ADVOCACY SUB-GRA
(10) ARCHITECTURE FOR HUMANITY, INC							
848 FOLSOM SUITE 201	30-0038297	501(C)(3)	101,492.				SCHOOL CONSTRUCTION
(11) ARLIE BOGGS ELEM-LETCHER BOE							
222 PARKS STREET WHITESBURG, KY 41858	61-6001375	LETCHER COUNTY	33,514.				TO SUPPORT IN-SCHOOL
(12) ARLIE BOGGS ELEM-LETCHER BOE							
222 PARKS STREET WHITESBURG, KY 41858	61-6001375	LETCHER COUNTY		6,462.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
<ul> <li>Enter total number of section 501(c)(3) and g</li> <li>Enter total number of other organizations liste</li> <li>For Paperwork Reduction Act Notice, see the Institute</li> </ul>	d in the line	1 table				<u> </u>	

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization						Employer identifica	
SAVE THE CHILDREN FEDERATION, INC.						06-072648	7
Part I General Information on Grants and	Assistance	)					
<ol> <li>Does the organization maintain records to suithe selection criteria used to award the grants</li> <li>Describe in Part IV the organization's procedure.</li> </ol>	or assistance	e?			• •		X Yes No
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for ar Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	ent received more t	han \$5,000.
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ASHIWI ELEMENTARY							
P.O. DRAWER A, 12 TWIN BUTTES DR	85-0278577	ZUNI		9,170.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(2) ASHIWI ELEMENTARY SCHOOL							
P.O. DRAWER A, 12 TWIN BUTTES DR	85-0278577	ZUNI	68,517.				LITERACY, ESSS, AND/
(3) ASHTON ELEMENTARY							
1200 MAIN STREET POINT PLEASANT, WV 25550		MASON COUNTY	102,476.				TO SUPPORT IN-SCHOOL
(4) ASHTON ELEMENTARY							
1200 MAIN STREET POINT PLEASANT, WV 25550	55-6000353	MASON COUNTY		22,682.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(5) AUGUSTA ELEMENTARY SCHOOL							
320 SYCAMORE AUGUSTA, AR 72006	71-6020508	AUGUSTA PS	127,200.				TO SUPPORT IN-SCHOOL
(6) AUGUSTA PUBLIC SCHOOLS/AUGUSTA ELEMENTARY							
320 SYCAMORE AUGUSTA, AR 72006	71-6020508	AUGUSTA PS		8,747.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(7) BARNWELL PRIMARY SCHOOL							
734 HAGOOD AVENUE BARNWELL, SC 29812	57-6000087	BARNWELL	74,658.				TO SUPPORT IN-SCHOOL
(8) BARNWELL PRIMARY SCHOOL							
734 HAGOOD AVENUE BARNWELL, SC 29812	57-6000087	BARNWELL		16,941.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(9) BEALE ELEMENTARY							
1200 MAIN STREET POINT PLEASANT, WV 25550	55-6000353	MASON COUNTY	115,562.				TO SUPPORT IN-SCHOOL
(10) BEALE ELEMENTARY							
1200 MAIN STREET POINT PLEASANT, WV 25550	55-6000353	MASON COUNTY		23,219.	FMV	BOOKS & TOYS	TO SUPPORT IN-SCHOOL
(11) BEAVER CREEK-KCBOE-KY							
P.O. BOX 869 HINDMAN, KY 41822	61-6001297	KNOTT COUNTY	105,090.				TO SUPPORT IN-SCHOOL
(12) BEAVER CREEK-KCBOE-KY							
P.O. BOX 869 HINDMAN, KY 41822		KNOTT COUNTY		14,257.	-	BOOKS	TO SUPPORT IN-SCHOOL
2 Enter total number of section 501(c)(3) and g							
3 Enter total number of other organizations liste						<u> </u>	
For Paperwork Reduction Act Notice, see the Ins	structions fo	r Form 990.				Sched	lule I (Form 990) (2011)

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2523569

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990. Open to Public Inspection

**Employer identification number** Name of the organization SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash (a) Name and address of organization (b) EIN (f) Method of valuation (g) Description of (c) IRC section (e) Amount of non-(h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance cash assistance or assistance (1) BECKHAM BATES -LETCHER CO 222 PARKS STREET WHITESBURG, KY 41858 61-6001375 LETCHER COUNTY 68,313 TO SUPPORT IN-SCHOOL (2) BECKHAM BATES -LETCHER CO 222 PARKS STREET WHITESBURG, KY 41858 61-6001375 LETCHER COUNTY 15,869. BOOKS TO SUPPORT IN-SCHOOL (3) BEECH CREST ELEMENTARY SCHOOL 305 VALLEY DRIVE 71-6020534 W. HELENA 61,539. TO SUPPORT IN-SCHOOL (4) BELLS CITY SCHOOL DISTRICT / BELLS ELEMENTA 4532 HWY 88 SOUTH BELLS, TN 38006 62-6000245 BELLS CITY 7,202. BOOKS (5) BELLS ELEMENTARY SCHOOL 62-6000245 BELLS CITY 4532 HWY 88 SOUTH BELLS, TN 38006 77,699. TO SUPPORT IN-SCHOOL (6) BERINO ELEMENTARY PO DRAWER 70 ANTHONY, NM 88021 85-6000313 GADSDEN 43,842. LITERACY, ESSS, AND/ (7) BERINO ELEMENTARY PO DRAWER 70 ANTHONY, NM 88021 85-6000313 GADSDEN 7,465. LITERACY, ESSS, AND (8) BETHUNE-BOWMAN ELEMENTARY SCHO 57-6000772 TO SUPPORT IN-SCHOOL 4857 CHARLESTON HWY, SC 29133 DRANGEBURG 71,544 (9) BETHUNE-BOWMAN ELEMENTARY SCHO 4857 CHARLESTON HWY, SC 29133 57-6000772 DRANGEBURG 17,954. TO SUPPORT IN-SCHOOL (10) BIG CREEK ELEM 128 RICHMOND ROAD MANCHESTER, KY 40962 61-6001320 CLAY COUNTY 107,958 TO SUPPORT IN-SCHOOL (11) BIG CREEK ELEM 128 RICHMOND ROAD MANCHESTER, KY 40962 61-6001320 CLAY COUNTY 18,018. FMV TO SUPPORT IN-SCHOOL (12) BISHOPVILLE PRIMARY SCHOOL 603 NORTH DENNIS AVENUE? 57-6000377 LEE COUNTY 60.728 TO SUPPORT IN-SCHOOL 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . .

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

Schedule I (Form 990) (2011)

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

OMB No. 1545-0047

2011 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Employer identification number Name of the organization SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash (a) Name and address of organization (b) EIN (f) Method of valuation (c) IRC section (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance cash assistance or assistance (1) BISHOPVILLE PRIMARY SCHOOL 603 NORTH DENNIS AVENUE? 57-6000377 LEE COUNTY TO SUPPORT IN-SCHOOL 25,341. (2) BONANZA BUYING CENTER, INC / SHELBY MIDDLE P.O. BOX 26629 DUNCAN, MS 38740 62-0923097 b01(c)(3) 11.012. FMV BOOKS TO SUPPORT IN-SCHOOL (3) BONANZA BUYING CENTER, INC. / BROOKS ELEMEN P.O. BOX 26629 DUNCAN, MS 38740 62-0923097 b01(c)(3) 17,171. FMV TO SUPPORT IN-SCHOOL (4) BOSTON UNIVERSITY MEDICAL CENTER CAMPUS 72 EAST CONCORD STREES BOSTON, MA 02118 04-2103547 MASSACHUSETTS 43,356. (5) BOTTS ELEM-MENIFEE CO BOE P.O. BOX 110 FRENCHBURG, KY 40316 61-6001279 MENIFEE COUNTY 96,764. TO SUPPORT IN-SCHOOL (6) BOTTS ELEM-MENIFEE CO BOE P.O. BOX 110 FRENCHBURG, KY 40316 61-6001279 MENIFEE COUNTY 14,641. BOOKS TO SUPPORT IN-SCHOOL (7) BOYD ELEMENTARY 209 VICTORIA ALAMOSA, CO 81101 84-6011793 ALAMOSA COUNTY 24,019 LITERACY, ESSS, AND/ (8) BOYD ELEMENTARY 209 VICTORIA ALAMOSA, CO 81101 84-6011793 ALAMOSA COUNTY 6,820. (9) BOYS & GIRLS CLUB YAZOO CITY 516 N. CANAL ST. YAZOO CITY, MS 39194 45-0469376 501(C)(3) 46,533 TO SUPPORT IN-SCHOOL (10) BOYS AND GIRLS CLUB OF MS DELTA YAZOO CITY 45-0469376 501(C)(3) 516 N. CANAL ST. YAZOO CITY, MS 39194 26,318. BOOKS TO SUPPORT IN-SCHOOL (11) BREAUX BRIDGE ELEMENTARY 305 WASHINGTON ST. 72-6001274 ST. MARTIN PARI 95,724. TO SUPPORT IN-SCHOOL (12) BRIDGEPORT ELEMENTARY 305 HEDRICK DRIVE NEWPORT, TN 37821 62-6000539 COCKE COUNTY 139,103 TO SUPPORT IN-SCHOOL 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2011)

JSA

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

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identificat	tion number
SAVE THE CHILDREN FEDERATION, INC.						06-072648	7
Part I General Information on Grants and	Assistance	<b>!</b>					
<ol> <li>Does the organization maintain records to subthe selection criteria used to award the grants</li> <li>Describe in Part IV the organization's procedure.</li> </ol>	or assistance	e?					X Yes No
Part II Grants and Other Assistance to Go to Form 990, Part IV, line 21, for an Part II can be duplicated if additional	y recipient	that received	more than \$5,00	00. Check this b	ox if no one recipie	ration answered "Y ent received more t	han \$5,000.
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BRIDGEPORT ELEMENTARY	_						
305 HEDRICK DRIVE NEWPORT, TN 37821	62-6000539	COCKE COUNTY		21,848.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(2) BROOKS ELEMENTARY SCHOOL	-						
P.O. BOX 26629 DUNCAN, MS 38740	62-0923097	501(C)(3)	157,004.				TO SUPPORT IN-SCHOOL
(3) CAMDEN FAIRVIEW IVORY PRIMARY	-						
615 CLIFTON ST. CAMDEN, AR 71701	71-6020834	CAMDEN FAIRVIEW	68,398.				TO SUPPORT IN-SCHOOL
(4) CAMDEN FAIRVIEW/CAMDEN FAIRVIEW IVORY PRIMA	_						
615 CLIFTON ST. CAMDEN, AR 71701	71-6020834	CAMDEN FAIRVIEW		9,907.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(5) CANYON DE CHELLY ELEMENTARY	-						
HWY 191 & NAVAJO RT 7 CHINLE, AZ 86503	86-6006232	CHINLE	65,137.				LITERACY, ESSS, AND
_(6) CANYON DE CHELLY ELEMENTARY	-						
HWY 191 & NAVAJO RT 7 CHINLE, AZ 86503	86-6006232	CHINLE		9,219.	FMV	BOOKS	LITERACY, ESSS, AND
(7) CARE BANGLADESH	_						
151 ELLIS ST NE ATLANTA, GA 30303	13-1685039	501(C)(3)	761,837.				HIV
(8) CARE ETHIOPIA							
151 ELLIS ST NE ATLANTA, GA 30303	13-1685039	501(C)(3)	1,135,258.				TO PROVIDE SUPPORT E
(9) CARE ETHIOPIA							
151 ELLIS ST NE ATLANTA, GA 30303	13-1685039	501(C)(3)	225,542.				TO PROVIDE SUPPORT E
(10) CARL BROWN CENTER							
201 HUMPHREY STREET MARKS, MS 38646	64-0629668	501(C)(3)	41,169.				TO SUPPORT IN-SCHOOL
(11) CARR CREEK-KCBOE-KY							
P.O. BOX 869 HINDMAN, KY 41822	61-6001297	KNOTT COUNTY	114,902.				TO SUPPORT IN-SCHOOL
(12) CARR CREEK-KCBOE-KY							
P.O. BOX 869 HINDMAN, KY 41822		KNOTT COUNTY		14,334.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
2 Enter total number of section 501(c)(3) and g	overnment o	rganizations liste	ed in the line 1 tabl	e		<del></del> <b>&gt;</b>	· <del></del>
3 Enter total number of other organizations liste							
For Paperwork Reduction Act Notice, see the Ins							dule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990.

Name	of the organization		·	·	·		Employer identifica	tion number
SAV	E THE CHILDREN FEDERATION, INC.						06-072648	7
Part	General Information on Grants and	Assistance	•					
t	Does the organization maintain records to sul the selection criteria used to award the grants Describe in Part IV the organization's procedu	or assistance	e?					X Yes No
Par	Grants and Other Assistance to G to Form 990, Part IV, line 21, for ar Part II can be duplicated if additional	ny recipient	that received	tions in the Unit more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	ation answered "Y nt received more t	es" han \$5,000. ▶ □
1	(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
_(1)	CHAVIES-PERRY CO BOE							
	315 PARK AVENUE HAZARD, KY 41701	61-6001294	PERRY COUNTY	66,635.				TO SUPPORT IN-SCHOO
(2)	CHAVIES-PERRY CO BOE							
	315 PARK AVENUE HAZARD, KY 41701	61-6001294	PERRY COUNTY		13,891.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(3)	CHICKASAW COUNTY SCHOOL DISTRICT / HOULKA E							
	PO BOX 480 HOULKA, MS 38850	64-6000220	CHICKASAW COUNT		10,059.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(4)	CHILDHD OBESITY PREV COALIT(SC							
	718 6TH AVE SOUTH SEATTLE, WA 98104	91-0982879	501(C)(3)	51,750.				SUB-GRANT FOR ADVOCA
_(5)	CHILDHD OBESITY PREV COALIT(SG							
:	159 S JACKSON ST., SUITE 510	91-6186093	501(C)(3)	25,000.				USP ADVOCACY SUB-GRA
_(6)	CHILDREN NUTRITION PROGRAM (CNP)							
	1918 UNION AVENUE CHATTANOOGA, TN 37404	20-1394468	501(C)(3)	36,375.				NUTRITION
_(7)	CHILDREN'S ACTION ALLIANCE AZ							
	4001 NORTH 3RD STREET, SUITE 160	86-0594785	501(C)(3)	5,055.				USP ADVOCACY SUB-GRA
_(8)	CHILDRENS HAVEN OF SW MO							
	701 S. PICHER AVE. JOPLIN, MO 64801	04-3603881	501(C)(3)	6,000.				DEU RESPONSE
_(9)	CHINLE ELEMENTARY							
	HWY 191 & NAVAJO RT 7 CHINLE, AZ 86503	86-6006232	CHINLE UNIFIED	47,938.				LITERACY, ESSS, AND
(10)	CHINLE ELEMENTARY							
]	HWY 191 & NAVAJO RT 7 CHINLE, AZ 86503	86-6006232	CHINLE UNIFIED		8,998.	FMV	BOOKS	LITERACY, ESSS, AND
(11)	CHLDRNS ACTN ALANCE AZ SUBCONT							
	4001 NORTH 3RD STREET, SUITE 160	86-0594785	501(C)(3)	6,000.				USP ADVOCACY SUB-GRA
<b>(12)</b>	CHURCH ROCK ELEM.							
	P.O. BOX 1318 GALLUP, NM 87305	85-6005550	GALLUP-MCKINLEY		11,291.	FMV	BOOKS	USP ADVOCACY SUB-GR
2	Enter total number of section 501(c)(3) and g	overnment o	rganizations liste	ed in the line 1 tabl	e		<del> </del>	
<u>3</u> [	Enter total number of other organizations liste	ed in the line	1 table	<u> </u>	<u> </u>	<u> </u>	<u> </u>	
For F	Panerwork Reduction Act Notice, see the In-	structions fo	r Form 990			·	Scher	tule I (Form 990) (2011)

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

OMB No. 1545-0047

2011
Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

**Employer identification number** Name of the organization SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash (a) Name and address of organization (b) EIN (f) Method of valuation (c) IRC section (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance cash assistance or assistance (1) CHURCH ROCK ELEMENTARY SCHOOL 85-6005550 GALLUP-MCKINLEY P.O. BOX 1318 GALLUP, NM 87305 103,461 LITERACY, ESSS, AND/ (2) CLARKE COUNTY - JOE GILLMORE ELEM. 155 COBB STREET GROVE HILL, AL 36451 63-6000816 CLARKE COUNTY B 16,126. FMV BOOKS LITERACY, ESSS, AND/ (3) COAHOMA COUNTY SCHOOL DISTRICT / FRIARS POI PO BOX 600 FRIARS POINT, MS 38631 64-6000266 COAHOMA COUNTY 11,447. FMV LITERACY, ESSS, AND/ 1100 G STREET, NW WASHINGTON, DC 20036 31-1744950 b01(c)(3) 456,218 (5) COWAN ELEM-LETCHER CO BOE 222 PARKS STREET WHITESBURG, KY 41858 61-6001375 LETCHER COUNTY 71,361. TO SUPPORT IN-SCHOOL (6) COWAN ELEM-LETCHER CO BOE 222 PARKS STREET WHITESBURG, KY 41858 61-6001375 LETCHER COUNTY 15,788. BOOKS TO SUPPORT IN-SCHOOL (7) CRESTVIEW ELEMENTARY SCHOOL 1580 HWY 51 SOUTH COVINGTON, TN 38019 62-1717314 TIPTON COUNTY 59,938 TO SUPPORT IN-SCHOOL (8) CROCKETT CO BOE / MAURY CITY ELEMENTARY 102 NORTH CAVALIER DRIVE ALAMO, TN 38001 62-6000547 CROCKETT COUNT 6,471. (9) CROWN POINT ELEM. CROWNPOINT P.O. BOX 1318 GALLUP, NM 87305 85-6005550 11,868. BOOKS TO SUPPORT IN-SCHOOL (10) CROWNPOINT ELEMENTARY SCHOOL 85-6005550 CROWNPOINT 92,212 P.O. BOX 1318 GALLUP, NM 87305 LITERACY, ESSS, AND/ (11) CUBERO ELEMENTARY P.O. BOX 8 GRANTS, NM 87020 85-6000324 GRANTS CIBOLA ( 10.843. FMV BOOKS LITERACY, ESSS, AND/ (12) CUBERO ELEMENTARY SCHOOL P.O. BOX 8 GRANTS, NM 87020 85-6000324 GRANTS CIBOLA C 79,775 LITERACY, ESSS, AND/ 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . .

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

Schedule I (Form 990) (2011)

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

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identifica	tion number
SAVE THE CHILDREN FEDERATION, IN	iC.					06-072648	7
Part I General Information on Grants a	nd Assistance	)				'	
1 Does the organization maintain records to	substantiate the	e amount of the	grants or assistan	ice, the grantees	eligibility for the grant	s or assistance, and	
the selection criteria used to award the gra							X Yes No
2 Describe in Part IV the organization's proc	edures for mon	itoring the use of	f grant funds in the	United States.			
Part II Grants and Other Assistance to to Form 990, Part IV, line 21, for Part II can be duplicated if addition	any recipient	that received	tions in the Unit	00. Check this b	nplete if the organiz	ation answered "Y nt received more t	res" han \$5,000.
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) D.P. COOPER ELEMENTARY SCHOOL							
4568 SEABOARD ROAD SALTERS, SC 29590	57-6000411	WILLIAMSBURG	67,771.				TO SUPPORT IN-SCHOOL
(2) D.P. COOPER ELEMENTARY SCHOOL							
4568 SEABOARD ROAD SALTERS, SC 29590	57-6000411	WILLIAMSBURG		18,582.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(3) DECHERD ELEMENTARY SCHOOL							
215 S. COLLEGE STREET WINCHESTER, TN 37398	62-6000593	FRANKLIN COUNTY	110,533.				TO SUPPORT IN-SCHOOL
(4) DOVER ELEMENTARY SCHOOL							
1421 BEDFORD AVENUE, SC 29112	57-6000772	ORANGEBURG	104,171.				TO SUPPORT IN-SCHOOL
(5) DOVER ELEMENTARY SCHOOL							
1421 BEDFORD AVENUE, SC 29112	57-6000772	ORANGEBURG		16,404.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(6) DOWA YALANNE							
P.O. DRAWER A, 12 TWIN BUTTES DR	85-0278577	ZUNI	71,575.				LITERACY, ESSS, AND/
(7) dowa yalanne							
P.O. DRAWER A, 12 TWIN BUTTES DR	85-0278577	ZUNI		8,724.	FMV	BOOKS	LITERACY, ESSS, AND/
(8) DUNLAP ELEMENTARY - TA							
675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KCUSD	32,467.				TO SUPPORT IN-SCHOOL
(9) DUNLAP ELEMENTARY - TA							
675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KCUSD		11,787.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(10) EARLE ELEMENTARY SCHOOL							
802 BARTON EARLE, AR 72331	71-6021260	EARLE SD	68,733.				TO SUPPORT IN-SCHOOL
(11) EARLE SCHOOL DISTRICT/ EARLE ELEMENTARY							
802 BARTON EARLE, AR 72331	71-6021260	EARLE SD		8,814.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(12) EARLY LEARNING ACADEMY							
1610 N. WASHINGTON LEXINGTON, NE 68850	47-6002382	NEBRASKA	16,408.				TO SUPPORT EARLY CHI
2 Enter total number of section 501(c)(3) and	•	•					
3 Enter total number of other organizations I						<u> </u>	·
For Paperwork Reduction Act Notice, see the	Instructions fo	or ⊦orm 990.				Sched	dule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990.

Name	of the organization		•		•		Employer identifica	tion number
SAV	E THE CHILDREN FEDERATION, INC	! <b>.</b>					06-072648	7
Part	General Information on Grants and	d Assistance	<b>:</b>				•	
t	Does the organization maintain records to some selection criteria used to award the grant Describe in Part IV the organization's proced	ts or assistance dures for mon	e? itoring the use of	grant funds in the	United States.			X Yes No
Part	to Form 990, Part IV, line 21, for a Part II can be duplicated if additional	any recipient	that received	tions in the Unit more than \$5,00	00. Check this b	plete if the organizox if no one recipie	ation answered "Y nt received more t	′es" han \$5,000. ▶ □
1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
_(1) 1	EAST ELEMENTARY SCHOOL							
	2750 WEST SEMMES OSCEOLA, AR 72370	71-6021600	OSCEOLA	154,685.				TO SUPPORT IN-SCHOO
(2) I	EAST MARION ELEMENTARY							
	1010 HIGHWAY 13 NORTH COLUMBIA, MS 39429	64-6000671	MARION COUNTY	134,616.				TO SUPPORT IN-SCHOOL
(3) I	EAST SIDE ELEMENTARY							
	900 E. MAIN STREET BROWNSVILLE, TN 38012	62-6000659	HAYWOOD COUNTY	78,708.				TO SUPPORT IN-SCHOOL
(4) I	EAT SMART, MOVE MORE SC							
	PO BOX 3007 IRMO, SC 29063	57-1096619	501(C)(3)	25,066.				USP ADVOCACY SUB-GRA
_(5) 1	EDGEMONT ELEMENTARY							
	305 HEDRICK DRIVE NEWPORT, TN 37821	62-6000539	COCKE COUNTY	142,392.				TO SUPPORT IN-SCHOOL
_(6) <u>I</u>	EDGEMONT ELEMENTARY							
3	305 HEDRICK DRIVE NEWPORT, TN 37821	62-6000539	COCKE COUNTY		20,269.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
_(7) 1	EDUCARE OF OMAHA							
2	2123 PAUL ST. OMAHA, NE 68102	80-0015385	501(C)(3)	7,450.				TO SUPPORT EARLY CH
_(8) 1	EMMALENA-KCBOE-KY							
I	P.O. BOX 869 HINDMAN, KY 41822	61-6001297	KNOTT COUNTY	112,414.				TO SUPPORT IN-SCHOOL
_(9) <u>ı</u>	EMMALENA-KCBOE-KY							
I	P.O. BOX 869 HINDMAN, KY 41822	61-6001297	KNOTT COUNTY		14,683.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(10) I	ESCAMBIA COUNTY - RACHEL PATTERSON							
3	301 BELLEVILE AVENUE PO BOX 307	63-6000876	ESCAMBIA COUNTY		16,673.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(11) <u>I</u>	EVANS ELEMENTARY SCHOOL							
2	209 VICTORIA ALAMOSA, CO 81101	84-6011793	ALAMOSA	26,108.				LITERACY, ESSS, AND
(12) I	EVANS PRIMARY SCHOOL							
2	209 VICTORIA ALAMOSA, CO 81101	84-6011793	ALAMOSA		5,851.	FMV	BOOKS	LITERACY, ESSS, AND
<b>2</b> E	Enter total number of section 501(c)(3) and	government o	rganizations liste	ed in the line 1 tabl	e			
	Enter total number of other organizations lis						<u> </u>	•
For E	Panerwork Reduction Act Notice, see the I	netructions fo	r Form 990				Schar	Jule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identifica	tion number
SAVE THE CHILDREN FEDERATION, INC	•					06-072648	7
Part I General Information on Grants and	l Assistance	)					
<ol> <li>Does the organization maintain records to su the selection criteria used to award the grants</li> <li>Describe in Part IV the organization's proced</li> </ol>	s or assistance	e?					X Yes No
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for a Part II can be duplicated if additiona	ny recipient	that received	more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	nt received more t	han \$5,000.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) FARMERSVILLE USD							
571 E CITRUS AVENUE FARMERSVILLE, CA 93223	77-0565331	FARMERSVILLE	45,633.				TO SUPPORT IN-SCHOOL
(2) FARMERSVILLE USD			.,				
571 E CITRUS AVENUE FARMERSVILLE, CA 93223	77-0565331	FARMERSVILLE		9,396.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(3) FINCH ELEMENTARY				, , , , , , , , , , , , , , , , , , , ,			
PO BOX 785 WOODVILLE, MS 39669	64-6001230	WILKINSON COUNT	101,281.				TO SUPPORT IN-SCHOOL
(4) FOOD FOR THE HUNGRY			·				
1627 K STREET, NW, WASHINGTON, DC 20036	95-2680390	501(C)(3)	153,776.				TOPS PROJECT SUBGRAI
(5) FORREST CITY HEAD START			·				
954 RICE STREET FORREST CITY, AR 72335	45-3672468	501(C)(3)		7,337.	FMV	BOOKS	TOPS PROJECT SUBGRAI
(6) FORREST CITY SCHOOLS / STEWART ELEMENTARY							
845 N. ROSSER ST. FORREST CITY, AR 72335	72-6020499	FORREST CITY		8,107.	FMV	BOOKS	TOPS PROJECT SUBGRAI
(7) FOSTER PARK ELEMENTARY SCHOOL							
901 ARTHUR BLVD UNION, SC 29108	57-6004861	UNION COUNTY	75,662.				TO SUPPORT IN-SCHOOL
(8) FOSTER PARK ELEMENTARY SCHOOL							
901 ARTHUR BLVD UNION, SC 29108	57-6004861	UNION COUNTY		10,601.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(9) FRANKLIN CO. BOE / DECHERD ELEMENTARY							
215 S. COLLEGE STREET WINCHESTER, TN 37398	62-6000593	FRANKLIN COUNTY		11,613.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(10) FRANKLINTON ELEMENTARY							
800 MAIN STREET FRANKLINTON, LA 70438	72-6001459	FRANKLINTON	88,292.				TO SUPPORT IN-SCHOOL
(11) Franklinton Primary							
800 MAIN STREET FRANKLINTON, LA 70438	72-6001459	FRANKLINTON	100,650.				TO SUPPORT IN-SCHOOL
(12) FRIARS POINT ELEMENTARY SCHOOL							
PO BOX 600 FRIARS POINT, MS 38631	64-6000266	COAHOMA COUNTY	71,138.				TO SUPPORT IN-SCHOOL
<ul> <li>Enter total number of section 501(c)(3) and g</li> <li>Enter total number of other organizations list</li> <li>For Paperwork Reduction Act Notice, see the In</li> </ul>	ed in the line	1 table				<b>&gt;</b>	

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identifica	tion number
SAVE THE CHILDREN FEDERATION, INC						06-072648	7
Part I General Information on Grants and	d Assistance	)					
<ol> <li>Does the organization maintain records to su the selection criteria used to award the grants</li> <li>Describe in Part IV the organization's proced</li> </ol>	s or assistance	e?					X Yes No
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for a Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	nt received more t	han \$5,000.
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) FS ERVIN ELEMENTARY							
75 CAMDEN BYPASS CAMDEN, AL 36726	63-6001161	WILCOX COUNTY	15,052.				TO SUPPORT IN-SCHOOL
(2) GALLUP MCKINLEY SCHOOL DISTRICT							
PO BOX 1318 GALLUP, NM 87305	85-6005550	GALLUP MCKINLEY		19,742.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(3) GANADO ELEMENTARY							
PO BOX 1757 GANADO, AZ 86505	86-0394254	GANADO USD	59,640.				LITERACY, ESSS, AND
(4) GANADO ELEMENTARY							
PO BOX 1757 GANADO, AZ 86505	86-0394254	GANADO USD		8,937.	FMV	BOOKS	LITERACY, ESSS, AND
(5) GANADO INTERMEDIATE							
P.O. BOX 1757 GANADO, AZ 86505		GANADO USD	14,000.				TO SUPPORT IN-SCHOOL
(6) GEARY ELEMENTARY							
813 CAPITOL STREET SPENCER, WV 25276	55-6000396	ROANE COUNTY	102,613.				TO SUPPORT IN-SCHOOL
(7) GEARY ELEMENTARY							
813 CAPITOL STREET SPENCER, WV 25276	55-6000396	ROANE COUNTY		6,475.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(8) goose rock elementary	. 📗						
128 RICHMOND ROAD MANCHESTER, KY 40962	61-6001320	CLAY COUNTY	104,788.				TO SUPPORT IN-SCHOOL
(9) goose rock elementary	. 📗						
128 RICHMOND ROAD MANCHESTER, KY 40962	61-6001320	CLAY COUNTY		16,759.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(10) GOSHEN ELEMENTARY SCHOOL	. 📗						
5000 WEST CYPRESS AVE VISALIA, CA 93277	77-0531549	VISALIA	99,982.				TO SUPPORT IN-SCHOOL
(11) GOSHEN ELEMENTARY SCHOOL							
5000 WEST CYPRESS AVE VISALIA, CA 93277	77-0531549	VISALIA		13,603.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(12) GRAND JUNCTION ELEMENTARY SCHO							
PO BOX 112 BOLIVAR, TN 38008	62-6000649	HARDEMAN COUNTY	67,200.				TO SUPPORT IN-SCHOOL
<ul> <li>Enter total number of section 501(c)(3) and g</li> <li>Enter total number of other organizations list</li> <li>For Paperwork Reduction Act Notice, see the Ir</li> </ul>	ed in the line	1 table				<u> </u>	dule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization						Employer identificat	ion number
SAVE THE CHILDREN FEDERATION, INC.						06-072648	7
Part I General Information on Grants and	Assistance	•					
<ul> <li>Does the organization maintain records to sub the selection criteria used to award the grants</li> <li>Describe in Part IV the organization's procedu</li> </ul>	or assistance	e?					X Yes No
Part II Grants and Other Assistance to Go to Form 990, Part IV, line 21, for an Part II can be duplicated if additional	y recipient	that received	more than \$5,00	00. Check this b	plete if the organiza ox if no one recipier	nt received more the	es" han \$5,000. ▶ □
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) GREAT WESTERN ELEM - TA 675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KCUSD	33,209.				TO SUPPORT IN-SCHOOL
(2) GREAT WESTERN ELEM - TA							
675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KCUSD		12,223.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(3) GW CARVER ELEMENTARY							
1025 3RD STREET PRENTISS, MS 39474	64-6009027	JEFFERSON DAVIS	94,051.				TO SUPPORT IN-SCHOOL
(4) HACKER ELEM-CLAY BOE							
128 RICHMOND ROAD MANCHESTER, KY 40962	61-6001320	CLAY COUNTY	108,214.				TO SUPPORT IN-SCHOOL
(5) HACKER ELEM-CLAY BOE  128 RICHMOND ROAD MANCHESTER, KY 40962	61-6001320	CLAY COUNTY		16,059.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(6) HARDEMAN CO. SCHOOLS / GRAND JUNCTION PO BOX 112 BOLIVAR, TN 38008		HADEMAN COUNTY		11,245.		BOOKS	TO SUPPORT IN-SCHOOL
(7) HELEN KELLER INTERNATIONAL (HKI)  352 PARK AVE SOUTH, 12TH FLOOR	13-5562162		132,157.	11,213.			FOOD SECURITY
(8) HELEN KELLER INTERNATIONAL (HKI)	13-3302102	501(C)(3)	132,137.				FOOD SECURITI
352 PARK AVE SOUTH, 12TH FLOOR	13-5562162	501(C)(3)	53,833.				MYAP PROJECT
(9) HELENA-WEST HELENA SCHOOL DIST. / J.F. WAHL							
305 VALLEY DRIVE	71-6020534	HELENA W HELENA		13,787.	FMV	BOOKS	MYAP PROJECT
10) HELENA-WEST HELENA SCHOOL DIST. / WEST SIDE							
305 VALLEY DRIVE	71-6020534	HELENA W HELENA		12,428.	FMV	BOOKS	MYAP PROJECT
11) HELENA-WEST HELENA SCHOOL DIST/ BEECHCREST	71-6020534	HELENA W HELENA		12,740.	FMV	BOOKS	MYAP PROJECT
12) HELENA-WEST HELENA SCHOOL DIST/ WOODRUFF EL 305 VALLEY DRIVE		HELENA W HELENA		5,695.		BOOKS	MYAP PROJECT
2 Enter total number of section 501(c)(3) and go 3 Enter total number of other organizations liste	overnment o	rganizations liste 1 table		e			

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

Schedule I (Form 990) (2011)

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

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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

name of the organization						Employer Identifica	
SAVE THE CHILDREN FEDERATION, INC						06-072648	7
Part I General Information on Grants and							
<ol> <li>Does the organization maintain records to su the selection criteria used to award the grants</li> <li>Describe in Part IV the organization's proced</li> </ol>	s or assistance	e?			• •		X Yes No
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for a Part II can be duplicated if additiona	ny recipient	that received	more than \$5,00	00. Check this b	ox if no one recipie	zation answered "Y ent received more t	han \$5,000.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) HINDMAN-KCBOE-KY							
P.O. BOX 869 HINDMAN, KY 41822	61-6001297	KNOTT COUNTY	111,938.				TO SUPPORT IN-SCHOO
(2) HINDMAN-KCBOE-KY			,				
P.O. BOX 869 HINDMAN, KY 41822		KNOTT COUNTY		13,885.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(3) HOULKA ELEMENTARY SCHOOL							
PO BOX 480 HOULKA, MS 38850	64-6000220	CHICKSAW COUNTY	87,232.				TO SUPPORT IN-SCHOOL
(4) INDIANA UNIVERSITY, FINANCIAL MANAGEMENT SE							
PO BOX 66057 INDIANAPOLIS, INDIANA 46266-60	35-6001673	501(C)(3)	34,000.				TO SUPPORT IN-SCHOOL
(5) INTERNATIONAL DEVELOPMENT ENTERPRISES(IDE),							
10403 W COLFAX AVE. #500 LAKEWOOD, CO 80215	23-2220051	501(C)(3)	129,355.				MYAP PROJECT
(6) INTERNATIONAL RELIEF & DEVELOPMENT							
1621 N. KENT STREET 4TH FLOOR	20-5183267	501(C)(3)	620,716.				BASIC EDUCATION
(7) INTERNATIONAL RESCUE COMMITTEE							
122 EAST 42NST STREET NEW YORK, NY 10168	13-5660870	501(C)(3)	852,998.				TO SUPPORT IN-SCHOOL
(8) IT MONTGOMERY ELEMENTARY SCHOO	. 📗						
301 E. MARTIN LUTHER KING ST.	64-0802373	501(C)(3)	150,413.				TO SUPPORT IN-SCHOO
(9) JACKPOT COMBINED SCHOOL							
PO BOX 1012 ELKO, NV 89803	88-6000985	ELKO COUNTY	57,885.				LITERACY, ESSS, AND
(10) JACKPOT COMBINED SCHOOL							
PO BOX 1012 ELKO, NV 89803	88-6000985	ELKO COUNTY		5,099.	FMV	BOOKS	LITERACY, ESSS, AND
(11) JE JOHNSON ELEMENTARY							
1025 3RD STREET PRENTISS, MS 39474	64-6009027	JEFFERSON DAVIS	92,209.				TO SUPPORT IN-SCHOOL
(12) JEFFERSON DAVIS COUNTY - G.W. CARVER ELEM.							
1025 3RD STREET PRENTISS, MS 39474		JEFFERSON DAVIS		15,058.	•	BOOKS	TO SUPPORT IN-SCHOO
2 Enter total number of section 501(c)(3) and g	government o	organizations liste	ed in the line 1 tabl	le			
3 Enter total number of other organizations list	ed in the line	1 table				<u> </u>	
For Paperwork Reduction Act Notice, see the In	structions fo	or Form 990.				Sched	dule I (Form 990) (2011)

Schedule I (Form 990) (2011)

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

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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

Name	of the organization						Employer identifica	tion number
SAVI	E THE CHILDREN FEDERATION, INC.						06-072648	7
Part	General Information on Grants and	Assistance	•					
t	Does the organization maintain records to sub the selection criteria used to award the grants Describe in Part IV the organization's procedu	or assistance	e?					X Yes No
Part	Grants and Other Assistance to Go to Form 990, Part IV, line 21, for ar Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this b		nt received more t	han \$5,000.
1	(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
<b>(1)</b> a	EFFERSON DAVIS COUNTY - J.E. JOHNSON ELEM.							
1	.025 3RD STREET PRENTISS, MS 39474	64-6009027	JEFFERSON DAVIS		14,699.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
<b>(2)</b> J	EFFERSON ELEMENTARY - TA							
	75 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	REEDLEY	34,130.				TO SUPPORT IN-SCHOO
<b>(3)</b> J	EFFERSON ELEMENTARY - TA							
6	75 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	REEDLEY		12,693.	FMV	BOOKS	TO SUPPORT IN-SCHOO
<b>(4)</b> J	F WAHL ELEMENTARY SCHOOL							
3	305 VALLEY DRIVE	71-6020534	HELENA W HELENA	72,969.				TO SUPPORT IN-SCHOO
<b>(5)</b> J	OE GILLMORE ELEMENTARY SCHOOL							
1	.55 COBB STREET GROVE HILL, AL 36451	63-6000816	CLARKE COUNTY	10,627.				TO SUPPORT IN-SCHOO
<b>(6)</b> J	ONES FORK-KCBOE-KY							
F	P.O. BOX 869 HINDMAN, KY 41822	61-6001297	KNOTT COUNTY	98,722.				TO SUPPORT IN-SCHOO
<b>(7)</b> 3	ONES FORK-KCBOE-KY							
F	P.O. BOX 869 HINDMAN, KY 41822	61-6001297	KNOTT COUNTY		13,395.	FMV	BOOKS	TO SUPPORT IN-SCHOO
(8) K	AHO'OMIKI HI COUNCIL PHYS ACT							
1	493 HALEKOA DRIVE HONOLULU, HI 96821	47-0890686	501(C)(3)	36,000.				USP ADVOCACY SUB-GR
(9) K	ELLY EDWARDS ELEMENTARY SCHOO							
1	.071 ELKO STREET, WILLISTON,, SC 29853	57-6001201	WILLISTON	85,891.				TO SUPPORT IN-SCHOO
10) ĸ	ELLY EDWARDS ELEMENTARY SCHOO							
1	.071 ELKO STREET, WILLISTON,, SC 29853	57-6001201	WILLISTON		15,325.	FMV	BOOKS	TO SUPPORT IN-SCHOO
<b>11)</b> 🛚	INGS CANYON SCHOOL DISTRICT/KINGS CANYON R							
	75W. MANNING REEDLEY, CA 93654	58-2103066	KINGS CANYON		6,554.	FMV	BOOKS	TO SUPPORT IN-SCHOO
12) K	INGS CANYON UNIFIED SCHOOL DIST.							
	75 W MANNING REEDLEY, CA 93654	58-2103066	KINGS CANYON		6,317.	FMV	BOOKS	TO SUPPORT IN-SCHOO
2 E	Enter total number of section 501(c)(3) and g	overnment o	rganizations liste	ed in the line 1 tab	e			
3 E	Enter total number of other organizations liste	ed in the line	1 table	<u> </u>		<u> </u>	<u></u>	
	anerwork Reduction Act Notice see the In-							lule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

**Employer identification number** Name of the organization SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash (a) Name and address of organization (b) EIN (f) Method of valuation (g) Description of (c) IRC section (e) Amount of non-(h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance cash assistance or assistance (1) KINGS CANYON UNIFIED SCHOOL DISTRICT/ALTA E 675 W MANNING REEDLEY, CA 93654 58-2103066 KINGS CANYON 8,041. TO SUPPORT IN-SCHOOL (2) KY YOUTH ADVOCATE (SUB-CONTRAC 11001 BLUEGRASS PKWY., SUITE 100 61-0929390 b01(C)(3) 20,000. USP ADVOCACY SUB-GRA (3) LAFAYETTE HOUSE P.O. BOX 1765 JOPLIN, MO 64802 43-1170015 b01(C)(3) 6,000 DEU RESPONSE (4) LAGUNA ELEMENTARY PO BOX 207 LAGUNA, NM 87026 85-0402575 LAGUNA DOE 29,739 (5) LAGUNA ELEMENTARY 85-0402575 LAGUNA DOE PO BOX 207 LAGUNA, NM 87026 6,447. FMV BOOKS LITERACY, ESSS, AND/ (6) LAKE CITY ELEMENTARY SCHOOL 57-0641054 FLORENCE COUNTY 906 NORTH MATTHEWS ROAD LAKE CITY, SC 29560 46,321 TO SUPPORT IN-SCHOOL (7) LAKE CITY ELEMENTARY SCHOOL 906 NORTH MATTHEWS ROAD LAKE CITY, SC 29560 57-0641054 FLORENCE COUNT 22,742. TO SUPPORT IN-SCHOOL (8) LAKE QUINAULT SCHOOL DISTRICT 91-0997236 LAKE QUINAULT TO SUPPORT IN-SCHOOL 6130 HIGHWAY 101 NORTH 54,691 (9) LAUDERDALE COUNTY SCHOOL DISTRICT/RIPLEY PR 402 S. WASHIONGTON STREET RIPLEY, TN 38063 62-6000707 LAUDERDALE COUN 5,790. TO SUPPORT IN-SCHOOL (10) LBJ ELEM-BREATHITT BOE 420 COURT STREET JACKSON, KY 41339 61-6001304 BREATHITT COUNT 87,299 TO SUPPORT IN-SCHOOL (11) LBJ ELEM-BREATHITT BOE 420 COURT STREET JACKSON, KY 41339 61-6001304 BREATHITT COUNT 16,246. FMV BOOKS TO SUPPORT IN-SCHOOL (12) LEE COUNTY/WHITTEN ELEMENTARY 188 W. CHESTNUT ST MARIANNA, AR 72360 71-6021344 LEE COUNTY TO SUPPORT IN-SCHOOL 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization						Employer identifica	tion number			
SAVE THE CHILDREN FEDERATION, INC.	<u>'</u>									
Part I General Information on Grants and	Assistance	<b>,</b>				<u>'</u>				
1 Does the organization maintain records to su	bstantiate the	amount of the	grants or assistan	ce, the grantees'	eligibility for the grant	s or assistance, and				
the selection criteria used to award the grants							X Yes No			
2 Describe in Part IV the organization's proced	ures for moni	toring the use o	f grant funds in the	United States.						
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for an Part II can be duplicated if additional	ny recipient	that received	tions in the Unit more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	ation answered "Y nt received more t	res" han \$5,000.			
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
(1) LETCHER ELEM-LETCHER CO BOE										
222 PARKS STREET WHITESBURG, KY 41858	61-6001375	LETCHER COUNTY	69,934.				TO SUPPORT IN-SCHOOL			
(2) LETCHER ELEM-LETCHER CO BOE										
222 PARKS STREET WHITESBURG, KY 41858	61-6001375	LETCHER COUNTY		16,433.	FMV	BOOKS	TO SUPPORT IN-SCHOOL			
_(3) LINCOLN_ELEMENTARY - TA										
675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KCUSD	35,423.				TO SUPPORT IN-SCHOOL			
_(4) LINCOLN_ELEMENTARY - TA										
675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KCUSD		12,384.	FMV	BOOKS	TO SUPPORT IN-SCHOOL			
(5) LINDEN ELEMENTARY SCHOOL										
333 SOUTH MILL STREET LINDEN, TN 37096	62-6000787	PERRY COUNTY	83,849.				TO SUPPORT IN-SCHOOL			
(6) LOBELVILLE ELEMENTARY SCHOOL										
333 SOUTH MILL STREET LINDEN, TN 37096	62-6000787	PERRY COUNTY	101,127.				TO SUPPORT IN-SCHOOL			
(7) LOWER LEE ELEMENTARY SCHOOL										
5142 ST CHARLES RD? MAYESVILLE, SC 29104	57-6000377	LEE COUNTY	33,748.				TO SUPPORT IN-SCHOOL			
(8) LOWER LEE ELEMENTARY SCHOOL										
5142 ST CHARLES RD? MAYESVILLE, SC 29104	57-6000377	LEE COUNTY		20,563.	FMV	BOOKS	TO SUPPORT IN-SCHOOL			
(9) MACEDONIA ELEMENTARY SCHOOL										
556 JONES BRIDGE ROAD BLACKVILLE, SC 29817	57-6000126	BLACKVILLE	77,857.				TO SUPPORT IN-SCHOOL			
(10) MACEDONIA ELEMENTARY SCHOOL										
556 JONES BRIDGE ROAD BLACKVILLE, SC 29817	57-6000126	BLACKVILLE		17,085.	FMV	BOOKS	TO SUPPORT IN-SCHOOL			
(11) MANAGEMENT SYSTEMS INTERNATIONAL										
1130 CONNECTICUT AVE. NW # 200	52-1215041		28,193.				EDUCATION BASE 2			
(12) MANCHESTER ELEM-CLAY BOE										
128 RICHMOND ROAD MANCHESTER, KY 40962	61-6001320	CLAY COUNTY	154,579.				TO SUPPORT IN-SCHOOL			
<ul> <li>Enter total number of section 501(c)(3) and g</li> <li>Enter total number of other organizations lists</li> <li>For Paperwork Reduction Act Notice, see the In</li> </ul>	ed in the line	1 table				Schai				

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

Name	e of the organization		·		•		Employer identifica	tion number
SAV	THE CHILDREN FEDERATION, INC.						06-072648	7
Par	t I General Information on Grants and	Assistance	<b>;</b>				'	
	Does the organization maintain records to sul the selection criteria used to award the grants Describe in Part IV the organization's procedu	or assistance	e?					X Yes No
Par	to Form 990, Part IV, line 21, for ar Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this b	plete if the organiza ox if no one recipier	nt received more t	han \$5,000.
1	(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	MANCHESTER ELEM-CLAY BOE							
	128 RICHMOND ROAD MANCHESTER, KY 40962	61-6001320	CLAY COUNTY		17,002.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(2)	MANNING EARLY CHILDHOOD CTR							
	2759 RACCOON RD, SC 29102 MANNING, SC 29102	57-6000708	CLARENDON #2	77,882.				TO SUPPORT IN-SCHOOL
(3)	MANNING EARLY CHILDHOOD CTR							
	2759 RACCOON RD, SC 29102 MANNING, SC 29102	57-6000708	CLARENDON #2		10,365.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(4)	MANNING PRIMARY SCHOOL							
	125 NORT BOUNDRY ST, SC 29102	57-6000708	CLARENDON #2	78,601.				TO SUPPORT IN-SCHOOL
(5)	MANNING PRIMARY SCHOOL							
	125 NORT BOUNDRY ST, SC 29102	57-6000708	CLARENDON #2		17,532.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
_(6)	MANY FARMS ELEMENTARY							
	HWY 191 & NAVAJO RT 7 CHINLE, AZ 86503	86-6006232	CHINLE	5,783.				LITERACY, ESSS, AND/
_(7)	MARION COUNTY - EAST MARION SCHOOL							
	1010 HIGHWAY 13 NORTH COLUMBIA, MS 39429	64-6000671	MARION COUNTY		19,032.	FMV	BOOKS	LITERACY, ESSS, AND/
_(8)	MARION COUNTY - WEST MARION ELEMENTARY							
	1010 HIGHWAY 13 NORTH COLUMBIA, MS 39429	64-6000671	MARION COUNTY		16,507.	FMV	BOOKS	LITERACY, ESSS, AND/
_(9)	MARION COUNTY - WEST MARION PRIMARY							
	1010 HIGHWAY 13 NORTH COLUMBIA, MS 39429	64-6000671	MARION COUNTY		20,635.	FMV	BOOKS	LITERACY, ESSS, AND/
(10)	MARION COUNTY SCHOOL DISTRICT							
	1010 HIGHWAY 13 NORTH COLUMBIA, MS 39645	64-6000671	MARION COUNTY		25,000.	FMV	BOOKS	LITERACY, ESSS, AND/
(11)	MAURY CITY ELEMENTARY SCHOOL							
	102 NORTH CAVALIER DRIVE ALAMO, TN 38001	62-6000547	CROCKETT COUNTY	65,231.				TO SUPPORT IN-SCHOOL
(12)	MCCABE ELEMENTARY SCHOOL							
	115 MCCABE AVENUE MENDOTA, CA 93640	94-6002210	MENDOTA	116,503.				TO SUPPORT IN-SCHOOL
	Enter total number of section 501(c)(3) and g		•					
	Enter total number of other organizations liste Paperwork Reduction Act Notice, see the In-							lule I (Form 990) (2011)
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# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Name	e of the organization						Employer identifica	tion number
SAV	E THE CHILDREN FEDERATION, INC.						06-072648	7
Par	t I General Information on Grants and	Assistance	)					
	Does the organization maintain records to sul the selection criteria used to award the grants Describe in Part IV the organization's procedu	or assistance	e?					X Yes No
Par	t II Grants and Other Assistance to G to Form 990, Part IV, line 21, for ar Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	nt received more t	han \$5,000.
1	(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	MCCABE ELEMENTARY SCHOOL							
	115 MCCABE AVENUE MENDOTA, CA 93640	94-6002210	MENDOTA		14,768.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(2)	MCCORD ELEMENTARY - TA							
	675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KSUSD	33,665.				TO SUPPORT IN-SCHOOL
(3)	MCCORD ELEMENTARY - TA							
	675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KSUSD		13,297.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(4)	MCCREARY COUNTY BOARD OF EDUCATION/ EAGLE C							
	P.O. BOX 68 PARKERS LAKE, KY 42634	61-6001376	MCCREARY COUNTY		5,152.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(5)	MCCRORY HEAD START							
	517 NORTH SEAMAN MCCRORY, AR 72101	45-3672468	501(C)(3)		6,405.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(6)	MCDOWELL COUNTY SCHOOLS BOARD OF EDUCATION							
	30 CENTRAL AVENUE WELCH, WV 24801	55-6000356	MCDOWELL COUNTY		9,968.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
_(7)	MCEVANS ELEMENTARY SCHOOL							
	200 JEFFERSON AVE SHAW, MS 38773	64-0801107	501(C)(3)	63,829.				TO SUPPORT IN-SCHOOL
_(8)	MCINTOSH ELEMENTARY SCHOOL							
	PO BOX 1359 CHATOM, AL 36518	64-6001230	WASHINGTON COUN	21,349.				TO SUPPORT IN-SCHOOL
_(9)	MCKEE ELEM-JACKSON CO BOE							
	P.O. BOX 217 MCKEE, KY 40447	61-6001324	JACKSON COUNTY	84,787.				TO SUPPORT IN-SCHOOL
(10)	MCKEE ELEM-JACKSON CO BOE							
	P.O. BOX 217 MCKEE, KY 40447	61-6001324	JACKSON COUNTY		16,348.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(11)	MERCY CORPS							
	P.O. BOX 2669 DEPT W PORTLAND, OR 97208	91-1148123	501(C)(3)	261,532.				SUPPORT GENERAL PROJ
(12)	MERCY CORPS							
	P.O. BOX 2669 DEPT W PORTLAND, OR 97208	91-1148123	501(C)(3)	904,370.				SUPPORT PROGRAMS IN
3	Enter total number of section 501(c)(3) and g Enter total number of other organizations liste Paperwork Reduction Act Notice, see the Ins	ed in the line	1 table					dule I (Form 990) (2011)
LOL	raperwork Reduction ACT Notice, see the in:	structions fo	ı FORM 990.				Sched	aule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identifica	
SAVE THE CHILDREN FEDERATION, INC.						06-072648	7
Part I General Information on Grants and	Assistance	)					
<ol> <li>Does the organization maintain records to suithe selection criteria used to award the grants</li> <li>Describe in Part IV the organization's procedure</li> </ol>	or assistance	e?			• •		X Yes No
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for ar Part II can be duplicated if additional	ny recipient	that received	I more than \$5,00	00. Check this b	ox if no one recipie	zation answered "Y ent received more t	han \$5,000.
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MERCY CORPS							
P.O. BOX 2669 DEPT W PORTLAND, OR 97208	91-1148123	501(C)(3)	685,316.				SUPPORT PROGRAMS IN
(2) MERCY CORPS							
P.O. BOX 2669 DEPT W PORTLAND, OR 97208	91-1148123	501(C)(3)	1,150,554.				TO PROVIDE SUPPORT F
(3) MERCY CORPS							
P.O. BOX 2669 DEPT W PORTLAND, OR 97208	91-1148123	501(C)(3)	56,739.				TOPS PROJECT SUBGRAN
(4) MESA VIEW ELEMENTARY							
HWY 191 & NAVAJO RT 7 CHINLE, AZ 86503	86-6006232	CHINLE	100,048.				LITERACY, ESSS, AND/
(5) MESA VIEW ELEMENTARY							
HWY 191 & NAVAJO RT 7 CHINLE, AZ 86503	86-6006232	CHINLE		9,188.	FMV	BOOKS	LITERACY, ESSS, AND/
(6) MESQUITE ELEM.							
PO DRAWER 70 ANTHONY, NM 88021	85-6000313	GADSDEN		7,308.	FMV	BOOKS	LITERACY, ESSS, AND/
(7) mesquite elementary							
PO DRAWER 70 ANTHONY, NM 88021	85-6000313	GADSDEN	39,454.				LITERACY, ESSS, AND/
(8) MONARCH ELEMENTARY SCHOOL							
218 MONARCH DRIVE UNION, SC 29379	57-6004861	UNION COUNTY	103,790.				TO SUPPORT IN-SCHOOL
(9) MONARCH ELEMENTARY SCHOOL							
218 MONARCH DRIVE UNION, SC 29379	57-6004861	UNION COUNTY		17,655.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(10) MORO HEAD START							
1308 ARKANSAS 238 MORO, AR 72368	45-3672468	501(C)(3)		6,405.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(11) MORONGO UNIFIED SCHOOL DIST./CONDOR ELEMENT							
5715 UTAH TRAIL 29 PALMS, CA 92277	95-6002122	MORONGO USD		9,974.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(12) MORONGO UNIFIED SCHOOL DIST./LANDERS ELEMEN							
5715 UTAH TRAIL 29 PALMS, CA 92277	•	MORONGO USD		10,429.		BOOKS	TO SUPPORT IN-SCHOOL
2 Enter total number of section 501(c)(3) and g	overnment o	rganizations lis	ted in the line 1 tabl	le			
3 Enter total number of other organizations liste	ed in the line	1 table				<u> </u>	
For Paperwork Reduction Act Notice, see the Ins	structions fo	r Form 990.				Sched	lule I (Form 990) (2011)

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

OMB No. 1545-0047

2011 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

**Employer identification number** Name of the organization SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash (a) Name and address of organization (b) EIN (f) Method of valuation (c) IRC section (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance cash assistance or assistance (1) MORONGO UNIFIED SCHOOL DIST./MORONGO VALLEY 5715 UTAH TRAIL 29 PALMS,, CA 92277 95-6002122 MORONGO USD TO SUPPORT IN-SCHOOL 10,326. FMV (2) MORONGO UNIFIED SCHOOL DIST./ONAGA 5715 UTAH TRAIL 29 PALMS,, CA 92277 95-6002122 MORONGO USD 10,565. BOOKS TO SUPPORT IN-SCHOOL (3) MORONGO UNIFIED SCHOOL DIST./PALM VISTA ELE 5715 UTAH TRAIL 29 PALMS.. CA 92277 95-6002122 MORONGO USD 10,365. BOOKS TO SUPPORT IN-SCHOOL (4) MORONGO UNIFIED SCHOOL DIST./YUCCA MESA 5715 UTAH TRAIL 29 PALMS,, CA 92277 95-6002122 MORONGO USD 10,663. BOOKS (5) MORONGO UNIFIED SCHOOL DIST./YUCCA VALLEY 5715 UTAH TRAIL 29 PALMS,, CA 92277 95-6002122 MORONGO USD 10,755. FMV BOOKS TO SUPPORT IN-SCHOOL (6) MOUND BAYOU PUBLIC SCHOOLS/IT MONTGOMERY 301 E. MARTIN LUTHER KING ST. 64-0802373 b01(C)(3) 7,595. BOOKS TO SUPPORT IN-SCHOOL (7) NATCHEZ ELEMENTARY SCHOOL PO BOX 256 NIXON, NV 89424 88-0058154 PYRAMID LAKE 58,140. LITERACY, ESSS, AND/ (8) NCNW / IT MONTGOMERY (BOLIVAR CO. SECTION) 64-0680358 501(C)(3) 103 DAVIS AVENUE MOUND BAYOU, MS 38762 7,152. (9) NEW AMERICA FOUNDATION 1899 L STREET NW, SUITE 400 52-2096845 501(C)(3) 151,692 NAF SUB-GRANT Q1 FUN (10) NM HEALTHIER WGHT COUNCIL (SC) PO BOX 1372 BELEN, NM 87002 61-1455256 501(C)(3) 49,500 LITERACY, ESSS, AND/ (11) NORTHWEST ELEMENTARY 305 HEDRICK DRIVE NEWPORT, TN 37821 62-6000539 COCKE COUNTY 146,480. TO SUPPORT IN-SCHOOL (12) NORTHWEST ELEMENTARY 305 HEDRICK DRIVE NEWPORT, TN 37821 62-6000539 COCKE COUNTY TO SUPPORT IN-SCHOOL 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization						Employer Identifica	
SAVE THE CHILDREN FEDERATION, INC						06-072648	7
Part I General Information on Grants and							
1 Does the organization maintain records to su			•	_	• •		
the selection criteria used to award the grant	s or assistance	e?					X Yes No
2 Describe in Part IV the organization's proced							
Part II Grants and Other Assistance to C	Sovernment	s and Organiza	tions in the Unit	ed States. Com	plete if the organiz	zation answered "Y	es"
to Form 990, Part IV, line 21, for a Part II can be duplicated if additional					•		· ·
1 (a) Name and address of organization			(d) Amount of cash		(f) Method of valuation	(a) Description of	
or government	<b>(b)</b> EIN	(c) IRC section if applicable	grant	(e) Amount of non- cash assistance	(book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) OAK GROVE ELEMENTARY							
300 MAIN STREET WILLIAMSBURG, KY 40769	61-6001378	WHITLEY COUNTY	126,952.				TO SUPPORT IN-SCHOOL
(2) OAK GROVE ELEMENTARY							
300 MAIN STREET WILLIAMSBURG, KY 40769		WHITLEY COUNTY		16,569.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(3) OAKDALE ELEMENTARY							
136 FLAT FORK ROAD WARTBURG, TN 37829	62-6000772	MORGAN COUNTY	85,671.				TO SUPPORT IN-SCHOOL
(4) OAKDALE ELEMENTARY							
136 FLAT FORK ROAD WARTBURG, TN 37829	62-6000772	MORGAN COUNTY		17,220.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(5) OCEAN BEACH SCHOOL DISTRICT							
PO BOX 778 LONG BEACH, WA 98631	91-0972358	OCEAN BEACH	45,502.				TO SUPPORT IN-SCHOOL
(6) OSCEOLA SCHOOL DISTRICT / EAST ELEMENTARY							
2750 WEST SEMMES OSCEOLA, AR 72370	71-6021600	OSCEOLA		9,339.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
_(7) ow dillon							
59656 PULESTON ROAD AMITE, LA 70422	72-6001372	AMITE COUNTY	57,067.				TO SUPPORT IN-SCHOOL
(8) OWSLEY CO. ELEM-OWSLEY BOE							
P.O. BOX 340 BOONEVILLE, KY 41314	61-6001246	OWSLEY COUNTY	104,715.				TO SUPPORT IN-SCHOOL
(9) OWSLEY CO. ELEM-OWSLEY BOE							
P.O. BOX 340 BOONEVILLE, KY 41314		OWSLEY COUNTY		16,014.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(10) OWYHEE COMBINED SCHOOLS							
PO BOX 1012 ELKO, NV 89803		ELKO COUNTY	51,655.				LITERACY, ESSS, AND/
(11) OWYHEE COMBINED SCHOOLS							
PO BOX 1012 ELKO, NV 89803		ELKO COUNTY		5,114.	FMV	BOOKS	LITERACY, ESSS, AND/
(12) PACES CREEK ELEM-CLAY BOE							
128 RICHMOND ROAD MANCHESTER, KY 40962		CLAY COUNTY	108,904.				TO SUPPORT IN-SCHOOL
2 Enter total number of section 501(c)(3) and							
3 Enter total number of other organizations list							
For Paperwork Reduction Act Notice, see the Ir	nstructions fo	or Form 990.				Sched	dule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization						Employer identifica	tion number
SAVE THE CHILDREN FEDERATION, INC.						06-072648	7
Part I General Information on Grants and	Assistance					•	
1 Does the organization maintain records to sul	ostantiate the	amount of the	grants or assistan	ce, the grantees'	eligibility for the grant	or assistance, and	
the selection criteria used to award the grants							X Yes No
2 Describe in Part IV the organization's procedu	ures for moni	toring the use of	grant funds in the	United States.			
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for an Part II can be duplicated if additional	ny recipient	that received	tions in the Unit more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	ation answered "Y nt received more t	es" han \$5,000.
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) PACES CREEK ELEM-CLAY BOE							
128 RICHMOND ROAD MANCHESTER, KY 40962	61-6001320	CLAY COUNTY		17,713.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(2) PALESTINE WHEATLEY ELEMENTARY							
7920 HIGHWAY 70 W PALESTINE, AR 72372	71-6021045	PALESTINE WHEAT	48,901.				TO SUPPORT IN-SCHOOL
(3) PALESTINE WHEATLEY/PALESTINE WHEATLEY							
7920 HIGHWAY 70 W PALESTINE, AR 72372	71-6021045	PALESTINE WHEAT		9,313.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
<b>(4)</b> PATH							
2201 WESTLAKE AVE, STE 200	91-1157127	501(C)(3)	63,465.				FINAL PTM TO PATH FO
(5) PERRY CO. BOE / LINDEN ELEMENTARY							
333 SOUTH MILL STREET LINDEN, TN 37096	62-6000787	PERRY COUNTY		10,683.	FMV	BOOKS	FINAL PTM TO PATH FO
(6) PERRY CO. BOE / LOBELVILLE ELEMENTARY							
333 SOUTH MILL STREET LINDEN, TN 37096	62-6000787	PERRY COUNTY		11,889.	FMV	BOOKS	FINAL PTM TO PATH FO
(7) PHIL CAMPBELL HIGH SCHOOL							
P.O. BOX 610, 500 COFFEE AVE. NE	63-0801565	FRANKLIN COUNTY	6,000.				EMERGENCY SUBGRANT T
(8) PINE KNOT INTERM-MCCREARY BOE							
120 RAIDER WAY STEARNS, KY 42647	61-6001376	MCCREARY COUNTY	84,745.				TO SUPPORT IN-SCHOOL
(9) PINE KNOT INTERM-MCCREARY BOE							
120 RAIDER WAY STEARNS, KY 42647	61-6001376	MCCREARY COUNTY		16,053.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(10) PINE KNOT PRIMARY-MCCREARY BOE							
120 RAIDER WAY STEARNS, KY 42647	61-6001376	MCCREARY COUNTY	117,372.				TO SUPPORT IN-SCHOOL
(11) PINE KNOT PRIMARY-MCCREARY BOE							
120 RAIDER WAY STEARNS, KY 42647	61-6001376	MCCREARY COUNTY		13,893.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(12) PLAN INTERNACIONAL							
1730 RHODE ISLAND AVE., NW 11TH FL.	13-5661832	501(C)(3)	7,499.				RESILIENT COMMUNITIE
<ul> <li>Enter total number of section 501(c)(3) and g</li> <li>Enter total number of other organizations liste</li> <li>For Paperwork Reduction Act Notice, see the In-</li> </ul>	d in the line	1 table			· · · · · · · · · · · · · · · · · · ·		

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Name of the org	ganization		•		•		Employer identifica	tion number
SAVE THE	CHILDREN FEDERATION, INC.		06-0726487					
Part I G	eneral Information on Grants and	Assistance	•				'	
the sele	ne organization maintain records to sul ection criteria used to award the grants be in Part IV the organization's procedu	or assistance	e?			eligibility for the grant		X Yes No
to	rants and Other Assistance to G Form 990, Part IV, line 21, for ar art II can be duplicated if additional	ny recipient	that received	tions in the Unit more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	ation answered "Y nt received more t	es" han \$5,000. ▶ □
1 (a	a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
_(1) PLEASAN	T VIEW ELEMENTARY							
	TH 4TH STREET WILLIAMSBURG, KY 40769	61-6001378	FRANKLIN COUNTY	118,815.				TO SUPPORT IN-SCHOOL
(2) PLEASAN	T VIEW ELEMENTARY							
	TH 4TH STREET WILLIAMSBURG, KY 40769	61-6001378	FRANKLIN COUNTY		15,978.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(3) PLEASAN	T VIEW SCHOOL DISTRICT							
	OAD 184 PORTERVILLE, CA 93257	77-0563833	PLEASANT VIEW	43,453.				TO SUPPORT IN-SCHOOL
(4) PLEASAN	T VIEW SCHOOL DISTRICT							
	OAD 184 PORTERVILLE, CA 93257	77-0563833	PLEASANT VIEW		8,745.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
	OL SERVICES DEPARTMENT							
	TIPPECANOE AVE	95-6002748	SAN BERNARDINO	469,144.				TO SUPPORT IN-SCHOOL
	OL SERVICES DEPARTMENT							
662 S.	TIPPECANOE AVE	95-6002748	SAN BERNARDINO		49,632.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(7) PT. PLE.	ASANT PRIMARY							
1200 MA	IN STREET POINT PLEASANT, WV 25550	55-6000353	MASON COUNTY	97,381.				TO SUPPORT IN-SCHOOL
	ASANT PRIMARY			,				
	IN STREET POINT PLEASANT, WV 25550	55-6000353	MASON COUNTY		32,053.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
	OR HEALTHY MS				,			
	K CIRCLE, STE. 3 FLOWOOD, MS 39232	64-0895372	501(C)(3)	25,000.				USP ADVOCACY SUB-GRA
	TER FOR THE WORLD, INC			-,				
	X 55 RUTLAND, VT 05702	03-0362954	501(C)(3)	126,812.				WATER TRUCKING, HIGH
	CO DEV. ORG/CARL BROWN CENTER							
	IPHREY STREET MARKS, MS 38646	64-0629668	501(C)(3)		12,822.	FMV	BOOKS	WATER TRUCKING, HIGH
	CO.DEV. ORG. / QUITMAN ELEMENTARY				,			
	PHREY STREET MARKS, MS 38646	64-0629668	501 (C) (3)		9,906.	FMV	BOOKS	WATER TRUCKING, HIGH
	otal number of section 501(c)(3) and g	•		ed in the line 1 tabl		1	<b>&gt;</b>	
	otal number of other organizations liste		•					
	rork Reduction Act Notice, see the Inc						School	lule I (Form 990) (2011)

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

OMB No. 1545-0047

2011 **Open to Public** 

Department of the Treasury Internal Revenue Service

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

Inspection **Employer identification number** Name of the organization SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (a) Name and address of organization (b) EIN (f) Method of valuation (c) IRC section (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance cash assistance or assistance (1) QUITMAN ELEMENTARY SCHOOL 201 HUMPHREY STREET MARKS, MS 38646 64-0629668 b01(C)(3) 95,812 TO SUPPORT IN-SCHOOL (2) RACHEL PATTERSON\_ELEM. 301 BELLEVILE AVENUE PO BOX 307 63-6000876 ESCAMBIA COUNTY 63,264 TO SUPPORT IN-SCHOOL (3) RH BEARDEN ELEMENTARY SCHOOL PO BOX 129 WEBB, MS 38966 57-0641053 WEST TALLAHITCH 74,559. TO SUPPORT IN-SCHOOL (4) RICE PRIMARY SCHOOL PO BOX 207 SAN CARLOS, AZ 85550 86-6000454 SAN CARLOS 155,265 (5) RICE PRIMARY SCHOOL 86-6000454 SAN CARLOS 10,413. FMV PO BOX 207 SAN CARLOS, AZ 85550 BOOKS LITERACY, ESSS, AND/ (6) RIPLEY PRIMARY SCHOOL 402 S. WASHIONGTON STREET RIPLEY, TN 38063 62-6000707 LAUDERDALE COUN 61,506. TO SUPPORT IN-SCHOOL (7) ROBBINS SCHOOL DISTRICT 4305 S. MERIDIAN RD. MERIDIAN, CA 95957 68-0376579 22,660 ROBBINS TO SUPPORT IN-SCHOOL (8) SAN DIEGO RIVERSIDE P O BOX 99, 504 MISSION ROAD 85-0464915 SAN DIEGO 67,130 LITERACY, ESSS, AND/ (9) SAN DIEGO RIVERSIDE P O BOX 99, 504 MISSION ROAD 85-0464915 SAN DIEGO 6,894. LITERACY, ESSS, AND/ (10) SAND GAP ELEM-JACKSON CO BOE 61-6001324 JACKSON COUNTY 85,154 P.O. BOX 217 MCKEE, KY 40447 TO SUPPORT IN-SCHOOL (11) SAND GAP ELEM-JACKSON CO BOE P.O. BOX 217 MCKEE, KY 40447 61-6001324 Jackson County 15,813. FMV TO SUPPORT IN-SCHOOL (12) SCHOOL TO SCHOOL\_\_\_ MAC AO413-011 ; 132 SAN MATEO ROAD ; HALF M 54-2164338 501(C)(3) 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table . . . . . . . . . . . . . . . .

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

Schedule I (Form 990) (2011)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Open to Public Inspection

**Employer identification number** Name of the organization SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Part General Information on Grants and Assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash (a) Name and address of organization (b) EIN (f) Method of valuation (c) IRC section (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, or government if applicable non-cash assistance cash assistance or assistance (1) SHAW SCHOOL DISTRICT / MCEVANS ELEMENTARY 200 JEFFERSON AVE SHAW, MS 38773 64-0801107 SHAW 11,273. EDUCATION BASE 2 (2) SHELBY MIDDLE SCHOOL P.O. BOX 26629 DUNCAN, MS 38740 62-0923097 b01(c)(3) 84,064 TO SUPPORT IN-SCHOOL (3) SHERIDAN ELEMENTARY - TA 675 WEST MANNING AVENUE REEDLEY, CA 93654 34,605. TO SUPPORT IN-SCHOOL (4) SHERIDAN ELEMENTARY - TA 675 WEST MANNING AVENUE REEDLEY, CA 93654 58-2103066 13,891. BOOKS (5) SOUTH BEND SCHOOL DISTRICT 91-0999640 SOUTH BEND PO BOX 437 SOUTH BEND, WA 98586 38,013. TO SUPPORT IN-SCHOOL (6) SOUTHSIDE ELEMENTARY PO BOX 1012 ELKO, NV 89803 88-6000985 ELKO COUNTY 5,143. BOOKS TO SUPPORT IN-SCHOOL (7) SOUTHSIDE ELEMENTARY SCHOOL PO BOX 1012 ELKO, NV 89803 88-6000985 ELKO COUNTY 58,139. LITERACY, ESSS, AND/ (8) SPENCER ELEMENTARY 55-6000396 96,719 813 CAPITOL STREET SPENCER, WV 25276 ROANE COUNTY (9) SPENCER ELEMENTARY 24,427. FMV 813 CAPITOL STREET SPENCER, WV 25276 55-6000396 ROANE COUNTY TO SUPPORT IN-SCHOOL (10) ST CHARLES MISSION SCHOOL 86-0393097 501(C)(3) 62,725 P.O. BOX 339 SAN CARLOS, AZ 85550 LITERACY, ESSS, AND/ (11) ST CHARLES MISSION SCHOOL P.O. BOX 339 SAN CARLOS, AZ 85550 86-0393097 b01(c)(3) 7,126. FMV BOOKS LITERACY, ESSS, AND/ (12) ST. MARTIN PARISH - BREAUX BRIDGE 305 WASHINGTON ST. 72-6001274 ST. MARTIN LITERACY, ESSS, AND/ 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2011)

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

**Open to Public** Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identificat	ion number
SAVE THE CHILDREN FEDERATION, INC						06-0726487	7
Part I General Information on Grants and	d Assistance	•				•	
<ul> <li>Does the organization maintain records to some the selection criteria used to award the grant</li> <li>Describe in Part IV the organization's procedure.</li> </ul>	s or assistance	e?					X Yes No
Part II Grants and Other Assistance to C to Form 990, Part IV, line 21, for a Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this b		nt received more th	han \$5,000.
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ST. MARTINVILLE EARLY CC	- 7						
305 WASHINGTON ST.	72-6001274	ST. MARTIN	13,328.				TO SUPPORT IN-SCHOOL
(2) ST. MARTINVILLE PRIMARY							
305 WASHINGTON ST.	72-6001274	ST. MARTIN	27,467.				TO SUPPORT IN-SCHOOL
(3) ST. PAUL ELEMENTARY SCHOOL							
3074 LIBERTY HILL RD, SC 29148	57-0481945	CLARENDON	46,612.				TO SUPPORT IN-SCHOOL
(4) ST. PAUL ELEMENTARY SCHOOL							
3074 LIBERTY HILL RD, SC 29148	57-0481945	CLARENDON		23,212.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(5) STEWART ELEMENTARY SCHOOL							
845 N. ROSSER ST. FORREST CITY, AR 72335	72-6020499	FORREST CITY	110,178.				TO SUPPORT IN-SCHOOL
(6) SUMMERTON EARLY CHILDHOOD CENT							
3074 LIBERTY HILL ROAD? SUMMERTON, SC 29148	57-0481945	CLARENDON	85,194.				TO SUPPORT IN-SCHOOL
(7) SUMMERTON EARLY CHILDHOOD CENT							
3074 LIBERTY HILL ROAD? SUMMERTON, SC 29148	57-0481945	CLARENDON		13,764.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(8) SUNBRIGHT ELEMENTARY							
136 FLAT FORK ROAD WARTBURG, TN 37829	62-6000772	MORGAN COUNTY	95,408.				TO SUPPORT IN-SCHOOL
(9) SUNBRIGHT ELEMENTARY							
136 FLAT FORK ROAD WARTBURG, TN 37829	62-6000772	MORGAN COUNTY		17,720.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
10) syracuse university							
113 BOWNE HALL SYRACUSE, NY 13244	15-0532081	501(C)(3)	37,724.				5TH AND 7TH INSTALLE
11) t.l. reed elementary - ta							
675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KCUSD	33,576.				TO SUPPORT IN-SCHOOL
12) T.L. REED ELEMENTARY - TA							
675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	KCUSD		14,388.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
2 Enter total number of section 501(c)(3) and	government o	rganizations list	ed in the line 1 tabl	le			
3 Enter total number of other organizations lis	-	-					
For Panarwark Poduction Act Nation, see the l							Jule I (Form 000) (2011)

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

Schedule I (Form 990) (2011)

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

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identifica	
SAVE THE CHILDREN FEDERATION, INC.					06-0726487		
Part I General Information on Grants and	Assistance	)					
<ol> <li>Does the organization maintain records to suithe selection criteria used to award the grants</li> <li>Describe in Part IV the organization's procedure</li> </ol>	or assistance	e?			• •		X Yes No
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for ar Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this b	ox if no one recipie	zation answered "Y ent received more t	han \$5,000.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TAHOLAH SCHOOL DISTRICT							
PO BOX 249 TAHOLAH, WA 98587	91-6215570	TAHOLA	50,663.				TO SUPPORT IN-SCHOOL
(2) TANGIPAHOA PARISH - O.W. DILLON							
59656 PULESTON ROAD AMITE, LA 70422	72-6001372	TANGIPAHOA COUN		7,147.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(3) TANGO INTERNATIONAL							
406 SOUTH 4TH AVENUE 2408 TUSCON, AZ 85701	86-0945589	501(C)(3)	250,484.				TOPS PROJECT TANGO S
(4) TEXAS HEALTH INSTITUTE							
8501 N MOPAC EXPRESSWAY, SUITE 300	74-2237787	501(C)(3)	6,104.				TO SUPPORT CAMPAIGN
(5) THE JOHNS HOPKINS UNIVERSITY							
615 N. WOLFE ST. BALTIMORE	52-0595110	501(C)(3)	10,882.				11TH PMT Q1, 2011, I
(6) THE WASHINGTON UNIVERSITY							
ONE BROOKINGS DRIVE, ST. LOUIS, MO 63130	43-0653611	501(C)(3)	624,538.				YOUTH SAVE SCUS-NAF
(7) THOREAU ELEM.							
P.O. BOX 1318 GALLUP, NM 87305		GALLUP-MCKINLEY		13,093.	FMV	BOOKS	YOUTH SAVE SCUS-NAF
(8) THOREAU ELEMENTARY SCHOOL							
P.O. BOX 1318 GALLUP, NM 87305	85-6005550	GALLUP-MCKINLEY	79,154.				LITERACY, ESSS, AND/
(9) THRIVE BY FIVE WASHINGTON							
1218 THIRD AVE., 8TH FLOOR	20-4829769	501(C)(3)	40,000.				USP ADVOCACY SUB-GRA
(10) TIPTON CO. BOE / CRESTVIEW ELEMENTARY SCHOO							
1580 HWY 51 SOUTH COVINGTON, TN 38019	62-1717314	TIPTON COUNTY		7,302.	FMV	BOOKS	USP ADVOCACY SUB-GRA
(11) TIPTON ELEMENTARY SCHOOL							
PO BOX 787 TIPTON, CA 93272	91-1883652	TIPTON COUNTY	123,915.				TO SUPPORT IN-SCHOOL
(12) TIPTON ELEMENTARY SCHOOL							
PO BOX 787 TIPTON, CA 93272	-	TIPTON COUNTY		12,405.		BOOKS	TO SUPPORT IN-SCHOOL
2 Enter total number of section 501(c)(3) and g							
3 Enter total number of other organizations liste						<u> </u>	
For Paperwork Reduction Act Notice, see the Ins	structions fo	r Form 990.				Sched	lule I (Form 990) (2011)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

Name of the organization						Employer identificat	
SAVE THE CHILDREN FEDERATION, INC.					06-0726487		
Part I General Information on Grants and	l Assistance	•					
<ol> <li>Does the organization maintain records to su the selection criteria used to award the grants</li> <li>Describe in Part IV the organization's proced</li> </ol>	s or assistanc	e?					X Yes No
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for a Part II can be duplicated if additiona	ny recipient	that received	more than \$5,00	00. Check this b	plete if the organiz ox if no one recipie	ent received more t	han \$5,000.
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) TOHATCHI ELEM.							
P.O. BOX 1318 GALLUP, NM 87305		GALLUP-MCKINLEY		13,568.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(2) TOHATCHI ELEMENTARY SCHOOL							
P.O. BOX 1318 GALLUP, NM 87305	1	GALLUP-MCKINELY	74,044.				LITERACY, ESSS, AND/
(3) TUFTS UNIVERSITY							
169 HOLLAND STREET SOMERVILLE, MA 02114	04-2103634	501(C)(3)	8,502.				SUB-GRANT FOR CHANGE
(4) TUFTS UNIVERSITY							
169 HOLLAND STREET SOMERVILLE, MA 02144	04-2103634	501(C)(3)	298,300.				"TO PROVIDE TECHNICA
(5) TUSCALOOSA CITY SCHOOLS							
1210 21ST AVE. TUSCALOOSA, AL 35401	63-6000811	TUSCALOOSA,AL	57,349.				EMERGENCY SUBGRANT T
(6) TWIN LAKES ELEM.							
P.O. BOX 1318 GALLUP, NM 87305	85-6005550	GALLUP-MCKINLEY		12,920.	FMV	BOOKS	EMERGENCY SUBGRANT T
(7) TWIN LAKES ELEMENTARY SCHOOL							
P.O. BOX 1318 GALLUP, NM 87305	85-6005550	GALLUP-MCKINLEY	78,901.				LITERACY, ESSS, AND/
(8) TYNER ELEM-JACKSON CO BOE							
P.O. BOX 217 MCKEE, KY 40447	61-6001324	JACKSON COUNTY	101,209.				TO SUPPORT IN-SCHOOL
(9) TYNER ELEM-JACKSON CO BOE							
P.O. BOX 217 MCKEE, KY 40447	61-6001324	JACKSON COUNTY		15,791.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(10) UNIV AL - COLLEGE ENVIRN SCI C							
BOX 870104 TUSCALOOSA, AL 35487	63-6001138	STAE OF ALABAMA	35,100.				PSYCHOSOCIAL RECOVER
(11) UNIVERSITY OF NOTRE DAME							
836A GRACE HALL NOTRE DAME, INDIANA 46556	35-0868188	501(C)(3)	67,494.				RESEARCH AND SPONSOR
(12) UPSTREAM PUBLIC HEALTH							
240 N. BROADWAY STREET, SUITE 215	42-1579435		40,000.				USP ADVOCACY SUB-GRA
2 Enter total number of section 501(c)(3) and g							
3 Enter total number of other organizations list							
For Paperwork Reduction Act Notice, see the In	structions fo	or Form 990.				Sched	lule I (Form 990) (2011)

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

OMB No. 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identifica		
SAVE THE CHILDREN FEDERATION, INC.						06-0726487		
Part I General Information on Grants and	d Assistance	)						
<ol> <li>Does the organization maintain records to su the selection criteria used to award the grants</li> <li>Describe in Part IV the organization's proced</li> </ol>	s or assistance	e?					X Yes No	
Part II Grants and Other Assistance to G to Form 990, Part IV, line 21, for a Part II can be duplicated if additiona	ny recipient	that received	more than \$5,00	00. Check this b		ent received more t	han \$5,000.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) VOICE FOR IL CHILDREN SUBCONTR								
208 S. LASALLE STREET, SUITE 1490	36-3480909	501(C)(3)	75,035.				USP ADVOCACY SUB-GRA	
(2) WALTON ELEMENTARY								
813 CAPITOL STREET SPENCER, WV 25276		ROANE COUNTY	104,286.				TO SUPPORT IN-SCHOOL	
(3) WALTON ELEMENTARY								
813 CAPITOL STREET SPENCER, WV 25276		ROANE COUNTY		27,699.	FMV	BOOKS	TO SUPPORT IN-SCHOOL	
(4) WASHINGTON COUNTY - MCINTOSH ELEM.								
PO BOX 1359 CHATOM, AL 36518	64-6001230	WASHINGTON COUN		18,316.	FMV	BOOKS	TO SUPPORT IN-SCHOOL	
(5) WASHINGTON ELEMENTARY - KCUSD	_							
675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	WASHINGTON COUN	74,991.				TO SUPPORT IN-SCHOOL	
(6) WASHINGTON ELEMENTARY - KCUSD	4							
675 WEST MANNING AVENUE REEDLEY, CA 93654	58-2103066	WASHINGTON COUN		13,411.	FMV	BOOKS	TO SUPPORT IN-SCHOOL	
(7) WASHINGTON PARISH - FRANKLINTON ELEM.	4							
800 MAIN STREET FRANKLINTON, LA 70438	72-6001459	WASHINGTON COUN		7,433.	FMV	BOOKS	TO SUPPORT IN-SCHOOL	
(8) WASHINGTON PARISH - FRANKLINTON PRI.	_							
800 MAIN STREET FRANKLINTON, LA 70438	72-6001459	WASHINGTON COUN		10,374.	FMV	BOOKS	TO SUPPORT IN-SCHOOL	
(9) WASHINGTON PARISH - WESLEY RAY								
800 MAIN STREET FRANKLINTON, LA 70438	72-6001459	WASHINGTON COUN		13,877.	FMV	BOOKS	TO SUPPORT IN-SCHOOL	
(10) WESLEY RAY ELEMENTARY SCHOOL								
800 MAIN STREET FRANKLINTON, LA 70438	72-6001459	WASHINGTON PARI	60,185.				TO SUPPORT IN-SCHOOL	
(11) WEST LEE ELEMENTARY SCHOOL								
5 WEST LEE SCHOOL ROAD REMBERT, SC 29128	57-6000377	LEE COUNTY	65,969.				TO SUPPORT IN-SCHOOL	
(12) WEST LEE ELEMENTARY SCHOOL								
5 WEST LEE SCHOOL ROAD REMBERT, SC 29128	57-6000377	LEE COUNTY		18,942.	FMV	BOOKS	TO SUPPORT IN-SCHOOL	
2 Enter total number of section 501(c)(3) and g	government o	rganizations liste	ed in the line 1 tab	e				
3 Enter total number of other organizations list								
For Paperwork Reduction Act Notice, see the In	structions fo	or Form 990.				Sched	lule I (Form 990) (2011)	

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Part I General Information on Grants and Assistance  1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed  1 (a) Name and address of organization or government  (b) EIN (c) IRC section if applicable grant (d) Amount of cash grant (e) Amount of non-cash assistance (h) Purpose of government (h) MEST MARION ELEMENTARY  1010 HIGHWAY 13 NORTH COLUMBIA, MS 39429 64-6000671 MARION COUNTY 76,857.	Employer identification number 06-0726487	
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed  1 (a) Name and address of organization or government  (b) EIN (c) IRC section if applicable (d) Amount of non-cash assistance (d) Amount of non-cash assi		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed  1 (a) Name and address of organization or government  (b) EIN (c) IRC section if applicable (d) Amount of non-cash assistance (d) Amount of non-cash assi		
to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed  1 (a) Name and address of organization or government (b) EIN (c) IRC section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance (b) Amount of non-cash assistance (c) Method of valuation (book, FMV, appraisal, other) (n) Purpose of government (n) WEST MARION ELEMENTARY (n) WEST MARION ELEMENTARY	No	
or government (b) Eliv (c) ike section or grant (book, FMV, appraisal, other) (book, FMV, appraisal, other) (non-cash assistance) (n) Purpose of the control	• <u> </u>	
	grant e	
1010 HIGHWAY 13 NORTH COLUMBIA, MS 39429 64-6000671 MARION COUNTY 76,857.		
	-SCHOOI	
(2) WEST MARION PRIMARY		
1010 HIGHWAY 13 NORTH COLUMBIA, MS 39429 64-6000671 MARION COUNTY 122,915.	-SCHOOI	
(3) WEST SIDE ELEMENTARY SCHOOL		
305 VALLEY DRIVE 71-6020534 HELENA-WEST 92,001. TO SUPPORT IN-	-SCHOOI	
(4) WEST TALLAHATCHIE SCHOOL DISTRICT / RH BEAR		
PO BOX 129 WEBB, MS 38966 57-0641053 WEST TALLAHITCH 10,391. FMV BOOKS TO SUPPORT IN-	-SCHOOI	
(5) WEST WENDOVER ELEMENTARY SCHOO		
PO BOX 1012 ELKO, NV 89803 88-6000985 ELKO COUNTY 57,613. LITERACY, ESSS	, AND	
(6) WHITE OAK ELEM-MTN PRT RESOURC		
4911 WHITE OAK ROAD DUFF, TN 37729 62-1490279 501(C)(3) 74,156.	SCHOOL	
_(7) white oak elem-min pri resourc		
4911 WHITE OAK ROAD DUFF, TN 37729 62-1490279 501(C)(3) 27,544. FMV BOOKS TO SUPPORT IN-	SCHOOL	
(8) WHITLEY CITY ELEM-MCCREARY BOE		
120 RAIDER WAY STEARNS, KY 42647 61-6001376 MCCREARY COUNTY 122,146. TO SUPPORT IN-	SCHOOL	
(9) WHITLEY CITY ELEM-MCCREARY BOE		
120 RAIDER WAY STEARNS, KY 42647 61-6001376 MCCREARY COUNTY 14,746. FMV BOOKS TO SUPPORT IN-	SCHOOL	
(10) WHITLEY CO CENT. INTERMEDIATE		
300 MAIN STREET WILLIAMSBURG, KY 40769 61-6001378 WHITLEY COUNTY 82,307.	SCHOOL	
(11) WHITLEY CO CENT. INTERMEDIATE		
300 MAIN STREET WILLIAMSBURG, KY 40769 61-6001378 WHITLEY COUNTY 16,478. FMV BOOKS TO SUPPORT IN-	SCHOOL	
(12) WHITLEY CO CENTRAL PRIMARY		
116 NORTH 4TH STREET WILLIAMSBURG, KY 40769 61-6001378 WHITLEY COUNTY 110,339.	SCHOOL	
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	(2011)	

# SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization						Employer Identificat	
SAVE THE CHILDREN FEDERATION, INC.						06-072648	7
Part I General Information on Grants and							
<ol> <li>Does the organization maintain records to subthe selection criteria used to award the grants</li> <li>Describe in Part IV the organization's procedure.</li> </ol>	or assistance	e?					X Yes No
Part II Grants and Other Assistance to Go to Form 990, Part IV, line 21, for an Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this b	plete if the organize ox if no one recipie	nt received more t	han \$5,000.
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WHITLEY CO CENTRAL PRIMARY  116 NORTH 4TH STREET WILLIAMSBURG, KY 40769	61-6001378	WHITLEY COUNTY		11,554.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(2) WHITTEN ELEMENTARY SCHOOL							
188 W. CHESTNUT ST MARIANNA, AR 72360	71-6021344	LEE COUNTY	68,525.				TO SUPPORT IN-SCHOOL
(3) WILKINSON COUNTY - FINCH ELEM.							
PO BOX 785 WOODVILLE, MS 39669	64-6001230	WILKINSON COUNT		8,532.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(4) WILLARD-PERRY CO BOE							
315 PARK AVENUE HAZARD, KY 41701	61-6001294	PERRY COUNTY	98,475.				TO SUPPORT IN-SCHOOL
(5) WILLARD-PERRY CO BOE							
315 PARK AVENUE HAZARD, KY 41701	61-6001294	PERRY COUNTY		22,463.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(6) WINFIELD ELEMENTARY							
208 COURT STREET HUNTSVILLE, TN 37756		SCOTT COUNTY	40,234.				TO SUPPORT IN-SCHOOL
(7) WINFIELD ELEMENTARY							
208 COURT STREET HUNTSVILLE, TN 37756	62-6000823	SCOTT COUNTY		16,410.	FMV	BOOKS	TO SUPPORT IN-SCHOOL
(8) WOODRUFF ELEMENTARY SCHOOL							
305 VALLEY DRIVE	71-6020534	HELENA-WEST	43,802.				TO SUPPORT IN-SCHOOL
(9) WORLD LEARNING							
P.O. BOX 676 BRATTLEBORO, VT 05302	03-0179592	501(C)(3)	1,136,069.				THE PURPOSE OF THIS
(10) WORLD LEARNING							
P.O. BOX 676 BRATTLEBORO, VT 05302	03-0179592	501(C)(3)	49,891.				TO PROVIDE SUPPORT F
(11) WORLD VISION							
34834 WEYERHAEUSER WAY SO.	95-1922279	501(C)(3)	9,636.				INTEGRATION OF IYCF
(12) WORLD VISION							
34834 WEYERHAEUSER WAY SO.	95-1922279	501(C)(3)	56,641.				TO PROVIDE SUPPORT F
2 Enter total number of section 501(c)(3) and g							
3 Enter total number of other organizations lister For Paperwork Reduction Act Notice, see the Institute of							lule I (Form 990) (2011)
i or i aperwork iteduction Act Notice, 366 the his	uctivii3 10	, i Oilli 330.				Sched	uie i (i Oilli 330) (2011)

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# SCHEDULE I (Form 990)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Name of	the organization						Employer identificat	ion number
SAVE	THE CHILDREN FEDERATION, INC.						06-0726487	7
Part I	General Information on Grants and	Assistance	)				•	
the	bes the organization maintain records to subsets to subsets to avard the grants escribe in Part IV the organization's procedu	or assistance	e?					X Yes No
Part I	Grants and Other Assistance to Geto Form 990, Part IV, line 21, for an Part II can be duplicated if additional	ny recipient	that received	more than \$5,00	00. Check this b	plete if the organiza ox if no one recipier	nt received more th	nan \$5,000.
1	(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
_ <b>(1)</b> <u>YO</u>	UTH BUILD							
	DAY STREET SOMERVILLE, MA 02144	22-3076454	501(C)(3)	43,839.				REDUCING CHILD LABO
_(2)								
_(3)								
_(4)								
_(5)		_						
_(6)		_						
_(7)		_						
_(8)								
_(9)								
(10)								
(11)		_						
(12)		_						
	nter total number of section 501(c)(3) and g nter total number of other organizations liste							270. 5.
For Pa	perwork Reduction Act Notice, see the Ins	structions fo	r Form 990.					ule I (Form 990) (2011

Schedule I (Form 990) (2011)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
)					

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

ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

SCHEDULE I, PART I, LINE 2

SAVE THE CHILDREN FEDERATION, INC. CONDUCTS PERIODIC FINANCIAL AND

PROGRAY REPORTS WITH SCHEDULED AUDITS. THESE INCLUDE MONTHLY BUDGET

VERSUS ACTUAL ANALYSIS COMPARING BOTH SPENDING AGAINST THE LIFE OF GRANTS

AMOUNTS AS WELL AS THE PROJECTED ANNUAL AMOUNT. SPENDING AGAINST EACH

GRANT HAS TO BE APPROVED BY THE APPROPRIATE SUPERVISOR UNDER THE

SEGREGATION OF DUTIES INTERNAL CONTROLS CREATED FOR ALL FIELD OFFICES.

THESE INTERNAL CONTROLS ARE REVIEWED AND UPDATED AS APPROPRIATE BY THE

HEAD FINANCE STAFF PERSON FOR THAT OFFICE, IN CONJUNCTION WITH THE AREA

Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

CONTROLLER, AND TESTED ON A REGULAR BASIS.

## **SCHEDULE J** (Form 990)

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Part I Questions Regarding Compensation

	<u> </u>		Yes	No				
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form							
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.							
	First-class or charter travel  X Housing allowance or residence for personal use							
	X Travel for companions Payments for business use of personal residence							
	X Tax indemnification and gross-up payments Health or social club dues or initiation fees							
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)							
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment							
	or réimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,							
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?							
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the							
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a							
	related organization to establish compensation of the CEO/Executive Director. Explain in Part III.							
	X Compensation committee Written employment contract							
	Independent compensation consultant X Compensation survey or study							
	X Form 990 of other organizations X Approval by the board or compensation committee							
4	<del></del>							
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:							
а	Receive a severance payment or change-of-control payment?	4a	Х					
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X				
С	c Participate in, or receive payment from, an equity-based compensation arrangement?							
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.							
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.							
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any							
	compensation contingent on the revenues of:							
а	The organization?	5a		X				
b	Any related organization?	5b		X				
	If "Yes" to line 5a or 5b, describe in Part III.							
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any							
	compensation contingent on the net earnings of:							
	The organization?	6a		X				
b	Any related organization?	6b		X				
	If "Yes" to line 6a or 6b, describe in Part III.							
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed							
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X				
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject							
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe							
_	in Part III	8		X				
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in							
	Regulations section 53.4958-6(c)?	9						

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

Schedule J (Form 990) 2011

Schedule J (Form 990) 2011

## 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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
(i)	393,233.	C	32,091.	19,600.	29,262.	474,186.	
1 CHARLES F. MACCORMACK (ii	)	C	0				
(i)	330,943.	c	17,178.	19,600.	25,762.	393,483.	
2 CAROLYN MILES (iii		C	0				
(i)	247,806.	0	22,104.	19,600.	18,164.	307,674.	
3 RICHARD STONER (iii		C	0				
(i)	207,583.	31,311.	9,014.		30,456.	278,364.	
4 BARBARA ERICKSON (ii		C	0				
(i)			16,842.	19,600.	25,762.	287,158.	
5 MARK SHRIVER (ii		0	678.	9,334.	11,716.	253,261.	
6 SUSAN E. RIDGE (ii				9,334.			
6 SUSAN E. RIDGE (ii		10,000.	1,578.	4,322.	4,144.	233,957.	
7 KATHY J. SPANGLER (ii		1					
(i)		C	10,475.	17,074.	18,165.	252,654.	
8 RODNEY DAVIS			0				
(i)	<b>^</b>	C	342.	16,400.	11,716.	231,636.	
9 ELLEN D. WILLMOTT		C	0				
(i)	199,488.	C	1,511.	16,055.	4,144.	221,198.	
10 DIANA K. MYERS (ii		C	0				
(i)	196,995.	0	1,440.	15,990.	4,144.	218,569.	
11 MICHAEL KLOSSON (ii		C	0				
(i)	193,593.	L	2,552.	15,990.	25,762.	237,897.	
12 THOMAS KRIFT (ii		C	0	14 000	01 045	000 001	
(i)			304.	14,873.	21,245.	230,221.	
13 SARAH A. GILLMAN (ii	<b>^</b>		624.	15 500	24 266	220 175	
(i) 14 RICHARD TROWBRIDGE (ii)		ļ		15,506.	24,266.	230,175.	
14 RICHARD TROWBRIDGE (ii			21,546.	17,470.	18,165.	255,678.	
15 RUDOLPH VON BERNUTH (ii			0			255,070.	

NB: Name and salary information for field-based staff listed in Part VII and Schedule J have been omitted. A full copy of Part VII and Schedule J may be obtained without cost by writing to Save the Children Federation, Inc., 54 Wilton Road, Westport, CT 06880, or by calling 1-800-728-3843, or by sending an email to twebster@savechildren.org.

Schedule J (Form 990) 2011

## 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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

-	(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported as deferred in prior Form 990
NB: Name and salary i							
copy of Part VII and So	chedule J may	be obtained	without cost	by writing to	Save the Ch	ildren Federa	ition, Inc., 54
Wilton Road, Westport,	CT 06880, o	r by calling 1	-800-728-384	13, or by sen	ding an emai	l to	
3 twebster@savechildrer		, 3		,	3		
			O	15,069.	4,144.	207,572.	
4 DAVID A. OOT		) (	0				
5							
6	)						
7 (i		<u> </u>			<del></del>		
_8 (i	i)						
(1)	)		ļ +		ļ +		
9 (i	<u> </u>						
10 (i							
11 (i		<del> </del> -	<del> </del>		+		
()	•						
12 (i							
	)						
13 (i	<b>^</b>						
(0)					<del> </del>		
14 (i							
15 (i		<u> </u>	<del> </del>		<del> </del>		<u> </u>
15 (1							
16 (i		†			†		
	- 1	•		•	•	Soh	edule .l (Form 990) 2011

Schedule J (Form 990) 2011 Page 3

#### Part | Supplemental Information

Complete this part to 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.

TRAVEL AND HOUSING ALLOWANCE

SCHEDULE J, PART I, LINE 1A

HOME LEAVE: REGULAR FULL-TIME EMPLOYEES WHO HAVE BEEN AT AN ASSIGNMENT

OUTSIDE THE U.S. AWAY FROM THEIR HOME COUNTRY FOR A MINIMUM OF TWELVE

(12) MONTHS ARE ENTITLED TO ANNUAL HOME LEAVE TRAVEL TO THE EMPLOYEE'S

HOME OF RECORD AT THE AGENCY'S EXPENSE, ACCOMPANIED BY SPOUSE OR DOMESTIC

PARTNER AND DEPENDENTS (THROUGH GRADE 12), WHO LIVE AT POST OR WHO ARE

ENROLLED IN A BOARDING SCHOOL ELSEWHERE AS A CONSEQUENCE OF THE

ASSIGNMENT. DEPENDENTS AND SPOUSES/DOMESTIC PARTNERS WHO DO NOT ACCOMPANY

THE EMPLOYEE TO THE ASSIGNED POST WILL BE ELIGIBLE FOR AN ANNUAL

ROUND-TRIP TICKET FROM SUCH PERSONS' LOCATION TO THE EMPLOYEE'S ASSIGNED

HOUSING: SAVE THE CHILDREN PROVIDES FOR THE HOUSING OF EMPLOYEES AND THEIR FAMILIES ASSIGNED TO LOCATIONS OUTSIDE THEIR HOME COUNTRY AND OUTSIDE THE U.S.

THE ABOVE BENEFITS ARE TAXABLE TO THE EMPLOYEE.

POST OR THE EMPLOYEE'S HOME OF RECORD.

Schedule J (Form 990) 2011 Page 3

#### Part | Supplemental Information

Complete this part to 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.

COMPENSATION REVIEW

SCHEDULE J, PART I, LINE 3

THE COMPENSATION COMMITTEE OF THE BOARD, CONSISTING OF INDEPENDENT

PERSONS, CONDUCTS AN ANNUAL REVIEW AND APPROVAL OF OFFICERS'

COMPENSATION. AS PART OF THIS REVIEW AND APPROVAL PROCESS, THE COMMITTEE

REFERENCES AVAILABLE MARKET DATA FOR COMPARABLE POSITIONS AND INTERNAL

EQUITY CONSIDERATIONS, AND IT UTILIZES AN ANALYSIS OF OFFICER SALARIES BY

THE AGENCY COMPENSATION AND BENEFITS TEAM USING INDUSTRY BENCHMARKING

DATA. THE PROCESS COVERS ALL OFFICERS AND THE LAST TIME IT WAS DONE WAS

JANUARY 2011.

COMPENSATION FROM UNRELATED ORGANIZATIONS

RUDOLPH VON BERNUTH - HIS COMPENSATION WAS REIMBURSABLE TO SAVE THE CHILDREN FROM ALL THE PARTNERS IN THE ALLIANCE COOPERATION FOR EMERGENCY MANAGEMENT.

Schedule J (Form 990) 2011

#### Part | Supplemental Information

Complete this part to 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.

SEVERENCE COMPENSATION

SCHEDULE J, PART I, LINE 4A

ANNE-MARIE GREY SERVED AS AN OFFICER OF THE CORPORATION THROUGH JANUARY

14, 2011; SEVERENCE COMPENSATION OF \$105,167 WAS INCLUDED IN 2011

COMPENSATION.

OTHER REPORTABLE COMPENSATION

SCHEDULE J, PART II, COLUMN B(III)

FOR THE FOLLOWING INDIVIDUALS, OTHER REPORTABLE COMPENSATION, AS REPORTED

ON SCHEDULE J, PART II, COLUMN B(III), INCLUDES FIVE YEARS OF EXPATRIATE

TAXES WHICH WERE PAID TO THE GOVERNEMENT OF SOUTH AFRICA BY THE

ORGANIZATION ON BEHALF OF THE INDIVIDUAL: JOY LAWN AND KAREN

WALTSENSPERGER. WITHOUT THIS COMPENSATION, THESE EMPLOYEES WOULD HAVE

EARNED BASE COMPENSATION OF APPROXIMATELY \$137,000 EACH AND NEITHER WOULD

BE LISTED AS A TOP FIVE HIGHEST PAID EMPLOYEE.

### **SCHEDULE L** (Form 990 or 990-EZ)

## **Transactions With Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. OMB No. 1545-0047 **Open To Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Employer identification number

												-		
	HE CHILDREN FEDERATION, INC	С.						06	-072	6487	7			
Part I	Excess Benefit Transactions (see Complete if the organization answere								EZ, Pa	ırt V, li	ine 40	b.		
4	(a) Name of diagnalified names				1	h) Dogovintio	~ of t-o-					(c)	Corrected	
1	(a) Name of disqualified person				(1	<b>b)</b> Descriptio	n of trar	isaction	1			Ye	es No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
	er the amount of tax imposed on the o	rganiz	ation	mana	ners or disqualified	l nersons di	iring the	vear						
unc	der section 4958									\$_ \$_				
Part II	Loans to and/or From Interested Complete if the organization answer		s" or	n Form								(=) 10	<i>1</i> -:44	
(3	a) Name of interested person and purpose			n to or from ganization?	<b>(c)</b> Original principal amount	(d) Balan	Dalance due		(e) In default?				(g) Written agreement?	
			То	From				Yes	No	Yes	No	Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
Total Part III	Grants or Assistance Benefiting Complete if the organization answer	j Inter	este	d Pers	sons.	7.								
	(a) Name of interested person				between interested perso organization		(c)	Amou	nt and	type o	of assis	stance		
(1)														
(2)		1												
(3)														
(4)		1												
(5)														
(6)														
(7)		+												
(8)		+												
(9)		+												
(5)		1												

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

Schedule L (Form 990 or 990-EZ) 2011

Schedule L (Form 990 or 990-EZ) 2011 Page **2** 

## Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	naring of ization's nues?
				Yes	No
(1) BLACKBAUD, INC. (SEE SCHEDULE L PT V)	VENDOR	347,683.	PAYMENT FOR SERVICES		Х
(2) PATRICIA DALY	FAMILY MEM OF R STONER	158,960.	COMPENSATION		Х
(3) TERTIA TROWBRIDGE	FAMILY MEM OF R TROWBRIDG	55,925.	COMPENSATION		Х
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

#### Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

PART IV BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS

PART IV, LINE 1

SAVE THE CHILDREN ACQUIRES SOFTWARE AND MANAGEMENT/SYSTEMS DEVELOPMENT
SERVICES FOR ITS DONOR DATABASE FROM THE FIRM BLACKBAUD, INC. SAVE THE
CHILDREN'S PRESIDENT & CEO (FORMER COO), CAROLYN MILES, ALSO SERVED AS A
MEMBER OF THE BOARD OF DIRECTORS OF BLACKBAUD, INC. (IN FISCAL YEAR

2011, MS. MILES RECEIVED \$167,500 IN COMPENSATION FROM BLACKBAUD FOR HER
SERVICES AS A MEMBER OF ITS BOARD OF DIRECTORS; IN RETURN, MS. MILES
DONATED THAT COMPENSATION, LESS TAX PAID ON IT, TO SAVE THE CHILDREN.) IN
FISCAL YEAR 2011, SAVE THE CHILDREN PAID A TOTAL OF \$347,682.84 TO
BLACKBAUD FOR THE SOFTWARE AND MANAGEMENT/ SYSTEMS DEVELOPMENT SERVICES
THEY PROVIDED. MS. MILES DID NOT PARTICIPATE IN SAVE THE CHILDREN'S
DECISION TO HIRE BLACKBAUD, INC.; THE DECISION TO HIRE WAS APPROVED BY A
STEERING COMMITTEE LED BY THE VICE PRESIDENTS FOR RESOURCE DEVELOPMENT
AND FOR FINANCE AND INFORMATION MANAGEMENT FOLLOWING AN EIGHTEEN-MONTH
LONG SEARCH AND ANALYSIS OF POSSIBLE PROVIDERS.

ADDRESS OF CEO:

CAROLYN MILES

C/O SAVE THE CHILDREN

54 WILTON ROAD

Schedule L (Form 990 or 990-EZ) 2011

## Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

## Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

WESTPORT, CT 06880

ADDRESS OF VENDOR:

BLACKBAUD, INC.

2000 DANIEL ISLAND DRIVE

CHARLESTON, SC 29492-7541

## SCHEDULE M (Form 990)

## **Noncash Contributions**

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

► Attach to Form 990.

OMB No. 1545-0047

2011

Open To Public
Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

SAVE THE CHILDREN FEDERATION, INC.

06-0726487

Par	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications	Х		2,221,312.	FMV			
5	Clothing and household			2,221,3121	1227			
J	goods	X		1,862,713.	FMV			
_		X	3.	108,031.	FMV			
6	Cars and other vehicles		3.	100,031.	I III V			
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC,							
	or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution - Historic							
	structures							
14	Qualified conservation							
	contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	X	9.	56,990,526.	FMV			
20	Drugs and medical supplies	X	35.	4,151,693.	FMV			
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ►(ATCH_1)		13.	1,065,737.				
26	Other ►()							
27	Other ►()							
28	Other ►()							
29		by the orga	anization during the tax ye	ar for contributions for				
	which the organization completed F	Form 8283,	Part IV, Donee Acknowledg	jement	29			5.
	_		_				Yes	No
30 a	During the year, did the organizat	tion receive	by contribution any prope	erty reported in Part I, line	es 1-28 that			
	it must hold for at least three yea							
	used for exempt purposes for the e	ntire holding	period?			30a		X
b	If "Yes," describe the arrangement i	in Part II.						
31	Does the organization have a	gift accept	tance policy that require	s the review of any r	non-standard			
	contributions?					31	Х	
32 a	Does the organization hire or use	e third part	ies or related organization	s to solicit, process, or s	sell noncash			
	contributions?	•		· ·		32a		Х
b	If "Yes," describe in Part II.							
33	If the organization did not report ar	n amount in	column (c) for a type of pro	perty for which column (a	) is checked,			
	describe in Part II.		, , , , , , , , , , , , , , , , , , ,	. ,	,			

1E1298 1.000

Schedule M (Form 990) (2011) Page **2** 

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

NONCASH CONTRIBUTION

SCHEDULE M PART I - NONCASH CONTRIBUTIONS

VARIOUS AGRICULTURAL COMMODITIES AND OTHER MISC. SUPPLIES RECEIVED FOR

THE PURPOSE OF FAMINE, MEDICAL AND EDUCATIONAL RELIEF EFFORTS.

A Schedule M (Form 990) (2011)

1E1508 2.000

Schedule M (Form 990) (2011) Page **2** 

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

ATTACHMENT 1

## SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
OFFICE SUPPLIES	Х	1.	4,077.	FMV
SCHOOL SUPPLIES	Х	2.	4,236.	FMV
TOYS	Х	4.	581,694.	FMV
SHELTER KITS/EMERGENCY	TR X	1.	390,850.	FMV
INFORMATION TECHNOLOGY	EQ X	4.	74,218.	FMV
SCHOOL KITS	Х	1.	10,662.	FMV
TOTALS	:	13.	1,065,737.	

Schedule M (Form 990) (2011)

### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number 06-0726487

CHANGE IN PROGRAM SERVICE ACTIVITIES

FORM 990, PART III, LINE 3

SAVE THE CHILDREN FEDERATION, INC. (SCUS OR THE AGENCY) WAS ESTABLISHED
IN 1932 AND OPERATES AS A VOLUNTARY, NONSECTARIAN, NONPROFIT ORGANIZATION
IN THE UNITED STATES OF AMERICA AND THROUGHOUT THE WORLD PROVIDING
SERVICES FOR CHILDREN AND COMMUNITY SELF-HELP ASSISTANCE.

SCUS IS A MEMBER OF SAVE THE CHILDREN ASSOCIATION (SCA), A SWISS MEMBERSHIP ORGANIZATION. SCA CURRENTLY HAS 29 INDEPENDENT, AUTONOMOUS, NONPROFIT, PRIVATE VOLUNTARY MEMBERSHIP ORGANIZATIONS THAT BEAR THE NAME SAVE THE CHILDREN OR A RELATED DESIGNATION (THE MEMBERS). SCA CREATED SAVE THE CHILDREN INTERNATIONAL (SCI), A UNITED KINGDOM BASED CHARITABLE ENTITY, OF WHICH SCA IS THE SOLE MEMBER, AND THEREFORE, SCI IS EFFECTIVELY A WHOLLY OWNED SUBSIDIARY OF SCA.

PRIOR TO THE CREATION OF SCI, SCUS DEVELOPED AND IMPLEMENTED PROGRAMS

AROUND THE WORLD. SIMULTANEOUSLY, OTHER SCA MEMBER ORGANIZATIONS

SPONSORED PROGRAMS IN THE SAME COUNTRIES. SCI WAS FORMED TO MORE

EFFECTIVELY PROVIDE SERVICES BY UNIFYING THE PROGRAMS IN EACH

INTERNATIONAL COUNTRY WHERE THERE IS NO HOME MEMBER PRESENCE UNDER THE

UMBRELLA OF SCI RATHER THAN INDIVIDUAL SCA ENTITIES. SCUS STILL

DEVELOPS, PARTICIPATES IN, AND MONITORS THE INTERNATIONAL PROGRAMS; AND

REPORTS TO, AND IS RESPONSIBLE FOR, THE DONOR FUNDS; HOWEVER, THE

PROGRAMS ARE IMPLEMENTED IN THE INTERNATIONAL COUNTRIES BY SCI, RATHER

V 11-5

THAN DIRECTLY BY SCUS. SCUS IS STILL SOLELY RESPONSIBLE FOR DEVELOPING
AND IMPLEMENTING PROGRAMS IN THE UNITED STATES. SCI HAS A UNIQUE
RELATIONSHIP WITH SCUS IN THAT DESPITE BEING A SEPARATE LEGAL ENTITY,
THEY ARE CONSIDERED CLOSER TO ONE ORGANIZATION IN PRACTICE IN THAT THERE
ARE COMMON: CHART OF ACCOUNTS, MANAGEMENT ACCOUNTING STRUCTURE, FINANCIAL
MANAGEMENT SYSTEMS, AND AUDIT FIRM. SCUS HAS 4 SEATS OF THE 14 MEMBER
SCI BOARD, AND HAS THE ABILITY TO APPROVE OR VETO THE SCI ANNUAL BUDGET.
SCI CANNOT FUNDRAISE, CANNOT WITHDRAW FROM SCA AT ITS CONVENIENCE, CANNOT
PROVIDE SERVICES TO PARTIES OTHER THAN MEMBERS, AND HAS TO RETURN ANY
SURPLUSES TO MEMBERS. SCUS FUNDS THAT WERE PROGRAMMED BY SAVE THE
CHILDREN INTERNATIONAL (SCI) IN FIVE INTERNATIONAL COUNTRY OFFICES IN
2011 WERE \$40,848,655.

#### PROGRAM SERVICE ACCOMPLISHMENTS

FORM 990, PART III, LINE 4

IN 2011 SAVE THE CHILDREN'S PROGRAMS REACHED 22.8 MILLION CHILDREN AND 13.7 MILLION PARENTS AND OTHER ADULTS DIRECTLY AND 62.3 MILLION CHILDREN AND 91.7 MILLION PARENTS AND OTHER ADULTS INDIRECTLY WITH LIFE-CHANGING PROGRAMS IN HEALTH AND NUTRITION, EDUCATION, EMERGENCY RESPONSE, PROTECTION AND LIVELIHOODS. PROGRAM ACCOMPLISHMENTS IN 2011 INCLUDE:

#### A) EDUCATION

EDUCATION IS THE FOUNDATION ON WHICH COMMUNITIES CAN BUILD AND SUSTAIN

CHANGE IN THE LIVES OF CHILDREN. IN 2011 SAVE THE CHILDREN REACHED \$6.4

MILLION CHILDREN AND ADULTS WITH DIRECT EDUCATION PROGRAMMING, AND AN

ADDITIONAL 14.9 MILLION INDIRECTLY WITH PROGRAMS FOR EARLY CHILDHOOD DEVELOPMENT, BASIC EDUCATION AND LITERACY AND ADOLESCENT AND NON-FORMAL EDUCATION.

IN FISCAL YEAR 2011, SAVE THE CHILDREN'S ACCOMPLISHMENTS IN EDUCATION INCLUDED:

-AFRICA: SAVE THE CHILDREN BROUGHT TOGETHER REPRESENTATIVES FROM 22
COUNTRIES TO DISCUSS LITERACY, OUR CONCEPTUAL FRAMEWORK FOR IMPROVING IT,
GENERATING EVIDENCE ABOUT WHAT WORKS AND EXPANDING FURTHER OUR WORK IN
THIS AREA.

-PAKISTAN, MOZAMBIQUE, ETHIOPIA AND MALI: LITERACY BOOST PROGRAMS HAVE

DEMONSTRATED SIGNIFICANT IMPACT ON CHILDREN'S READING SCORES. THESE

RESULTS PROVE THAT LITERACY BOOST, WHICH SUPPORTS READING BOTH INSIDE AND

OUTSIDE THE CLASSROOM, ENABLES THOSE WHO ARE HARDEST TO REACH BY

IMPROVING THEIR SKILLS AND CLOSING SKILL GAPS.

-UNITED STATES: OUR EARLY CHILDHOOD DEVELOPMENT, LITERACY AND HEALTH
PROGRAMMING AT 150 RURAL ELEMENTARY SCHOOLS AND COMMUNITIES IN 14 STATES
PROVIDED NEARLY 69,000 CHILDREN WITH THE SUPPORT THEY NEEDED TO SUCCEED
IN SCHOOL AND LEAD HEALTHIER LIVES.

TOTAL EDUCATION PROGRAM SERVICES EXPENSES: \$122,172,468

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INCLUDING GRANTS TO OTHER AGENCIES : \$32,790,908

RELATED PROGRAM REVENUE : \$273,930

B) HEALTH AND NUTRITION

SAVE THE CHILDREN WORKS TO ENSURE THAT CHILDREN AND THEIR FAMILIES HAVE

ACCESS AND CAN USE KEY HEALTH AND NUTRITION SERVICES, AND ADOPT

HEALTH-PROMOTING BEHAVIORS IN BOTH DEVELOPMENT AND EMERGENCY SITUATIONS.

WE USE EVIDENCE-BASED INTERVENTIONS AND INNOVATIONS TO ADDRESS THE MAJOR

CAUSES OF ILLNESS, DEATH AND MALNUTRITION AND CONTINUE TO DEVELOP

INNOVATIVE STRATEGIES TO DELIVER THESE SERVICES EFFECTIVELY AS BROADLY AS

POSSIBLE ESPECIALLY IN RESOURCE-POOR AND EMERGENCY SITUATIONS.

SAVE THE CHILDREN DIRECTLY REACHED 14.9 MILLION NEWBORNS, CHILDREN AND FAMILIES WITH HEALTH AND NUTRITION PROGRAMS IN 2011. AN ADDITIONAL 33.8 MILLION CHILDREN AND ADULTS WERE REACHED INDIRECTLY.

KEY ACCOMPLISHMENTS INCLUDE:

-MALI: A FIVE-YEAR USAID-FUNDED SURVIVAL PROJECT WAS IMPLEMENTED BY SAVE
THE CHILDREN IN FIVE DISTRICTS OF SIKASSO. THIS PROJECT SERVED 84 HEALTH
ZONES WITH A POPULATION OF 1 MILLION PEOPLE IN 464 VILLAGES TO INCREASE
ACCESS TO LIFESAVING TREATMENTS FOR DIARRHEA AND MALARIA.

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-MYANMAR AND PAKISTAN: SAVE THE CHILDREN LAUNCHED GLOBAL FUND-SUPPORTED MALARIA PREVENTION AND CONTROL PROGRAMS THAT WILL REACH OVER 60 MILLION PEOPLE.

-UNITED STATES: STUDENTS IN OUR CHANGE (CREATING HEALTHY, ACTIVE AND NURTURING GROWING-UP ENVIRONMENTS) PROGRAM ACROSS RURAL AMERICA

PARTICIPATED IN AN AVERAGE OF 31 MINUTES OF PHYSICAL ACTIVITY EVERY DAY AND RECEIVED A HEALTHY SNACK.

-WORLDWIDE: SAVE THE CHILDREN CONTINUES TO BE A LEADER IN THE

COMMUNITY-BASED DELIVERY OF LIFE-SAVING TREATMENT OF PNEUMONIA, DIARRHEA,

MALARIA AND NEONATAL INFECTIONS. WE ARE NOW CARRYING OUT NEWBORN AND

CHILD SURVIVAL PROGRAM ACTIVITIES IN 17 COUNTRIES.

TOTAL HEALTH PROGRAM SERVICES EXPENSES: \$110,157,967

INCLUDING GRANTS TO OTHER AGENCIES : \$30,527,569

INCLUDING FOOD AID ( AGRICULTURAL COMMODITIES & OCEAN FREIGHT) : \$ 759,988

RELATED PROGRAM REVENUE : \$526,363

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#### C) HIV/AIDS

SAVE THE CHILDREN'S HIV/AIDS WORK SPANS FROM PREVENTION TO CARE,

MITIGATION AND SUPPORT. WE FOCUS ON THREE PROGRAM PRIORITIES: 1) ORPHANS

AND VULNERABLE CHILDREN (AND CARE AND SUPPORT) 2) PREVENTION OF HIV/AIDS

FOR AT-RISK YOUTH AND 3) PREVENTION OF MOTHER-TO-CHILD TRANSMISSION. OUR

MULTI-SECTORAL APPROACH WORKS TO PREVENT THE SPREAD OF HIV AND MITIGATE

THE IMPACT OF AIDS ON CHILDREN AND FAMILIES AROUND THE WORLD.

IN 2011 SAVE THE CHILDREN'S PROGRAMS IN HIV/AIDS REACHED 9.4 MILLION CHILDREN AND ADULTS DIRECTLY AND AN ADDITIONAL 88.6 MILLION CHILDREN AND ADULTS INDIRECTLY WITH HIV/AIDS PROGRAMMING. INTERVENTIONS INCLUDED:

-ETHIOPIA: SAVE THE CHILDREN'S FOOD BY PRESCRIPTION PROGRAM ESTABLISHED THERAPEUTIC AND SUPPLEMENTARY NUTRITIONAL INTERVENTIONS IN 206 HEALTH FACILITIES FOR ADULTS AND CHILDREN LIVING WITH HIV, AS WELL AS ORPHANS AND VULNERABLE CHILDREN WHO ARE MALNOURISHED. THE PROJECT PROVIDES NUTRITIONAL ASSESSMENT TO NEARLY 128,000 CHILDREN AND ADOLESCENTS, AND NUTRITIONAL INTERVENTIONS TO OVER 14,000 WHO ARE ACUTELY MALNOURISHED.

-VIETNAM, MANILA AND BANGLADESH: SAVE THE CHILDREN IS WORKING GLOBALLY TO ENSURE YOUNG PEOPLE WHO ARE AT GREAT RISK ARE NOT FORGOTTEN BY HIV PREVENTION PROGRAMS. EXAMPLES INCLUDE OUR WORK WITH STREET YOUTH IN VIETNAM, WITH YOUTH AT RISK IN METRO-MANILA AND OTHER URBAN SETTINGS AND TO BETTER UNDERSTAND THE PARTICULAR RISKS FACING CHILDREN OF SEX WORKERS

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IN BANGLADESH.

-WORLDWIDE: SAVE THE CHILDREN'S ESSENTIAL PACKAGE SUPPORTS THOSE AT THE POINT OF SERVICE DELIVERY IN HIV-BURDEN SETTINGS. IT ENABLES THEM TO DELIVER ASSISTANCE TO CAREGIVERS SO THAT THEY CAN BETTER CARE FOR YOUNG CHILDREN BETWEEN THE AGES OF 0-8 - THE MOST CRITICAL TIME FOR A CHILD'S DEVELOPMENT.

TOTAL HIV/AIDS PROGRAM SERVICES EXPENSES : \$ 33,339,502

INCLUDING GRANTS TO OTHER AGENCIES : \$ 8,915,650

RELATED PROGRAM REVENUE : \$270,567

D) CHILD PROTECTION

SAVE THE CHILDREN WORKS WITH CHILDREN, THEIR FAMILIES, COMMUNITIES,

SERVICE PROVIDERS, AND POLICY MAKERS TO PREVENT AND RESPOND TO ABUSE,

NEGLECT, EXPLOITATION, AND VIOLENCE. WE WORK TO ENSURE THAT COMMUNITY

STRUCTURES ARE ABLE TO IDENTIFY, PREVENT AND RESPOND TO CHILD PROTECTION

ISSUES AND THREATS AND THOSE GOVERNMENTS DEVELOP FRAMEWORKS, STRUCTURES,

POLICIES, PROCEDURES AND MINIMUM STANDARDS THAT GUIDE ACTION TO PROTECT

CHILDREN. WE ALSO PRIORITIZE WORKING TO ENSURE THAT SERVICES IN

EMERGENCIES RESPOND TO ADDITIONAL THREATS TO AND ISSUES OF CHILDREN,

SERVICES RESPOND TO THREATS TO ESPECIALLY VULNERABLE CHILDREN AND THAT ESPECIALLY VULNERABLE CHILDREN ARE ABLE TO ENJOY THE SAME SUPPORT AS OTHER CHILDREN IN EMERGENCIES AND NON-EMERGENCIES CONTEXTS.

IN 2011 WE DIRECTLY DELIVERED PROTECTIVE AND SUPPORT SERVICES TO 1.3 MILLION VULNERABLE CHILDREN AND ADULTS AND INDIRECTLY TO AN ADDITIONAL 24.4 MILLION.

INTERVENTIONS IN 2011 INCLUDED:

-EAST AFRICA: SAVE THE CHILDREN REUNITED SEPARATED CHILDREN WITH THEIR PARENTS AND CAREGIVERS AFTER FLEEING DROUGHT-STRICKEN REGIONS, ASSISTED GIRLS AND BOYS SUBJECTED TO SEXUAL VIOLENCE AND PROVIDED PSYCHOSOCIAL SUPPORT TO CHILDREN THROUGH OUR CHILD FRIENDLY SPACES.

-ASIA AND MIDDLE EAST: PARTICIPANTS FROM OVER 21 COUNTRIES ATTENDED CHILD PROTECTION TRAININGS ON RAPID ASSESSMENT AND COMMUNITY MOBILIZATION DURING AN EMERGENCY. THIS INITIATIVE WAS UNDERTAKEN AS PART OF SAVE THE CHILDREN'S COMMITMENT TO LEADERSHIP IN CHILD PROTECTION WORLDWIDE

-COLUMBIA: SAVE THE CHILDREN SUCCESSFULLY PILOTED AN INITIATIVE TO ADDRESS PERSISTENT AND INCREASING VIOLENCE IN URBAN AREAS OF COLUMBIA. PARTICIPATING CHILDREN AND COMMUNITIES ARE NOW DEVELOPING STRATEGIES TO PROMOTE PEACEFUL COEXISTENCE AND RECONCILIATION THROUGH A SERIES OF PEER-GROUP WORKSHOPS AND COMMUNITY-BASED ACTIVITIES.

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TOTAL CHILDREN PROTECTION PROGRAM SERVICES EXPENSES: \$23,124,608

INCLUDING GRANTS TO OTHER AGENCIES : \$ 6,656,906

RELATED PROGRAM REVENUE : \$ 613,336

E) EMERGENCIES

SAVE THE CHILDREN AIMS TO BE THE GLOBAL LEADER IN EMERGENCY RESPONSE FOR CHILDREN AFFECTED BY DISASTERS AND CRISIS. OUR EMERGENCY PRIORITIES ARE

1) EMERGENCY RESPONSE - SAVE LIVES AND ALLEVIATE SUFFERING: PROVIDE

LARGE-SCALE, HIGH QUALITY PROGRAMS FOR CHILDREN IN EMERGENCIES AND 2)

DISASTER RISK REDUCTION - HELP COMMUNITIES PREPARE: WORK WITH COMMUNITIES

IN COUNTRIES HIGHLY PRONE TO DISASTERS TO ASSESS RISK, DEVELOP COMMUNITY

EMERGENCY RESPONSE ACTION PLANS, AND MITIGATE POTENTIAL DISASTERS.

DURING FISCAL YEAR 2011 SAVE THE CHILDREN REACHED 8 MILLION CHILDREN AND ADULTS DIRECTLY AND 6.6 MILLION INDIRECTLY WITH EMERGENCY PROGRAMMING.

NOTABLE EMERGENCY ACTIVITY INCLUDED:

PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)

FORM 990, PART III, LINE 4

-EAST AFRICA: OVER 13 MILLION PEOPLE IN ETHIOPIA, KENYA AND SOMALIA WERE AFFECTED BY FOOD INSECURITY AS THE REGION WITHERED UNDER EXTREME

DROUGHT.

SAVE THE CHILDREN REACHED OVER 2.5 MILLION CHILDREN AND ADULTS THROUGH
FOOD AND WATER DISTRIBUTIONS, SUPPLEMENTAL FEEDING PROGRAMS, EMERGENCY
NUTRITION AND HEALTH WORK, DISTRIBUTIONS OF SHELTER AND HYGIENE SUPPLIES
AND PROGRAMS TO HELP PASTORALIST FAMILIES PROTECT THEIR LIVELIHOODS.

\*\*IN SOMALIA OUR LIFE-SAVING WATER PROJECTS HELPED KEEP 99,250 PEOPLE AND
THEIR LIVESTOCK ALIVE

- \*\*IN ETHIOPIA OUR LIVELIHOODS PROGRAM REACHED 1.1 MILLION PEOPLE WITH FOOD AND CASH VOUCHERS AND DISTRIBUTIONS OF AGRICULTURAL ITEMS SUCH AS SEEDS AND ANIMAL FEED. WE ALSO RAN LIVESTOCK FEEDING, VACCINATION AND TREATMENT ACTIVITIES TO PROTECT FAMILIES' MOST IMPORTANT ASSETS.
- \*\*IN KENYA WE SUCCESSFULLY ADVOCATED FOR ALL CHILDREN UNDER AGE FIVE IN
  THE AFFECTED REGION TO BE FED. THIS RESULTED IN OVER 121,500 CHILDREN,
  PREGNANT WOMEN AND BREASTFEEDING MOTHERS RECEIVING FOOD.
- -JAPAN: SINCE THE EPIC EARTHQUAKE AND TSUNAMI, SAVE THE CHILDREN HAS WORKED NONSTOP TO ALLEVIATE CHILDREN'S SUFFERING AND ENSURE THEIR WELL-BEING.
- \*\*IN THE IMMEDIATE AFTERMATH OF THE DISASTER, SAVE THE CHILDREN PROVIDED ESSENTIAL HOUSEHOLD AND HYGIENE SUPPLIES SUCH AS BLANKETS, TOWELS, SOAP, DIAPERS AND FIRST AID KITS.
- \*\*OVER 3,590 CHILDREN RECEIVED ACCESS TO CHILD-CARE CENTERS
- \*\*NEARLY 20,990 CHILDREN WERE GIVEN SCHOOL LUNCHES AND 3,390 CHILDREN RECEIVED BACK-TO-SCHOOL KITS.

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\*\*NEW CLASSROOM SUPPLIES WERE PROVIDED TO 4,229 CHILDREN

-PAKISTAN: ON THE HEELS OF PAKISTAN'S WORST-EVER FLOODING IN 2010,
2011'S MONSOON RAINS DISPLACED FIVE MILLION PEOPLE FROM THEIR HOMES. SAVE
THE CHILDREN HAS REACHED OVER 620,000 FLOOD-AFFECTED PEOPLE THROUGH
EMERGENCY MEDICAL CARE, DISTRIBUTION OF FOOD, SHELTER, NON-FOOD RELIEF
ITEMS, HYGIENE ITEMS, HOUSEHOLD KITS AND WATER PURIFICATION TABLETS.

-UNITED STATES: SINCE THE INITIAL DAYS AFTER THE DEADLY TORNADOS OF LAST SPRING, SAVE THE CHILDREN HAS BEEN WORKING CLOSELY WITH COMMUNITIES ACROSS WESTERN ALABAMA TO MEET CHILDREN'S NEEDS AND HELP FAMILIES COPE WITH THE STRESS, LOSS, FEAR AND GRIEF THAT FOLLOW IN THE WAKE OF SUCH DISASTERS. IN THE NEWEST STEP TOWARD RECOVERY SAVE THE CHILDREN IS PROVIDING OUR SIGNATURE "JOURNEY OF HOPE" EMOTIONAL RECOVERY PROGRAM TO 4,000 CHILDREN AND ADULT CAREGIVERS THROUGHOUT THE REGION.

TOTAL EMERGENCY PROGRAM SERVICES EXPENSES : \$ 161,399,958

INCLUDING GRANTS TO OTHER AGENCIES : \$29,591,003

INCLUDING FOOD AID ( AGRICULTURAL COMMODITIES & OCEAN FREIGHT) : \$48,906,612

TOTAL PROGRAM REVENUE : \$3,919,726

#### F) CHILD RIGHTS GOVERNANCE

DESPITE THE CONVENTION ON THE RIGHTS OF THE CHILD MILLIONS OF CHILDREN

AROUND THE WORLD ARE DENIED THEIR RIGHTS, PARTICULARLY THOSE LIVING IN

CONFLICT. THESE CHILDREN FACE INCREASED RISK OF ABUSE, EXPLOITATION AND

FORCED RECRUITMENT INTO THE ARMED FORCES. AMONG OTHER VIOLATIONS

MILLIONS OF CHILDREN ARE DENIED THE BASIC RIGHT TO GO TO SCHOOL, YET THE

RIGHT TO A QUALITY EDUCATION COULD OFFER PROTECTION TO THESE CHILDREN AND

OPEN THE DOOR TO OTHER RIGHTS.

IN 2011 SAVE THE CHILDREN'S CHILD RIGHTS GOVERNANCE PROGRAMS REACHED 333 THOUSAND CHILDREN AND ADULTS DIRECTLY AND AN ADDITIONAL 1.5 MILLION CHILDREN AND ADULTS INDIRECTLY. INTERVENTIONS INCLUDED:

-LIBERIA: SAVE THE CHILDREN WORKED IN COALITION WITH PARTNERS TO ADVOCATE FOR THE ENACTMENT OF THE CHILDREN ACT. IN 2011 THE ACT WAS ENACTED AND CHILD PROTECTION STAKEHOLDERS ARE NOW SUPPORTING THE ROLL OUT OF LAW. THE LAW INCLUDES A GUARANTEE OF CHILD PARTICIPATION AND ENSURING THAT DUTY BEARERS ARE HELD ACCOUNTABLE.

-WEST BANK AND GAZA STRIP: AS PART OF INCREASING AWARENESS ON THE
CONVENTION OF THE RIGHTS OF THE CHILD, SAVE THE CHILDREN LEAD A

PARTICIPATION PROJECT WITH CHILDREN AND FOCUS GROUPS WITH PARENTS. A

MID-YEAR REVIEW HAS SHOWN THE PARTICIPANT CHILDREN HAVE SINCE HAD GREATER

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SELF-EXPRESSION AROUND THEIR RIGHTS AND BETTER COMMUNICATION SKILLS.

RECOMMENDATIONS ON CRC PRIORITIES HAVE NOW BEEN INCORPORATED INTO THE

MINISTRY 2011-2013 STRATEGY. THE PA HAS ALSO AGREED TO ESTABLISH AND

SUPPORT A CHILD RIGHTS OMBUDS UNIT WITHIN THE INDEPENDENT COMMISSION FOR

TOTAL CHILD RIGHTS GOVERNANCE PROGRAM SERVICES EXPENSES: \$1,973,486

INCLUDING GRANTS TO OTHER AGENCIES : \$ 565,504

RELATED PROGRAM REVENUE : \$ 3,916

#### G) CHILD POVERTY/LIVELIHOODS

HUMAN RIGHTS.

SAVE THE CHILDREN'S PROGRAMS TO REDUCE CHILD POVERTY AND SUPPORT FAMILY LIVELIHOODS FOCUS ON FOUR MAIN AREAS: 1) ASSET RECOVERY AND PROTECTION: IN EMERGENCIES SAVE THE CHILDREN PROVIDES RESOURCES AND SUPPORT FOR EARLY LIVELIHOODS RECOVERY. OUR PROGRAMS ENABLE HOUSEHOLDS TO MEET IMMEDIATE SURVIVAL NEEDS AND RECOVER ASSETS. 2) INCOME ASSET AND GROWTH: ASSIST INDIGENT FAMILIES IN DEVELOPING STRATEGIES TO GROW INCOME AND ASSETS, HELPING STRENGTHEN THEIR RESILIENCY TO DISTRESS. 3) WORK WITH YOUTH: SAVE THE CHILDREN IMPLEMENTS SEVERAL YOUTH-FOCUSED PROGRAMS THAT HAVE DEMONSTRATED THAT EARLY INTRODUCTION OF SKILLS AND TRAINING IN CASH MANAGEMENT AND SAVINGS PRACTICES LEAD TO MORE POSITIVE LONG-TERM

FINANCIAL HABIT AND IMPROVED FUTURE PROSPECTS, ESPECIALLY FOR GIRLS. 4)

LIVELIHOODS INNOVATIONS: ASIDE FROM EMERGENCIES, OUR CONTINUING CHALLENGE

REMAINS THE IMPROVEMENT OF FAMILIES' LONG-TERM FINANCIAL SECURITY BY

INTRODUCING NEW ACTIVITIES AND STRATEGIES AS WELL AS EXPANDING PROVEN

INTERVENTIONS, TO MAKE A POSITIVE IMPACT ON CHILDREN OF LOW-INCOME

HOUSEHOLDS.

IN 2011, 5 MILLION CHILDREN AND ADULTS BENEFITED DIRECTLY FROM LIVELIHOODS PROGRAMS AND ANOTHER 13.9 MILLION BENEFITED INDIRECTLY.

PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)

FORM 990, PART III, LINE 4

HIGHLIGHTS FROM 2011:

-YEMEN: WE WORKED WITH OVER 11,000 PEOPLE IN SA'ADA CITY, DISTRIBUTING

VOUCHERS TO HOUSEHOLDS FOR LOCAL FOOD MARKETS. THROUGH THIS INITIATIVE,

CHILDREN AND THEIR FAMILIES WERE ABLE TO EAT MORE DIVERSE FOODS AND

SUPPORT THEIR MARKETS.

-GUATEMALA: THROUGH SAVE THE CHILDREN'S MULTI-YEAR ASSISTANCE PROGRAM, WE
WERE ABLE TO REDUCE CHRONIC MALNUTRITION BY EIGHT PERCENT IN COMMUNITIES
THAT SOLELY RECEIVED NUTRITIONAL PROGRAMMING. FOR COMMUNITIES THAT
RECEIVED LIVELIHOODS AND NUTRITIONAL PROGRAMMING, CHRONIC MALNUTRITION
WAS REDUCED BY SIXTEEN PERCENT.

-NEPAL: SAVE THE CHILDREN IS DEVELOPING AFFORDABLE MICROHEALTH INSURANCE

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PRODUCTS TO EMPOWER COMMUNITIES TO SET THEIR OWN HEALTHCARE PRIORITIES

REDUCE THE FINANCIAL BURDEN OF HEALTH COSTS AND ENABLE EQUITABLE ACCESS

TO HIGH QUALITY HEALTH CARE FOR EVERY FAMILY MEMBER. OVER 5,000 PEOPLE

ENROLLED IN OUR MICRO HEALTH INSURANCE PILOT.

TOTAL CHILD POVERTY/LIVELIHOODS PROGRAM SERVICES EXPENSES: \$56,842,244

INCLUDING GRANTS TO OTHER AGENCIES : \$ 14,049,942

RELATED PROGRAM REVENUE : \$ 301,251

H) PROGRAM DEVELOPMENT AND PUBLIC POLICY SUPPORT

EFFECTIVE ADVOCACY AND SOCIAL MOBILIZATION ARE KEY TO ACHIEVING SAVE THE CHILDREN'S ASPIRATION TO REACH A DRAMATICALLY LARGER NUMBER OF CHILDREN AND TO INCREASE COLLABORATION TO BUILD A GLOBAL MOVEMENT FOR CHILDREN. WE TAKE THE RESULTS FROM THE EVIDENCE BASE AND OUR EXPERIENCE TO DECISION MAKERS BOTH IN THE U.S. AND ON THE INTERNATIONAL SCENE, AND BUILD COMMITMENT AMONG DONOR AND RECIPIENT COUNTRIES TO IMPROVE NATIONAL POLICIES AND PROGRAMS. WE MOBILIZE BROAD SEGMENTS OF SOCIETY TO UNDERSTAND CHILDREN'S NEEDS AND RIGHTS SO THAT SOCIAL NORMS THAT BLOCK CHILDREN'S HEALTHY DEVELOPMENT CAN BE CHANGED. THIS COMBINATION OF INFLUENCING POLICY, PROGRAM GUIDELINES, FUNDING AND SOCIAL NORMS TO BENEFIT CHILDREN SETS THE STAGE FOR EFFECTIVE IMPLEMENTATION EFFORTS AT

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THE COMMUNITY, DISTRICT, PROVINCIAL AND NATIONAL LEVELS.

IN 2011 SAVE THE CHILDREN WORKED WITH GOVERNMENTS IN MANY COUNTRIES,
GLOBAL INSTITUTIONS AND DONORS TO INFLUENCE POLICIES AND INCREASE
RESOURCES TO SUPPORT CHILDREN WORLDWIDE. ABOVE ALL WE ADVOCATED FOR
CHILDREN WITH THE U.S. CONGRESS AND THE OBAMA ADMINISTRATION. FOR
EXAMPLE:

-SAVE THE CHILDREN WORKED WITH THE OBAMA ADMINISTRATION AND CHAMPIONS IN CONGRESS AND THE SENATE TO ENSURE FUNDING FOR INTERNATIONAL MATERNAL, NEWBORN AND CHILD HEALTH PROGRAMS AND URGED THE US GOVERNMENT TO SUPPORT CRUCIAL HEALTH WORKERS AS PART OF THE GLOBAL HEALTH INITIATIVE.

-THE SAVE THE CHILDREN 2011 ADVOCACY DAY BROUGHT TOGETHER 215 PEOPLE FROM AROUND THE US TO LEARN ABOUT NEWBORN AND MATERNAL SURVIVAL AND U.S EDUCATION NEEDS. THESE SUPPORTERS MET WITH THE OFFICES OF 120 MEMBERS OF CONGRESS TO PERSUADE CONGRESS TO INCREASE FUNDING FOR HEALTH PROGRAMS, AS WELL AS SUPPORT THE EDUCATION NEEDS OF RURAL AMERICA.

-AS PART OF OUR HUMANITARIAN ADVOCACY WORK SAVE THE CHILDREN ISSUED A REPORT ON AFGHANISTAN IN TRANSITION: PUTTING CHILDREN AT THE HEART OF DEVELOPMENT. THE REPORT WAS LAUNCHED WITH THE BROOKINGS INSTITUTION TARGETING THE US GOVERNMENT, THINK TANK AND NGO PANELISTS. OUR FIELD STAFF FROM AFGHANISTAN MET WITH CONGRESS AND THE ADMINISTRATION TO DISCUSS THE REPORT AND HOSTED A HILL BRIEFING ON TRANSITION.

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TOTAL PROGRAM DEVELOPMENT PROGRAM SERVICES EXPENSES: \$ 23,118,789

INCLUDING GRANTS TO OTHER AGENCIES : \$ 261,341

(I) SAVE THE CHILDREN INTERNATIONAL

SCUS IS A MEMBER OF SAVE THE CHILDREN ASSOCIATION (SCA), A SWISS MEMBERSHIP ORGANIZATION. SCA CURRENTLY HAS 29 INDEPENDENT, AUTONOMOUS, NONPROFIT, PRIVATE VOLUNTARY MEMBERSHIP ORGANIZATIONS THAT BEAR THE NAME SAVE THE CHILDREN OR A RELATED DESIGNATION (THE MEMBERS). SCA CREATED SAVE THE CHILDREN INTERNATIONAL (SCI), A UNITED KINGDOM BASED CHARITABLE ENTITY, OF WHICH SCA IS THE SOLE MEMBER, AND THEREFORE, SCI IS EFFECTIVELY A WHOLLY OWNED SUBSIDIARY OF SCA. SCUS FUNDS THAT ARE BEING PROGRAMMED BY SAVE THE CHILDREN INTERNATIONAL (SCI) IN 2011 WERE \$40,848,655.

FORM 990-T

FORM 990, PART V, LINE 3B

SAVE THE CHILDREN FILED AN EXTENSION FOR FORM 990-T BY MAY 15, 2012 AND WILL FILE THE 990-T BY THE EXTENDED DEADLINE.

FOREIGN FINANCIAL ACCOUNTS

FORM 990, PART V, LINE 4B

**AFGHANISTAN** 

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AZERBAIJAN

ARMENIA

BANGLADESH

BHUTAN

BOLIVIA

BRAZIL

CAMBODIA

CHINA

COLUMBIA (BOGOTA)

DOMINICAN REPUBLIC

EGYPT

EL SALVADOR

ETHIOPIA

GEORGIA

GHANA

GUATEMALA

GUINEA

HAITI

HONDURAS

INDIA

INDONESIA

IRAQ

JORDAN

KYRGYZSTAN

MALAWI

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MOZAMBIQUE

MYANMAR

NEPAL/HIMALAYA

NICARAGUA

PAKISTAN

PHILIPPINES

SOUTH AFRICA

SOUTH SUDAN

SUDAN

TAJIKISTAN

THAILAND

TURKEY

UGANDA

UNITED STATES

UNITED KINGDOM

UZBEKISTAN

VIET NAM

WEST BANK/GAZA

ZAMBIA

BUSINESS RELATIONSHIPS

FORM 990, PART VI, LINE 2

BUSINESS RELATIONSHIPS DESCRIPTION: TWO OR MORE PERSONS ARE EACH A

DIRECTOR, TRUSTEE, OFFICER OR GREATER THAN 10% OWNER IN THE SAME

BUSINESS OR INVESTMENT ENTITY

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- TRUSTEE MEMBERS CHARLOTTE GUYMAN AND SUSAN DECKER

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

THE FORM 990 WAS REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD ON JULY 27, 2012 AND THEN SENT TO THE ENTIRE BOARD FOR REVIEW PRIOR TO THE AUGUST 15TH FILING DATE.

COMPLIANCE WITH CONFLICT OF INTEREST POLICY

FORM 990, PART VI, LINE 12C

GOVERNING BOARD, CORPORATE OFFICERS, EMPLOYEES AND ANY OTHERS
REPRESENTING THE ORGANIZATION. SAVE THE CHILDREN'S BYLAWS REQUIRE THAT
MEMBERS OF ITS GOVERNING BOARD AND ITS CORPORATE OFFICERS DISCLOSE ALL
CONFLICTS OF INTEREST PROMPTLY AT THE TIME THEY ARISE, AND ANNUALLY VIA A
WRITTEN DISCLOSURE PROCESS. THE GOVERNING BOARD IS CHARGED WITH
REVIEWING CONFLICT OF INTEREST TRANSACTIONS AND ASSOCIATED DECISIONS, AND
MAKING A DETERMINATION REGARDING ANY RESTRICTIONS TO BE IMPOSED ON THE
TRANSACTION. THEIR DETERMINATION AND ALL MATERIAL FACTS ARE RECORDED IN
MEETING MINUTES. SAVE THE CHILDREN'S EMPLOYEES ARE LIKEWISE REQUIRED TO
DISCLOSE TO THEIR SUPERVISORS PROMPTLY, AND IN WRITING, ALL CONFLICTS OF
INTEREST THAT ARISE AND UPPER-LEVEL MANAGERS ADDITIONALLY COMPLETE AN
ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENT. AN EMPLOYEE'S
SUPERVISOR IS CHARGED WITH REVIEWING A REPORTED CONFLICT OF INTEREST AND
ENSURING THAT THE EMPLOYEE IS NOT INVOLVED IN DECISIONS RELATED TO THE

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DETERMINING COMPENSATION

FORM 990, PART VI, LINES 15A AND 15B

THE COMPENSATION COMMITTEE OF THE BOARD CONDUCTS AN ANNUAL REVIEW AND APPROVAL OF OFFICERS' COMPENSATION. AS PART OF THIS REVIEW AND APPROVAL PROCESS, THE COMMITTEE REFERENCES AVAILABLE MARKET DATA FOR COMPARABLE POSITIONS AND INTERNAL EQUITY CONSIDERATIONS, AND IT UTILIZES AN ANALYSIS OF OFFICER SALARIES PREPARED BY AN INDEPENDENT EXTERNAL ADVISOR USING INDUSTRY BENCHMARKING DATA. THE REVIEW PROCESS COVERING ALL OFFICERS WAS COMPLETED IN FEBRUARY 2011.

AVAILABLE TO THE PUBLIC

FORM 990, PART VI, LINE 19

SAVE THE CHILDREN MAKES ITS GOVERNING DOCUMENTS CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE ON ITS PUBLIC WEBSITE AND UPON REQUEST.

OTHER CHANGES IN NET ASSETS OR FUND BALANCES

FORM 990, PART XI, LINE 5

UNREALIZED LOSS ON INVESTMENTS : \$ (5,271,025)

FOREIGN CURRENCY EXCHANGE GAIN : \$ 185,590

MISCELLANEOUS ROUNDING : \$ (3)

\_\_\_\_\_

TOTAL LINE 5 : \$ (5,085,438)

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Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

ATTACHMENT 1

## FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT,

 ${\tt DC,FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,}$ 

 ${\tt MN,MS,NV,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,}$ 

RI,SC,TN,UT,VA,WA,WV,WI,

ATTACHMENT 2

990,	PART VII-	COMPENSATION	OF	THE	FIVE	HIGHEST	PAID	IND.	CONTRACTORS	
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NAME AND ADDRESS		DESCRIPTION OF SERVICES	COMPENSATION
GRASSROOT CAMPAIGN 1888 SHERMAN STREET DENVER, CO 80203		FUNDRAISING, PERSONA	2,145,342.
PUBLIC OUTREACH 207 WEST HASTINGS STREET V6B19 VANCOUVER BC CANADA	н7	FUNDRAISING CONSULT.	968,838.
KPMG LLP DEPT 0511, PO BOX 120001 DALLAS, TX 75312-0511		AUDIT & ACCOUNTING	812,423.
DIRECT POINT GROUP 251 NORTH SERVICE RD W. SUITE OAKWILLE ONTARIO CANADA	300 L6M 3E	MEDIA PLACEMENT	713,163.
LAKEWOOD CHURCH 3700 SOUTHWEST FREEWAY HOUSTON, TX 77027		OUTREACH SUPPORT	645,000.
	TOTAL COMPENSATION		5,284,766.

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Name of the organization	Employer identification number
SAVE THE CHILDREN FEDERATION, INC.	06-0726487
	TTACHMENT 3
FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD	
GROSS SALES LESS RETURNS AND ALLOWANCES	530.
INVENTORY AT BEGINNING OF YEAR	
PURCHASES	
SALARIES AND WAGES	
OTHER COSTS	
SUBTOTAL	
MINUS ENDING INVENTORY	
COST OF COORS SOLD	530

#### SCHEDULE R (Form 990)

## **Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

 Open to Public Inspection

Name of the	organization					Employer id	entification	number
SAVE TH	E CHILDREN FEDERATION, INC.					06-072	6487	
Part I	Identification of Disregarded Entities (Complete if t	he organization a	answered "Yes" to	o Form 990, Part	IV, line 33.)			
	(a) Name, address, and EIN of disregarded entity		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	(e) End-of-year assets	(f Direct co ent	ontrolling
_(1)								
_(2)								
_(3)								
_(4)								
<u>(5)</u>								
<u>(6)</u>								
Part II	Identification of Related Tax-Exempt Organizations one or more related tax-exempt organizations during t	(Complete if the	e organization an	swered "Yes" to I	Form 990, Part IV	, line 34 becaus	e it had	
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (statement) or foreign countr		(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	cont	(g) 512(b)(13) trolled ntity?
							Yes	No
_(1)								
_(2)								
<u>(3)</u>								
_(4)								
<u>(5)</u>								
<u>(6)</u>								
_(7)								

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

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Part III	because it had one or r						inswered res	IO F	OHH	990, Part IV, I	ne s	04	
	(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	Dispro	h) portionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	(j) eral or aging tner?	(k) Percentage ownership
			oounity)					Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
/ <b>7</b> \													

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)  Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) THE R.F. CHARITABLE REMAINDER TRUST 33-6142393							
624 HARBOR ISLAND DRIVE NEWPORT BEACH, CA 92660-7226	INVESTMENT	CA	STC	TRUST		225,832.	100.0000
(2) ESTATE OF B.W. 76-0698844							
P.O. BOX 219078 KANSAS CITY, MO 64121-9078	INVESTMENT	MO	STC	TRUST		5,552.	100.0000
(3) AZERI STAR MICROFINANCE							
9A/1 GEN AKIM ABBASOV STREET BAKU, AJ	MICRO LOANS	AJ	STC	C CORP	1,054,992.	2,102,265.	100.0000
(4)							
(5)							
<u>(6)</u>							
<u>(7)</u>							

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$\overline{}$						
Pa	Transactions With Related Organizations (Complete if the organization answered "Ye	es" to Form 990, Pa	rt IV, line 34, 35, 35a, or 3	36.)		
Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Ye	es No
1	During the tax year, did the organization engage in any of the following transactions with one or more re					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a	X
b	Gift, grant, or capital contribution to related organization(s)				1b	Х
С	Gift, grant, or capital contribution from related organization(s)				1 c	Х
d	Loans or loan guarantees to or for related organization(s)				1 d	X
е	Loans or loan guarantees by related organization(s)				1 e	X
f	Sale of assets to related organization(s)				1f	X
g	Purchase of assets from related organization(s)				1g	X
h	Exchange of assets with related organization(s)				1h	X
i	Lease of facilities, equipment, or other assets to related organization(s)				1i	X
j	Lease of facilities, equipment, or other assets from related organization(s)				1j	X
k	Performance of services or membership or fundraising solicitations for related organization(s)				1k	Х
I	Performance of services or membership or fundraising solicitations by related organization(s)				11	X
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1 m	X
n	Sharing of paid employees with related organization(s)				1n	X
0	Reimbursement paid to related organization(s) for expenses				10	X
р	Reimbursement paid by related organization(s) for expenses				1p	X
q	Other transfer of cash or property to related organization(s)				1q	X
r	Other transfer of cash or property from related organization(s)				1r	X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete the	nis line, including cove	red relationships and transa	ction thre	sholds.	
	(a) Name of other organization	<b>(b)</b> Transaction type (a–r)	<b>(c)</b> Amount involved		(d) of determ unt involve	
(1)						
<u>(2)</u>						
(3)						
<u>(4)</u>						
(5)						
	·	i .	1			

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## Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	501(	oartners tion	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		ownership	
			section 512-514)	Yes	No			Yes	No	(F01111 1000)	Yes	No		
(1)														
(2)														
(3)														
<u>(4)</u>														
<u>(5)</u>														
<u>(6)</u>														
<u>(7)</u>														
<u>(8)</u>														
<u>(9)</u>														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

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## Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).